Case 23-10718-0	CTG Doc 824	Filed (1/12/12/	Docket #0834	Date Filed: 04/24/2024
UNITED	STATES BAN	KRUPTCY COU	RT	
	DISTRICT	TOF Delaware		
In re: John C. Heath Attorney at Law PC	\$ \$		o. <u>23-10725</u> ase No. <u>23-10713</u>	8
Debtor(s)	3 §	🖂 Join	ntly Administered	1
Post-confirmation Report				Chapter 11
Quarter Ending Date: 03/31/2024	_	Р	Petition Date: 06/04/2	2023
Plan Confirmed Date: 12/26/2023		Plan Ef	fective Date: <u>12/29/2</u>	2023
This Post-confirmation Report relates to: • R	eorganized Debtor			
$\bigcirc 0$	ther Authorized Party	or Entity:		
		Name o	f Authorized Party o	or Entity

/s/ Michael W. Yurkewicz

Signature of Responsible Party

04/24/2024

Date

Michael W. Yurkewicz Printed Name of Responsible Party

919 North Market Street, Suite 1000 Wilmington, Delaware 19801 Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.



Case No. 23-10725

Part 1: Summary of Post-confirmation Transfers

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	\$0	\$0
b. Non-cash securities transferred	\$0	\$0
c. Other non-cash property transferred	\$0	\$0
d. Total transferred (a+b+c)	\$0	\$0

	nfirmation Professional		Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
Profess incurre	sional fees & expenses (bank ed by or on behalf of the debt	ruptcy) or Aggregate Total				
Itemize	ed Breakdown by Firm					
	Firm Name	Role				
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Case No. 23-10725

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				Approved Current Quarter	Approved Cumulative	Paid Current	Paid Cumulative
				Current Quarter	Culturative	Quarter	Cumulative
b.		sional fees & expenses (nonbank d by or on behalf of the debtor	cruptcy) <i>Aggregate Total</i>				
	Itemize	ed Breakdown by Firm					
		Firm Name	Role			_	
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UST Form 11-PCR (12/01/2021)

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Case No. 23-10725

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All profes	sional fees and expenses (deb	otor & committees)		

## Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

	Total Anticipated Payments Under Plan	Paid Current Quarter	Paid Cumulative	Allowed Claims	% Paid of Allowed Claims
a. Administrative claims	\$0	\$0	\$0	\$0	0%
b. Secured claims	\$0	\$0	\$0	\$0	0%
c. Priority claims	\$0	\$0	\$0	\$0	0%
d. General unsecured claims	\$0	\$0	\$0	\$0	0%
e. Equity interests	\$0	\$0	\$0		

Part 4: Questionnaire		
a. Is this a final report?		Yes 🔿 No 💿
If yes, give date Final Decree was entered:		
If no, give date when the application for Final Decree is anticipated:	07/31/2024	
b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. §	Yes 💿 No 🔿	

Case No. 23-10725

#### **Privacy Act Statement**

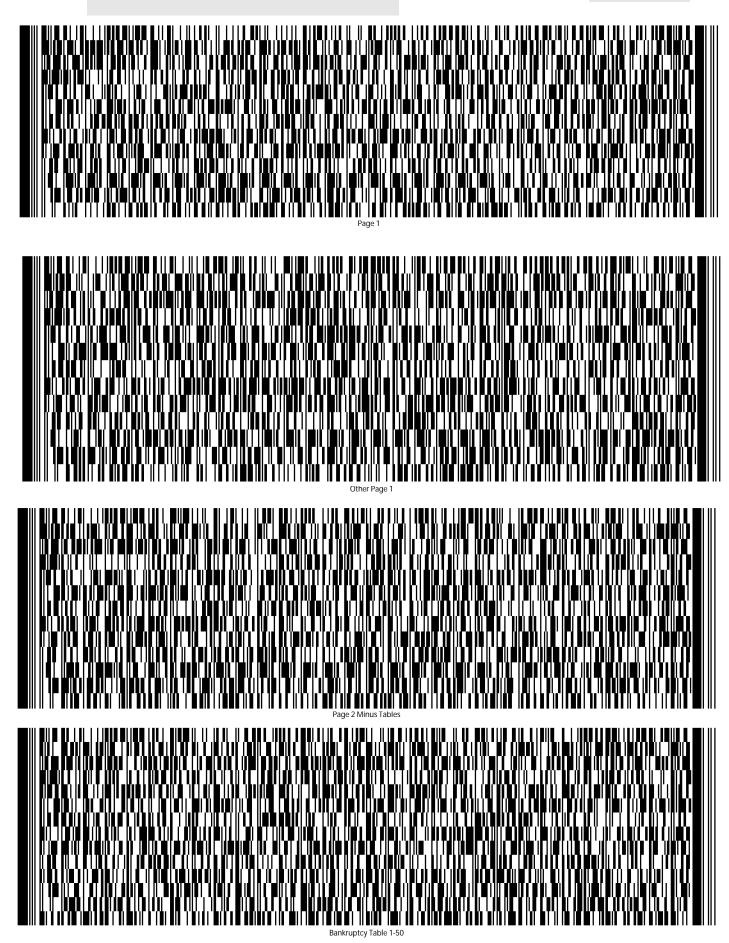
28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee's duties, or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/ rules\_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case, or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

# I declare under penalty of perjury that the foregoing Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

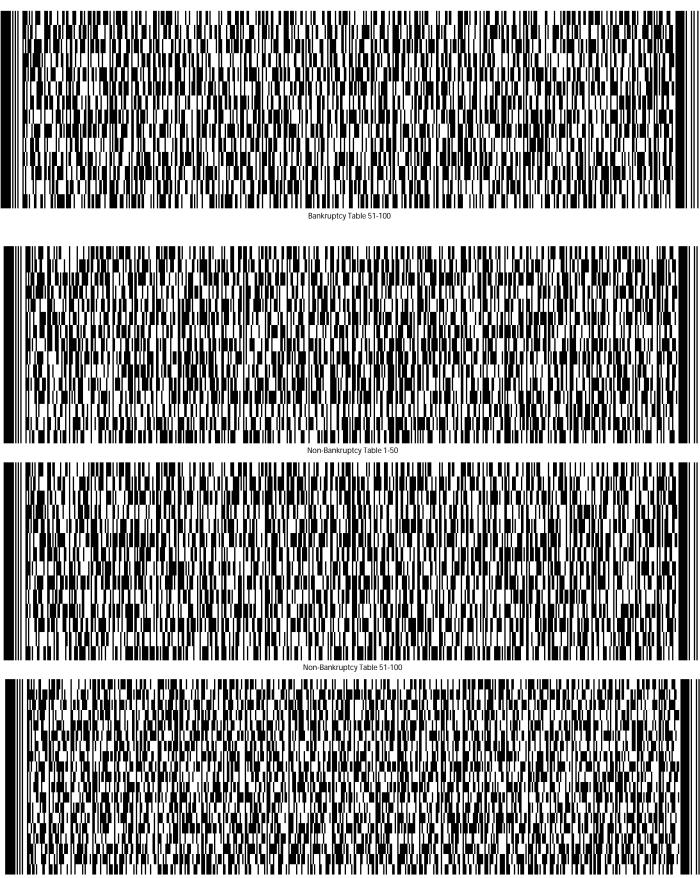
/s/ Mark Roberts Signature of Responsible Party

Plan Administrator Title Mark Roberts Printed Name of Responsible Party 04/24/2024

Date



Case No. 23-10725



Part 3, Part 4, Last Page