UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF FLORIDA CASE NO.: 1:14-cv-23109-RNS

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Plaintiff,

v.

PARTNERS IN HEALTH CARE ASSOCIATION, INC., et al.,

Defendants.	

RECEIVER'S NOTICE OF FILING FIRST MONTHLY BANK STATEMENTS

Peter D. Russin, in his capacity as receiver (the "*Receiver*") of Partners in Health Care Association, Inc.; United Solutions Group Inc.; and their subsidiaries, affiliates, successors and assigns (collectively the "*Receivership Entities*"), appointed pursuant to this Court's Temporary Restraining Order dated August 25, 2014 [ECF No. 9] (the "*TRO*"); the Stipulated Preliminary Injunction Against United Solutions Group Inc., Constanza Gomez Vargas, and Walter S. Vargas [ECF No. 31] (the "*USGI Preliminary Injunction*"); and the Corrected Preliminary Injunction Against Partners In Health Care Association, Inc., and Gary L. Kieper [ECF No. 36] (the "*PIHC Preliminary Injunction*")² and provides:

Pursuant to paragraph P of the USGI Preliminary Injunction and PIHC Preliminary Injunction, the Receiver files a true and correct copy of the following receivership bank accounts:

¹ The administration of the Receivership Entities is referred to herein as the "Estate."

² Collectively the USGI Preliminary Injunction and PIHC Preliminary Injunction are referred to as the "*Preliminary Injunctions*."

- 1. Receiver's Account for Tri Resource Group, Ltd, Peter D. Russin, as Receiver Gibraltar Account No. *3776;
- 2. Receiver's Account for Senior Advantage of Wisconsin, Inc. d/b/a Health Center, Peter D. Russin, as Receiver Gibraltar Account No. *3784;
- 3. Receiver's Account United Solutions Group, Inc. d/b/a Debt Relief Experts, Inc., Peter D. Russin, as Receiver Gibraltar Account No. *3717; and
- 4. Receiver's Account for PIHC, Inc. d/b/a Partners in Health Care, Peter D. Russin, as Receiver Gibraltar Account No. *3792.

Dated: November 7, 2014.

Respectfully submitted,

/s/ Lawrence E. Pecan
Lawrence E. Pecan, Esquire
Florida Bar No. 99086
lpecan@melandrussin.com
MELAND RUSSIN & BUDWICK, P.A.
200 South Biscayne Blvd., Ste. 3200
Miami, Florida 33131
Telephone: (305) 358-6363
Telecopy: (305) 358-1221

Attorneys for Peter D. Russin, Receiver

CERTIFICATE OF SERVICE

I hereby certify that the foregoing is being delivered to the following parties via transmission of Notices of Electronic Filing on November 7, 2014.

/s/ Lawrence E. Pecan Lawrence E. Pecan, Esquire

Gary L. Ivens

Federal Trade Commission 600 Pennsylvania Avenue NW Washington, DC 20580 202-326-2230 - Fax: 326-3395

Email: givens@ftc.gov

Christopher E. Brown

U.S. Federal Trade Commission 600 Pennsylvania Ave NW Mail Stop CC-8509 Washington, DC 20580 202-326-2825

Email: cbrown3@ftc.gov

Keith Thomas Grumer

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954-713-2700 - Fax: 954-713-2713 Email: <u>kgrumer@grumerlaw.com</u>

Bruce S. Rogow

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Tara A Campion

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(954) 767-8909 - Fax: (954) 764-1530 Email: tcampion@rogowlaw.com

Bank & Trust

************AUTO**3-DIGIT 331 1395 0.6580 AT 0.406 6 1 138 RECEIVER'S ACCT FOR PIHC INC DBA PARTNER D/B/A PARTNERS IN HEALTH CARE PETER RUSSIN AS RECEIVER 200 S BISCAYNE BLVD SUITE 3200 MIAMI FL 33131-5323

Date 10/27/14 Primary Account **Enclosures**

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Dear Client, There are pending changes regarding FDIC coverage. Please read the message at the bottom of the statement and for more information, please visit Website: http://www.fdic.gov/deposit/deposits/unlimited/expiration.html

Account Number Type of Account 88053792 Personal Checking

Current Balance Enclosures 141,430.61

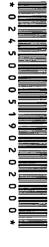
Account Title:

RECEIVER'S ACCT FOR PIHC INC DBA PARTNER D/B/A PARTNERS IN HEALTH CARE PETER RUSSIN AS RECEIVER

Personal Checking 88053792 Account Number Beginning Balance .00 141,430.61 1 Deposits/Credits .00 Checks/Debits .00 Service Charge Interest Paid .00 141,430.61 Ending Balance

Number of Enclosures Statement Dates 10/02/14 thru 10/27/14 Days in the statement period 135,990.97 Average Ledger 97,967.34 Average Collected

	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$.00	\$.00
Total Returned Item Fees	\$.00	\$.00



STANDING CHECKS		RECONCILIATION INSTRUCTIONS				
Reconciliation of Acco	unt	D-1-				
CHECKS WRITTEN	I BUT NOT PAID	Date				
NUMBER	AMOUNT	Please examine this items at once and referming immediately.				
		Sort your checks nu date issued.	,			
		Mark off in your che your checks paid by the b numbers and amounts of the space provided at the checks still not paid statements.	ank and list the hose not paid in left. Include any			
		Subtract from yo balance any SERVICE CH bank charge appearing on	IARGE (S.C.) or			
		Reconcile your sta space provided below.	atement in the			
	· ·		and the state of t			
		Enter bank balance from statement				
		Add deposits not credited by bank (if any)				
		TOTAL				
Total of Checks not paid		Subtract total of checks not paid				

In case of errors or questions about your electronic transfers

THIS AMOUNT SHOULD EQUAL YOUR CHECKBOOK BALANCE

In case of errors or questions about your electronic transfers, telephone us at 800.896.2265 or Write us at 55 Alhambra Plaza Coral Gables, FL 33134 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

(1) Tell us your name and account number (if any).

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. For consumer accounts, if we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

GIBRALTAR PRIVATE

Bank & Trust

Date 10/27/14 Primary Account Enclosures Page 2 88053792

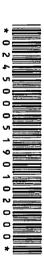
RECEIVER'S ACCT FOR PIHC INC DBA PARTNER D/B/A PARTNERS IN HEALTH CARE PETER RUSSIN AS RECEIVER 200 S BISCAYNE BLVD SUITE 3200 MIAMI FL 33131

Personal Checking

88053792 (Continued)

Date Description Amount Refe
10/03 New Account Deposit 141,430.61

Date Balance Date Balance 10/02 .00 10/03 141,430.61



Bank & Trust

************AUTO**3-DIGIT 331 1391 0.6580 AT 0.406 6 1 134 RECEIVER'S ACCT UNITED SOLUTIONS GROUP INC D/B/A DEBT RELIEF EXPERTS INC PETER D RUSSIN AS RECEIVER 200 S. BISCAYNE BLVD, SUITE 3200 MIAMI FL 33131-5323

Date 10/27/14 Primary Account Enclosures

Page 88053717

Dear Client, There are pending changes regarding FDIC coverage. Please read the message at the bottom of the statement and for more information, please visit Website: http://www.fdic.gov/deposit/deposits/unlimited/expiration.html

Account Number Type of Account 88053717 Personal Checking

Current Balance Enclosures

53,040.84

Account Title:

RECEIVER'S ACCT UNITED SOLUTIONS GROUP INC D/B/A DEBT RELIEF EXPERTS INC PETER D RUSSIN AS RECEIVER

Personal Checking 88053717 Account Number Beginning Balance .00 1 Deposits/Credits 53,040.84 .00 Checks/Debits Service Charge .00 Interest Paid .00 53,040.84 Ending Balance

Number of Enclosures Statement Dates 10/03/14 thru 10/27/14 Days in the statement period 25 53,040.84 Average Ledger 38,245.40 Average Collected

	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$.00	\$.00
Total Returned Item Fees	\$.00	\$.00



OUTSTANDING CHECKS		RECONCIL	LIATION INSTRUCTIONS	
Reconciliation of Accoun	t			
CHECKS WRITTEN BI	JT NOT PAID	Date		
NUMBER	AMOUNT	Please exa	mine this statement and	
		3	ind refer any exceptions	
		immediately.		
		Sort your c	checks numerically or by	
		date issued.	•	
		Mark off in	your checkbook each of	
		your checks paid	by the bank and list the	
			ounts of those not paid in	
			ed at the left. Include any	
			ot paid from previous	
		statements.		
			from your checkbook	
			RVICE CHARGE (S.C.) or bearing on this statement.	
		bank charge app	earing on this statement.	
			your statement in the	
		space provided	d below.	
		-		
		-		, t)
		Enter bank balance		
		from statement		
		Add deposits not		
		credited by bank		
		(if any)		
		TOTAL		
Total of Checks not paid		Subtract total of checks not paid		
not paid		checks not paid		Ç anı
THIS AMOUNT SHOUL	EQUAL YOUR	CHECKBOOK BALANCE		
In	ase of errors or q	uestions about your electronic tra	ansfers	
In case of errors or questions about your electronic can, if you think your statement or receipt is wrong				33134 as soon as you
can, if you think your statement or receipt is wrong 60 days after we sent you the FIRST statement on	or if you need more i which the error or pro	nformation about a transfer on the sta blem appeared.	itement or receipt. We must hear fi	rom you no later than

(1) Tell us your name and account number (if any).

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. For consumer accounts, if we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

GIBRALTAR PRIVATE

Bank & Trust

Date 10/27/14 Primary Account Enclosures

Page 2 88053717

RECEIVER'S ACCT UNITED SOLUTIONS GROUP INC D/B/A DEBT RELIEF EXPERTS INC PETER D RUSSIN AS RECEIVER 200 S. BISCAYNE BLVD, SUITE 3200 MIAMI FL 33131

Personal Checking

88053717 (Continued)

Date Descr 10/03 New A

New Account Deposit

53,040.84

Kele

Date 10/03 Balance 53,040.84



Bank & Trust

*************AUTO**3-DIGIT 331 1394 0.6580 AT 0.406 6 1 137 RECEIVER'S ACCT FOR SENIOR ADVANTAGE OF WISCONSIN INC D/B/A HEALTH CENTER PETER RUSSIN AS RECEIVER 200 S. BISCAYNE BLVD SUITE 3200 MIAMI FL 33131-5323

Date 10/27/14 Primary Account Enclosures

Page 88053784

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Dear Client, There are pending changes regarding FDIC coverage. Please read the message at the bottom of the statement and for more information, please visit Website: http://www.fdic.gov/deposit/deposits/unlimited/expiration.html

Account Number Type of Account 88053784 Personal Checking

========= A C C O U N T S U M M A R Y ======================= Current Balance Enclosures 13,096.25

Account Title:

RECEIVER'S ACCT FOR SENIOR ADVANTAGE OF WISCONSIN INC D/B/A HEALTH CENTER PETER RUSSIN AS RECEIVER

Personal Checking Account Number 88053784 .00 Beginning Balance 13,096.25 1 Deposits/Credits Checks/Debits .00 Service Charge .00 Interest Paid .00 Ending Balance 13,096.25

Number of Enclosures Statement Dates 10/03/14 thru 10/27/14 Days in the statement period 13,096.25 Average Ledger Average Collected 9,485.30

	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$.00	\$.00
Total Returned Item Fees	\$.00	\$.00



OUTSTANDING CHECKS	ECKS RECONCILIATION INSTRUCTION				
Reconciliation of Account		Date			
CHECKS WRITTEN BUT	NOT PAID	Date			
NUMBER	AMOUNT		mine this statement an nd refer any exception		
		immediately.	•		
		Sort your c date issued.	hecks numerically or b		
		your checks paid numbers and am the space provide	your checkbook each of by the bank and list the ounts of those not paid it and at the left. Include and previour		
		balance any SEF	from your checkboo RVICE CHARGE (S.C.) c earing on this statement		
		Reconcile space provided	your statement in th below.		
			•		
		Enter bank balance from statement			
		Add deposits not credited by bank (if any)			
		TOTAL			
Total of Checks not paid		Subtract total of checks not paid			

In case of errors or questions about your electronic transfers

THIS AMOUNT SHOULD EQUAL YOUR CHECKBOOK BALANCE

In case of errors or questions about your electronic transfers, telephone us at 800.896.2265 or Write us at 55 Alhambra Plaza Coral Gables, FL 33134 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

(1) Tell us your name and account number (if any).

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. For consumer accounts, if we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

GIBRALTAR PRIVATE

Bank & Trust

Date 10/27/14 Primary Account Enclosures

Page 2 88053784

RECEIVER'S ACCT FOR SENIOR ADVANTAGE OF WISCONSIN INC D/B/A HEALTH CENTER PETER RUSSIN AS RECEIVER 200 S. BISCAYNE BLVD SUITE 3200 MIAMI FL 33131

Personal Checking

88053784 (Continued)

Date 10/03	Description New Account Deposit	nd Credits ====================================	Refe
======	Daily Balan	ce Information ========	
Date	Balance		

10/03 13,096.25



Bank & Trust

**************AUTO**3-DIGIT 331
1393 0.6580 AT 0.406 6 1 136
RECEIVER'S ACCT TRI RESOURCE GROUP LTD
PETER RUSSIN AS RECEIVER
200 S BISCAYNE BLVD SUITE 3200
MIAMI FL 33131-5323

Date 10/27/14 Primary Account Enclosures Page 1 88053776

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Dear Client, There are pending changes regarding FDIC coverage. Please read the message at the bottom of the statement and for more information, please visit website: http://www.fdic.gov/deposit/deposits/unlimited/expiration.html

Account Number Type of Account
88053776 Personal Checking

26,273.24

Account Title:

RECEIVER'S ACCT TRI RESOURCE GROUP LTD

PETER RUSSIN AS RECEIVER

Personal Checking
Account Number 88053776
Beginning Balance .00
1 Deposits/Credits 26,273.24
Checks/Debits .00
Service Charge .00
Interest Paid .00
Ending Balance 26,273.24

Number of Enclosures 0
Statement Dates 10/03/14 thru 10/27/14
Days in the statement period 25
Average Ledger 26,273.24
Average Collected 18,972.73

	Total For This Period	Total Year-to-Date
Total Overdraft Fees	\$.00	\$.00
Total Returned Item Fees	\$.00	\$.00



TANDING CHECKS		RECONCILIATION INSTRUCTIONS						
Reconciliation of Acco		Date						
NUMBER	CHECKS WRITTEN BUT NOT PAID NUMBER AMOUNT		Please examine this statement and items at once and refer any exceptions immediately.					
		Sort your of date issued.	checks numerically or by					
		Mark off in your checkbook each of your checks paid by the bank and list the numbers and amounts of those not paid in the space provided at the left. Include any checks still not paid from previous statements.						
		Subtract from your checkbo balance any SERVICE CHARGE (S.C.) bank charge appearing on this statemer						
		Reconcile space provide	e your statement in the ed below.					
		Enter bank balance from statement						
		Add deposits not credited by bank (if any)						
		TOTAL						
Total of Checks not paid		Subtract total of checks not paid						

In case of errors or questions about your electronic transfers

In case of errors or questions about your electronic transfers, telephone us at 800.896.2265 or Write us at 55 Alhambra Plaza Coral Gables, FL 33134 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

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(1) Tell us your name and account number (if any).
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GIBRALTAR PRIVATE

Bank & Trust

Date 10/27/14 Primary Account Enclosures Page 2 88053776

RECEIVER'S ACCT TRI RESOURCE GROUP LTD PETER RUSSIN AS RECEIVER 200 S BISCAYNE BLVD SUITE 3200 MIAMI FL 33131

Personal Checking

88053776 (Continued)

Date Description Amount Refe
10/03 New Account Deposit 26,273.24

Date Balance 10/03 26,273.24

