

STATE OF NEW YORK
DEPARTMENT OF LABOR
Unemployment Insurance Division
Governor W. Averell Harriman State Office Building Campus
Building 12, Room 256
Albany, New York 12240

DATED: 07/22/11

AMENDED

ARRANGEMENT #10-16568

EMPLOYER REG. NO.: 46-71853 6

**LIQUIDATED PRIORITY CLAIM FOR
UNEMPLOYMENT TAXES DUE**

CLERK OF THE COURT
U.S. BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK
ONE BOWLING GREEN
NEW YORK, NY 10004-1408

IN THE MATTER OF:
INSIGHT HEALTH CORP.

Lisa Pearson is an agent of the New York State Department of Labor, Unemployment Insurance Division, and is authorized to make this claim on behalf of the Commissioner of Labor of the State of New York pursuant to Article 18 of the Labor Law of the State of New York.

The debtor is liable to the New York State Department of Labor in the sum of \$1,149.19 representing unpaid unemployment insurance taxes. The PRIORITY CLAIM for this debt, with interest computed to the date of petition, is as follows:

PERIOD FROM/TO	A/E	Contributions	Section 581D Assessment	Accrued Interest	Posted Interest	Penalty	WARRANT/SECURED
01/01/08-03/31/08	A	\$66.45		\$20.80			<input type="checkbox"/>
10/01/09-09/30/10	A		\$989.16				<input type="checkbox"/>
01/01/10-03/31/10	A				\$72.78		<input type="checkbox"/>
Total:				\$1,149.19			

A - Actual Returns Filed E - Estimated, no return filed

Amended Priority Claim supersedes all our Priority Claims heretofore filed herein.

No part of this debt has been paid. There are no set-offs or counterclaims.

This claim is asserted as secured for any periods checked by virtue of warrants filed for those periods.

All checks in satisfaction of this claim should be made payable to NYS Unemployment Insurance and forwarded to the NYS Department of Labor, Insolvency Unit, at the address indicated above.

Commissioner of Labor



By: Lisa Pearson
Tax Compliance Agent 2
Unemployment Insurance Division

Indicate Acknowledgement Date

Claim Number Assigned _____

RECEIVED

AUG 22 2011

BMC GROUP

Insight



00182

JUL 25 2011



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IN THE MATTER OF:
INSIGHT HEALTH CORP.
46-71853 6
ARRANGEMENT #10-16568
DEBTOR

Enclosed is a verified claim of the New York State Department of Labor for unemployment insurance taxes due for the periods and amount shown below. The State of New York claims priority in payment under the provisions of the New York State Unemployment Insurance Law.

Please note on this letter your acknowledgement of receipt of this claim (including the claim number) and return it to the NYS Department of Labor, Unemployment Insurance Division, Insolvency Unit, in the enclosed preaddressed envelope.

Contributions due for the period from: 01/01/08
to and including: 09/30/10
in the amount of \$: \$1,149.19

Indicate Acknowledgement Date

RECEIVED JUL 25 2011

Claim Number Assigned _____

Very truly yours,
Commissioner of Labor

Lisa Pearson
Tax Compliance Agent 2
Unemployment Insurance Division

LP:
Enc.
cc: RYAN B. BENNETT

OMNI MANAGEMENT GROUP, LLC

TO:	Clerk	FROM:	Esperanza Rojo
COMPANY:	District of New York	DATE:	08/10/11
FAX NUMBER:		TOTAL NO. OF PAGES INCLUDING COVER:	5
PHONE NUMBER:		SENDER'S PHONE NUMBER:	818-906-8300 ext. 119
RE:	Southern District of New York	SENDER'S FAX NUMBER:	818-783-2737

URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY PLEASE RECYCLE

NOTES/COMMENTS:

Dear Clerk,

Enclosed are proofs of claim that were sent to our office on July 29, 2011, in the FedEx package sent from USBC debtor listed as **Insight Health Corp** with case number 46-71853 6. We are not the Claims agent for this debtor so I'm forwarding it back to you for proper handling.

Any questions or concerns please let me know.

Thanks,
Esperanza Rojo