

IN THE UNITED STATES BANKRUPTCY COURT
 FOR THE EASTERN DISTRICT OF TEXAS
 SHERMAN DIVISION

FILED
 U.S. BANKRUPTCY COURT
 EASTERN DISTRICT OF TEXAS
 2000 JUN 29 AM 10:51
 CLERK, U.S. BANKRUPTCY COURT
 BY Mh DEPUTY

IN RE:

UNIVERSAL HOME HEALTH CARE, LLC

)
) CASE NO. 98-33119-S
) CHAPTER 7
)
)
)

DEBTORS

TRUSTEE'S
FINAL REPORT AND PROPOSED DISTRIBUTION

LINDA PAYNE, trustee of the estate of the above-named Debtors, certifies to the Court and the United States Trustee, that the trustee has faithfully and properly fulfilled the duties of the office of the trustee, that the trustee has examined all proofs of claims as appropriate under the proposed distribution, and that the proposed distribution, attached hereto, is proper, and consistent with the law and rules of court.

Therefore, the trustee requests that the Final Report and Proposed Distribution be accepted.

Date: 5/25/00

Linda Payne
 Linda Payne, Trustee

+++++

REVIEW BY UNITED STATES TRUSTEE

I have reviewed the Trustee's Final Report and Proposed Distribution.

William T. Neary
 United States Trustee
 Eastern District of Texas

Dated: 6-21-00

WTN
 By:

15 aw

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE:)
)
UNIVERSAL HOME HEALTH CARE, LLC) CASE # 98-33119-S
) CHAPTER 7
)
DEBTOR)

TRUSTEE'S FINAL REPORT AND APPLICATION TO CLOSE CASE AND
DISCHARGE TRUSTEE

The Trustee of the estate presents the following final report:

1. The Trustee applies for commissions and expenses set forth in Schedule A and states: That they are reasonable and proper; that in the course of the performance of duties, the Trustee has advanced moneys from personal funds for expenses, and the Trustee has not been reimbursed.

2. The Trustee submits Form I as a summary of the assets and an estate property record. Any property scheduled under 11 U.S.C. Sec. 521(1) and not administered shall be deemed abandoned pursuant to 11 U.S.C. Sec. 554 (c).

3. The Trustee has reduced all assets of this estate to cash or otherwise lawfully disposed of them and the estate is ready to be closed.

4. The Trustee submits Form II as the account of estate cash receipts and disbursements.

5. There is no agreement or understanding between the Trustee and any other person for a division of the compensation sought by this application except as permitted by the Bankruptcy Code.

6. The Trustee requests approval of this final report.

7. The trustee has examined each and every claim filed and noted her approval of claims as filed, or she has filed objections to allowance or requests for reclassification.

8. The Trustee further requests that after final distribution of all moneys in accordance with the Trustee's Report of Final Distribution, and upon filing of a Supplemental Final Report and Account and certification by the U. S. Trustee the trustee be discharged from office and that the case be closed.

I declare under penalty of perjury that this Report and attached Schedules are true and correct to the best of my knowledge and belief.

Dated: 5/25/00


Linda Payne, Trustee
100 North Main Street
Paris, TX 75460-4171
903 784 4393

SCHEDULE A-1

Case Name: UNIVERSAL HOME HEALTH CARE

Case Number: 98-33119-S

A: Receipts		\$ 5,719.02
B. Disbursements		
1. Secured Creditors	\$	0
2. Administrative	\$	0
3. Priority	\$	0
4. Other	\$	0
TOTAL DISBURSEMENTS		\$ <u>0</u>
C. Current Balance		\$ 5,719.02

TRUSTEES FINAL REPORT CASE SUMMARY

TRUSTEE:

PAYNE

COMMENTS:

CASE NAME:

UNIVERSAL HOME HEALTH CARE, LLC.

CASE NUMBER:

98-33119

DATE UST APPROVED:

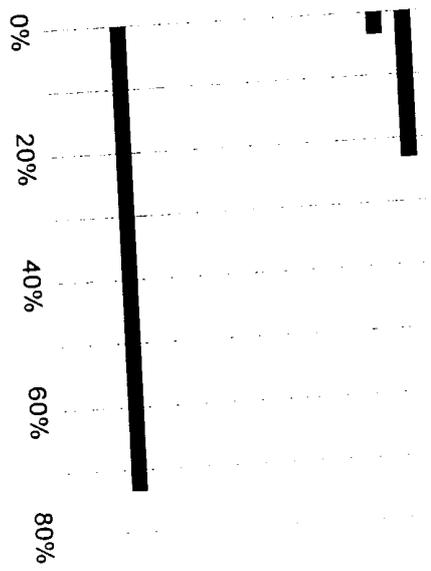
06-21-00

ESTATE INCOME:
TOTAL RECEIPTS:

\$5,719.02 100.00%

ESTATE EXPENSES:
TRUSTEE'S COMMISSION
TRUSTEE'S EXPENSES
FIRM'S PROFESSIONAL FEES
FIRM'S PROFESSIONAL EXPENSES
OTHER ATTORNEY FEES
OTHER PROFESSIONAL FEES
COURT COSTS
ESTATE EXPENSES(TAXES, ETC)
PRIOR CHAPTER COSTS
SECURED CLAIMS PAID
PRIORITY CLAIMS PAID
UNSECURED CLAIMS PAID
OTHER(RETURN TO DEBTOR, ETC)

1,321.90	23.11%
198.81	3.48%
0.00	0.00%
0.00	0.00%
0.00	0.00%
0.00	0.00%
0.00	0.00%
0.00	0.00%
0.00	0.00%
0.00	0.00%
4,198.31	73.41%
0.00	0.00%
0.00	0.00%



UNSECURED CLAIMS
ALLOWED

57,526.40

UNSECURED CLAIMS
PAID

0.00

PERCENT RECOVERED
FOR UNSECURED
0.00%

Form 1 Individual Estate Property Record and Report Asset Cases

Case Number: 98-33119 DS **Trustee:** (631540) LINDA S. PAYNE
Case Name: UNIVERSAL HOME HEALTH CARE, INC. **Filed (f) or Converted (c):** 09/09/98 (f)
\$341(a) Meeting Date: 10/23/98
Claims Bar Date: 01/26/99

Period Ending: 05/25/00

Ref. #	Asset Description (Scheduled And Unscheduled (u) Property)	Petition/ Unscheduled Values	Estimated Net Value (Value Determined By Trustee, Less Liens, Exemptions, and Other Costs)	Property Abandoned OA=\$554(a) abandon. DA=\$554(c) abandon.	Sale/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets
1	Bank Account	3,590.00	3,590.00	DA	3,592.50	0.00
2	BOOKS AND ART OBJECTS	100.00	100.00	DA	0.00	1,920.00
3	ACCOUNTS RECEIVABLE Majority uncollectable	7,800.00	1,900.00	DA	0.00	0.00
4	Furniture and equipment Not worth the cost to pickup.	500.00	500.00	DA	0.00	0.00
5	Medical supplies Not resaleable	100.00	100.00	DA	0.00	0.00
6	Refunds (u)	0.00	36.52		36.52	170.00
	INTEREST (u)	Unknown	N/A			Unknown
7	Assets					
	Totals (Excluding unknown values)	\$12,090.00	\$6,226.52		\$5,719.02	\$0.00

Major Activities Affecting Case Closing:
 Make recommendation on claims
 Attempting to collect receivable.
Initial Projected Date Of Final Report (TFR): May 31, 2000

Current Projected Date Of Final Report (TFR): May 31, 2000

Form 2

Cash Receipts And Disbursements Record

Case Number: 98-33119 DS
 Case Name: UNIVERSAL HOME HEALTH CARE, INC.

Trustee: LINDA S. PAYNE (631540)
 Bank Name: THE CHASE MANHATTAN BANK
 Account: 312-7391217-65 - Money Market Account
 Blanket Bond: \$300,000.00 (per case limit)
 Separate Bond: N/A

Taxpayer ID #: 75-2577101
 Period Ending: 05/25/00

1 Trans. Date	2 {Ref #}/ Check #	3 Paid To / Received From	4 Description of Transaction	5 Receipts \$	6 Disbursements \$	7 Money Market Account Balance
11/03/98	{1}	Bonham State Bank	Turnover of funds in bank account	3,592.50		3,592.50
11/30/98	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0%	4.92		5,517.42
12/09/98	{3}	CIGNA HEALTHCARE	Receivable	1,920.00		5,553.94
12/09/98	{6}	CITY OF BONHAM	WATER DEPARTMENT REFUND	36.52		5,561.99
12/31/98	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	8.05		5,571.45
01/29/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.46		5,580.00
02/26/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	8.55		5,589.49
03/31/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.49		5,598.69
04/30/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.20		5,608.21
05/28/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.52		5,617.30
06/30/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 1.9000%	9.09		5,626.37
07/30/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 1.9000%	9.07		5,635.46
8/31/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 1.9000%	9.09		5,644.27
09/30/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 1.9000%	8.81		5,653.59
10/29/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.32		5,662.89
11/30/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.30		5,672.52
12/31/99	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.63		5,682.14
01/31/00	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.0000%	9.62		5,691.15
02/29/00	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.1000%	9.01		5,700.80
03/31/00	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.1000%	9.65		5,710.78
04/28/00	Int	THE CHASE MANHATTAN BANK	Interest posting at 2.2000%	9.98		5,719.02
05/25/00	Int	Interest Posting	Current Interest Rate is 2.2000%	8.24		5,719.02
05/25/00		To Account #312739121766				0.00

Subtotals : \$5,719.02 \$5,719.02
 Printed: 05/25/2000 10:27 AM V.5.11

Form 2

Cash Receipts And Disbursements Record

Case Number: 98-33119 DS
 Case Name: UNIVERSAL HOME HEALTH CARE, INC.

Taxpayer ID #: 75-2577101

Period Ending: 05/25/00

Trustee: LINDA S. PAYNE (631540)
 Bank Name: THE CHASE MANHATTAN BANK
 Account: 312-7391217-65 - Money Market Account
 Blanket Bond: \$300,000.00 (per case limit)
 Separate Bond: N/A

1 Trans. Date	2 {Ref #} / Check #	3 Paid To / Received From	4 Description of Transaction	5 Receipts \$	6 Disbursements \$	7 Money Market Account Balance
			ACCOUNT TOTALS	5,719.02	5,719.02	\$0.00
			Less: Bank Transfers	0.00	5,719.02	
			Subtotal	5,719.02	0.00	
			Less: Payments to Debtors			
			NET Receipts / Disbursements	5,719.02	\$0.00	

Form 2

Cash Receipts And Disbursements Record

Case Number: 98-33119 DS
 Case Name: UNIVERSAL HOME HEALTH CARE, INC.

Taxpayer ID #: 75-2577101
 Period Ending: 05/25/00

Trustee: LINDA S. PAYNE (631540)
 Bank Name: THE CHASE MANHATTAN BANK
 Account: 312-7391217-66 - Checking Account
 Blanket Bond: \$300,000.00 (per case limit)
 Separate Bond: N/A

1 Trans. Date	2 {Ref #} / Check #	3 Paid To / Received From	4 Description of Transaction	5 Receipts \$	6 Disbursements \$	7 Checking Account Balance
05/25/00		From Account #312739121765		5,719.02		5,719.02

ACCOUNT TOTALS
 Less: Bank Transfers 0.00
Subtotal 5,719.02
 Less: Payments to Debtors 0.00
NET Receipts / Disbursements \$0.00

Form 2

Cash Receipts And Disbursements Record

Case Number: 98-33119 DS
 Case Name: UNIVERSAL HOME HEALTH CARE, INC.

Taxpayer ID #: 75-2577101

Period Ending: 05/25/00

Trustee: LINDA S. PAYNE (631540)
 Bank Name: THE CHASE MANHATTAN BANK
 Account: 312-7391217-67 - Money Market Account
 Blanket Bond: \$300,000.00 (per case limit)
 Separate Bond: N/A

1 Trans. Date	2 {Ref #} / Check #	3 Paid To / Received From	4 Description of Transaction	5 Receipts \$	6 Disbursements \$	7 Money Market Account Balance
(No Transactions on File for this Period)						

ACCOUNT TOTALS
 Less: Bank Transfers
 Subtotal
 Less: Payments to Debtors
NET Receipts / Disbursements

	Net Receipts	Net Disbursements	Account Balances
TOTAL - ALL ACCOUNTS	5,719.02	0.00	0.00
MMA # 312-7391217-65	0.00	0.00	5,719.02
Checking # 312-7391217-66	0.00	0.00	0.00
MMA # 312-7391217-67	5,719.02	0.00	5,719.02

SCHEDULE B

TRUSTEE COMPENSATION:

Total Receipts \$ 5,719.02

25% of first \$5,000.00 = \$1,250.00
10% over \$5,000.00 and
under \$50,000 = 71.90
5% over \$50,000.00 and 0
under \$1,000,000.00 = 0
3% over \$1,000,000.00 = 0

Total Trustee Fees = \$1,321.90

UNREIMBURSED EXPENSES:

Recording Fees-----	\$		
Premium on bond-----	\$		
Travel-----	\$	80.50	See Exhibit "A"
Clerical & Stenographic-----	\$	62.00	"
Postage-----	\$	7.06	"
Copies-----	\$	49.25	"
Long Distance-----	\$		"
Copy Service-----	\$		"
Federal Express-----	\$		"

TOTAL UNREIMBURSED EXPENSES-\$ 198.81

RECORDS:

Trustee did not take possession of business or
personal records of the debtor.

 X

Trustee did take possession of business or
personal records of the debtor.

Notice given to debtor on
to pick up business or personal records in
hands of trustee. If not picked up within
30 days such records or work files may be
destroyed.

Exhibit "A" - Expenses of UNIVERSAL HOME HEALTH CARE

Travel:

Plano - 341(a) meeting - 230 miles

230 miles @ 0.35 per mile = \$ 80.50

<u>Secretarial, Copies & Postage:</u>	<u>Copies</u>	<u>Postage</u>
Request for Claims File 0.20	3	.33
Final Report 3.00	136	3.20
Distribution Checks 1.00	3	.33
Supplemental Final Report 2.00	55	3.20

Totals:

Travel = 230 miles @ 0.35 per mile----- \$ 80.50
Secretarial = 6.20hrs @ \$10.00 per hour ----- 62.00
Copies = 197 \$0.25 each ----- 49.25
Postage----- 7.06

Total = \$198.81

SCHEDULE C
EXPENSES OF ADMINISTRATION

	AMOUNT CLAIMED	AMOUNT PAID	AMOUNT DUE
1. 11 U.S.C. Sec 507(a)(1)			
<u>Court Cost and Fees</u>			
A. Notice & Claim Fees \$			
B. Adv. filing fees			
C. Quarterly Chapt 11			
2. 11 U.S.C. Sec 503(b)(1)(a)			
<u>Preservation of estate</u>			
A. Transportation			
B. Storage			
C. Wages			
D. Estates share FICA			
E. Watchman			
F. Insurance			
G. Upkeep			
H. Advertising			
I. Expenses in Sale of Real Estate			
J. Trustee's Bond			
3. 11 U.S.C. Sec.503(b)(2)			
<u>Post-Petition Taxes and related penalties</u>			
4. 11 U.S.C. Sec.503(b)(2)			
<u>Compensation and Reimbursement</u>			
A. Trustee Fees \$ 1,321.90	1,321.90	0	1,321.90
B. Trustee Expenses 198.81	198.81	0	198.81
C. Attorney to Trustee 0	0	0	0
D. Expenses for Attorney 0	0	0	0
E. Attorney to Debtor 0	0	0	0
F. Expenses for Attorney 0	0	0	0
G. Auctioneers 0	0	0	0
H. Appraiser 0	0	0	0
H. Appraisers 0	0	0	0
I. Accountant 0	0	0	0
5. 11 U.S.C. Sec.503(b)(3)			

Expenses of Creditors
or Committees

6. 11 U.S.C. Sec 503(b)(4)
Compensation of professionals
for creditors or committees

7. Other

TOTAL----- \$ 1,520.71 0 1,520.71

SCHEDULE D

PRIORITY CLAIMS OTHER THAN ADMINISTRATIVE EXPENSES
IN THE FOLLOWING ORDER OF PRIORITY

	(1) Claim No.	(2) Amt. Claimed	(3) Amt. Allowed	(4) Amt. Paid	(5) Due
1. For Credit Extended Sec364(e)(1)					
2. Claims from failure of adequate protection Sec.307(a)(b)					
3. "Gap Claims" Sec.507(a)(2)					
4. Wages, etc. Sec.507(a)(3)					
John Latham	2	4,000.00	All	0	All
Employee Taxes		1,117.67	All	0	All
5. Contributions to benefit plans Sec.507(a)(4)					
6. Consumer deposits Sec.507(a)(6)					
7. Taxes Sec.507(a)(8)					
Fannin County	5	191.26	All	0	All
IRS	6	6,940.44	All	0	All

SCHEDULE E

SECURED CLAIMS

Claim No.	Creditor	(1) Amt of Claim	(2) Amt. Not Determined	(3) Amt. Allowed	(4) Amt. Paid	(5) Amt Due
--------------	----------	------------------------	-------------------------------	------------------------	---------------------	-------------------

Total of ALLOWED Secured Claims \$0

Total UNSECURED CLAIMS Allowed: \$57,526.40

No only

Eastern District of Texas
CLAIMS REGISTER

06/30/99 Last Date to File Claims: 01/26/99 98-33119 drs Page 1
Last Date to File Claims for Governmental Unit: 04/26/99
Universal Home Health Care, L.L.C.

Name and Address of Claimant	Amount of Claims Filed and Allowed	Remarks
No: 1 John D. & Andra Latham 2121 Arbor Bend Bonham, TX 75418	Filed: 11/04/98 Filed Amt: 57,481.40 g	
No: 2 John D. & Andra Latham 2121 Arbor Bend Bonham, TX 75418	Filed: 11/04/98 Filed Amt: 4,000.00 g	466-64 8719 7/1/98 - 8/26/98
No: 3 McKinney Secretarial & Answering Service 2411 W. Virginia Parkway #6A McKinney, TX 75070	Filed: 11/05/98 Filed Amt: 18.75 g	TAS-102
No: 4 Internal Revenue Service Special Procedures Branch 1100 Commerce, MC5020DAL Dallas, TX 75242	Filed: 12/17/98 Filed Amt: 7,142.81 t	Amended by 6
No: 5 Fannin County Appraisal District c/o Linebarger, Heard, Goggan, et 1949 South IH 35 (78741) P.O. Box 17428 Austin, TX 78760-7777	Filed: 01/21/99 Filed Amt: 191.26 s	1998 EIP
No: 6 Internal Revenue Service Special Procedures Branch 1100 Commerce, MC5020DAL Dallas, TX 75242	Filed: 01/27/99 Filed Amt: 6,940.44 t	Amendment of 4 WT-FICA 7/1-9/9/98 FUTA
No: 7 American 3CI P.O. Box 44409 Shreveport, LA 71134	Filed: 05/03/99 Filed Amt: 26.25 g	502302

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE:)
)
UNIVERSAL HOME HEALTH CARE, LLC) CASE NO. 98-33119-S
) CHAPTER 7
)
DEBTOR)

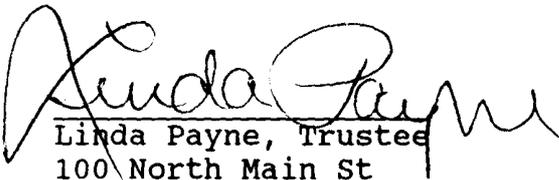
TRUSTEE'S REPORT OF
PROPOSED FINAL DISTRIBUTIONS

The undersigned trustee of the estate hereby submits to the Court and to the United States Trustee this Report of Proposed Final Distributions.

1. The Court has entered orders which have become final, and which dispose of all objections to claims, all objections to the trustee's Final Report, all applications for compensation, and all other matters which must be determined by the Court before final distribution can be made.

2. The trustee proposes to make final distribution of the funds of the estate as follows, and will make such distribution upon certification by the U. S. Trustee unless written objection thereto is filed and served on the trustee and on the U. S. Trustee.

1. Balance on hand		\$ 5,719.02
2. Administrative Expenses to be paid (see attached schedule of payees and amounts)	\$ 1,520.71	
3. Priority Claims to be paid (see attached schedule of payees and amounts)	\$ 4,198.31	
4. Secured Claims to be paid (see attached schedule of payees and amounts)	\$ 0	
5. Unsecured Claims to be paid (see attached schedule of payees and amounts)	\$ 0	
6. Miscellaneous distributions to be paid (see attached schedule of payees and amounts)	\$ 0	
7. Total Distributions to be made		\$ 5,719.02
8. Zero Balance		


Linda Payne, Trustee
100 North Main St
Paris, TX 75460

Claims Proposed Distribution

Trustee: LINDA S. PAYNE (631540)

Case: 98-33119 UNIVERSAL HOME HEALTH CARE, INC.

Case Balance: \$5,719.02 Total Proposed Payment: \$5,719.02 Remaining Balance: \$0.00

Claim #	Claimant Name	Type	Amount Filed	Amount Allowed	Paid to Date	Claim Balance	Proposed Payment	Remaining Funds
	LINDA S. PAYNE FEES-TRUSTEE (CH7)	Admin Ch. 7	1,321.90	1,321.90	0.00	1,321.90	1,321.90	4,397.12
	LINDA S. PAYNE EXP.-APPRAISER (CH7)	Admin Ch. 7	198.81	198.81	0.00	198.81	198.81	4,198.31
	IRS-Federal W/H Employee	Priority	0.00	800.00	0.00	800.00	800.00	3,398.31
	IRS-FICA Employee	Priority	0.00	248.00	0.00	248.00	248.00	3,150.31
	IRS-Medicare employee	Priority	0.00	58.00	0.00	58.00	58.00	3,092.31
2	John D. & Andra Lathan	Priority	4,000.00	2,894.00	0.00	2,894.00	2,894.00	198.31
	IRS FICA Employer	Priority	0.00	248.00	0.00	248.00	6.49	191.82
	IRS-Medicare Employer	Priority	0.00	58.00	0.00	58.00	1.52	190.30
	IRS-Futa Employer	Priority	0.00	32.00	0.00	32.00	0.84	189.46
	TEC-Employer	Priority	0.00	108.00	0.00	108.00	2.82	186.64
4	INTERNAL REVENUE SERVICE	Priority	7,142.81	0.00	0.00	0.00	0.00	186.64
5	Fannin County Appraisal District	Priority	191.26	191.26	0.00	191.26	5.01	181.63
6	INTERNAL REVENUE SERVICE	Priority	6,940.44	6,940.44	0.00	6,940.44	181.63	0.00
1	John D & Andra ALatham	Unsecured	57,481.40	57,481.40	0.00	57,481.40	0.00	0.00
3	McKinney Secretarial	Unsecured	18.75	18.75	0.00	18.75	0.00	0.00
7	American 3CI	Unsecured	26.25	26.25	0.00	26.25	0.00	0.00
Total for Case 98-33119 :			\$77,321.62	\$70,624.81	\$0.00	\$70,624.81	\$5,719.02	\$0.00

CASE SUMMARY

	Amount Filed	Amount Allowed	Paid to Date	Proposed Payment
Total Administrative Claims :	\$1,520.71	\$1,520.71	\$0.00	\$1,520.71
Total Priority Claims :	\$18,274.51	\$11,577.70	\$0.00	\$4,198.31
Total Secured Claims :	\$0.00	\$0.00	\$0.00	\$0.00
Total Unsecured Claims :	\$57,526.40	\$57,526.40	\$0.00	\$0.00

(* Denotes objection to Amount Filed)

Wage Claims Worksheet

Date: 05/25/00

Trustee: LINDA S. PAYNE (631540)

Case: 98-33119 UNIVERSAL HOME HEALTH CARE, INC.

TIN: 75-2577101

Claim Number	Claimant	Amount Allowed		Employee Withholding		Net Amount Due		Employer Taxes	
		\$		\$		\$		\$	
2	John D. & Andra Lathan 2121 Arbor Bend Bonham, TX	4,000.00		1,106.00		2,894.00			
				Federal W/H	800.00			FICA	248.00
				FICA	248.00			Medicare	58.00
				Medicare	58.00			FUTA	32.00
								TEC	108.00
Total for All Claims		4,000.00		1,106.00		2,894.00			446.00
				Federal W/H	800.00			FICA	248.00
				FICA	248.00			Medicare	58.00
				Medicare	58.00			FUTA	32.00
								TEC	108.00

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

IN RE:)	
)	
UNIVERSAL HOME HEALTH CARE, LLC)	CASE NO. 98-33119-S
)	CHAPTER 7
)	
DEBTORS)	

ORDER APPROVING TRUSTEE'S FINAL REPORT AND PROPOSED DISTRIBUTION

The Trustee having filed a Final Report and Report of Proposed Distribution; after hearing and due consideration, it is hereby:

ORDERED that the Trustee's Final Report and Proposed Distribution are hereby approved, and it is further,

ORDERED that the Trustee, Linda Payne, is to pay the following:

Linda Payne, Fees-----	\$ 1,321.90
Linda Payne, Expenses-----	198.81
John D. Lathan-----	2,894.00
IRS - Employee Taxes-----	1,117.67
Fannin County-----	5.01
IRS-----	181.63

ORDERED that the Trustee shall make final distribution to all claimants as set out above upon entry of this order and file a Supplemental Final Report and Account with zero bank statement, after the requirements under Bankruptcy Rule 3011 and Sec 347(a) of the Bankruptcy Code have been complied with, if applicable.

Dated:

Honorable Donald S. Sharp