

AMBULANCE REVENUE AND COST REPORT

GENERAL INFORMATION AND CERTIFICATION

Legal Name of Company: Southwest Ambulance of Casa Grande, Inc. CON No.: 66
DBA (Doing Business As): Southwest Ambulance and Rescue of Arizona Phone: (800) 352-2309
Financial Records Address: 8465 N. Pima Road City: Scottsdale Zip Code: 85258
Mailing Address (If Different): _____
Owner/Manager: Rural/Metro Corporation
Report Contact Person: John Karolzak Phone: (678) 615-9217 Ext. _____
Report for Period: From: January 1, 2014 To: December 31, 2014
Method of Valuing Inventory: LIFO () FIFO (X) Other (Explain):

Please attach a list of all affiliated organizations (parent/subsidiaries) that exhibit at least 5% ownership/vesting.

Rural/Metro Corporation

I hereby verify that I have directed the preparation of the enclosed annual report in accordance with the reporting requirements of the State of Arizona.

I have read this report and hereby verify that the information provided is true and correct to the best of my knowledge.

This report has been prepared using the accrual basis of accounting.

Authorized Signature:



Title:

Vice President

Date:

6-29-15

Mail to:

Arizona Department of Health Services
Bureau of Emergency Medical Services and Trauma System
Certificate of Necessity and Rates Section
150 North 18th Avenue, Suite 540
Phoenix AZ 85007-3248
Telephone: (602) 364-3150
Fax: (602) 364-3567

Revised August 2013

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AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

STATISTICAL SUPPORT DATA

Line No.	DESCRIPTION	(1) SUBSCRIPTION SERVICE TRANSPORTS (EST.)	(2)** TRANSPORTS UNDER CONTRACT	(3) TRANSPORTS NOT UNDER CONTRACT	(4) <u>TOTALS</u>
01	Number of ALS Billable Transports:	0	0	8,747	8,747
02	Number of BLS Billable Transports:	0	0	1,416	1,416
03	Number of Loaded Billable Miles:	0	0	62,278	62,278
04	Waiting Time (Hr. & Min.):	0.0	0.0	0.0	0.0
05	Cancelled (Non-billable) Runs:				4,573 *
					Number
	Volunteer Services: (OPTIONAL)				Donated Hours
06	Paramedic, EMT-I, and AEMT				0
07	Emergency Medical Technician (EMT)				0
08	Other Ambulance Attendants				0
09	Total Volunteer Hours				0

**This column reports only those runs where a contracted discount rate was applied. See page 7 to provide additional information regarding discounted contract runs.

* Number shown is total number of calls minus number of transports

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

STATEMENT OF INCOME

Line No.	DESCRIPTION	FROM	
Operating Revenue:			
01	Ambulance Service Routine Operating Revenue.....	Pg 3 Ln 10	<u>\$11,759,356</u>
Less:			
02	AHCCGS Settlement.....		<u>(\$2,130,827)</u>
03	Medicare Settlement.....		<u>(\$1,318,001)</u>
04	Contractual Discounts.....	Pg 7 Ln 22	<u>\$0</u>
05	Subscription Service Settlement.....	Pg 8 Ln 4	<u>\$0</u>
06	Other (Attach Schedule).....		
07	Total.....		<u>(\$3,448,827)</u>
08	Net Revenue from Ambulance Runs.....		<u>\$8,310,528</u>
09	Sales of Subscription Service Contracts.....	Pg 8 Ln 8	<u>\$0</u>
10	Total Operating Revenue.....		<u>\$8,310,528</u>
Ambulance Operating Expenses:			
11	Bad Debt (Includes Subscription Services Bad Debt)		<u>\$2,916,323</u>
12	Wages, Payroll Taxes and Employee Benefits.....	Pg 4 Ln 22	<u>\$3,669,953</u>
13	General and Administrative Expenses.....	Pg 5 Ln 20	<u>\$637,503</u>
14	Cost of Goods Sold.....	Pg 3 Ln 15	<u>\$227,730</u>
15	Other Operating Expenses.....	Pg 6 Ln 28	<u>\$846,060</u>
16	Interest Expense (Attach Schedule IV).....	Pg 14 CL 4 & 5 Ln 15	<u>\$295,636</u>
17	Subscription Service Direct Selling.....	Pg 8 Ln 23	<u>\$0</u>
18	Total Operating Expenses.....		<u>\$8,593,207</u>
19	Ambulance Service Income (Loss) (Ln 10 minus Ln 18)		<u>(\$282,678)</u>
Other Revenues/Expenses:			
20	Other Operating Revenue and (Expenses)	Pg 9 Ln 17	<u>\$3,323</u>
21	Non-Operating Revenue and (Expenses)		<u>\$0</u>
22	Non-Deductible Expenses (Attach Schedule).....		<u>\$0</u>
23	Total Other Revenue/Expenses.....		<u>\$3,323</u>
24	Ambulance Service Income (Loss) - Before Income taxes		<u>(\$279,355)</u>
Provision for Income Taxes:			
25	Federal Income Taxes.....		<u>(\$94,981)</u>
26	State Income Tax.....		<u>(\$19,555)</u>
27	Total Income Tax.....		<u>(\$114,536)</u>
28	Ambulance Service - Net income (Loss)		<u>(\$164,820)</u>

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Note: See the Notes to this Statement of Income reported on ARCR page "Notes 2 Notes"

AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

Note 1 Statement of Income data does not include amortization of Intangible Assets and does not include charges related to the closing of Rural/Metro billing offices.

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

Non-Deductible Expenses:			
22.1	Contributions and Penalties	<u> </u>	<u> </u> \$0
22.2		<u> </u>	
22.3		<u> </u>	
22.4		<u> </u>	
22.5		<u> </u>	
22.6		<u> </u>	
22.7		<u> </u>	
22	Total.....Page 2, Non-Deductible Expenses	<u> </u>	<u> </u> \$0

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

ROUTINE OPERATING REVENUE

**Line
No.**

DESCRIPTION

Ambulance Service Routine Operating Revenue:

1	ALS Base Rate Amount	Rate	\$ (a)	x No. of Runs	8,747	=	\$ 8,548,694
		Rate		x No. of Runs		=	
2	BLS Base Rate Amount	Rate	(a)	x No. of Runs	1,416	=	\$ 1,287,528
		Rate		x No. of Runs		=	
3	Mileage Rate Amount	Rate	(a)	x No. of Billable Miles	62,278	=	\$ 1,130,391
		Rate		x No. of Billable Miles		=	
4	Waiting Charge Amount	Rate	(a)	x No. of Hours	0.0	=	\$ -
		Rate		x No. of Hours		=	

(a) Ambulance Service Rates and Charges In Effect During The Year

5	Medical Supplies (Gross Charges To Patients)					\$	792,743
6	Nurses Charges					\$	0
7	Total					\$	11,759,356
8	Standby Revenue (Attach Schedule)					\$	-
9	Other Ambulance Service Revenue (Attach Schedule)					\$	0
10	Total Ambulance Service Routine Operating Revenue (To Page 2, Line 1)					\$	11,759,356

Cost of Goods Sold: (Medical Supplies)

11	Inventory at Beginning of Year				N/A		
12	Plus Purchases						
13	Plus Other Costs						
14	Less Inventory at End of Year				N/A		
15	Cost of Goods Sold (To Page 2, Line 14)					\$	227,730 *

* The disposable medical supplies are expensed as used and are not inventoried by CON

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

WAGES, PAYROLL TAXES AND EMPLOYEE BENEFITS

Line No.	DESCRIPTION	No. of *F.T.E.	Amount
01	Gross Wages - OFFICERS/OWNERS (Attach Schedule I, Pg 10, Ln 7)	0.0	\$0
02	Payroll Taxes.....		\$0
03	Employee Benefits.....		\$0
04	Total.....	0.0	\$0
05	Gross Wages - MANAGEMENT (Attach Schedule II).....	1.9	\$83,547
06	Payroll Taxes.....		\$6,215
07	Employee Benefits.....		\$12,287
08	Total.....	1.9	\$102,049
Gross Wages - AMBULANCE PERSONNEL (Attach schedule II):			
		**Casual Labor	Wages
09	Paramedic, EMT-I, and AEMT.....	\$293,401	33.3
10	Emergency Medical Technician (EMT).....		35.8
11	Nurses.....		0.0
12	Payroll Taxes.....		\$175,441
13	Employee Benefits.....		\$346,861
14	Total.....	69.1	\$3,174,221
Gross Wages - OTHER PERSONNEL (Attach Schedule II):			
15	Dispatch.....	3.1	\$115,126
16	Mechanics.....	1.9	\$80,813
17	Office and Clerical.....	1.4	\$46,923
18	Other.....	1.9	\$79,445
19	Payroll Taxes.....		\$23,975
20	Employee Benefits.....		\$47,401
21	Total.....	8.2	\$393,683
22	Total F.T.E.'s Wages, Payroll Taxes and Employee Benefits (To Page 2, Line 12).....	79.3	\$3,669,953

* Full-time equivalents (F.T.E.) is the sum of all hours for which employee wages were paid during the year divided by 2,080

** The sum of casual Labor (wages paid on a per run basis) + wages paid is entered in Column 2 by line item. However, when calculating FTE's, do not include casual labor hours worked or expenses incurred.

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FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

GENERAL AND ADMINISTRATIVE EXPENSES

Line No.	<u>DESCRIPTION</u>		
Professional Services:			
01	Legal Fees	\$0	
02	Collection Fees	\$113,331	
03	Accounting and Auditing	\$1,065	
04	Data Processing Fees	\$0	
05	Other (Schedule Attached)	\$32,411	
06	Total.....		<u>\$146,807</u>
Travel and Entertainment:			
07	Meals and Entertainment.....	\$423	
08	Transportation - Other Company Vehicles.....	\$0	
09	Travel.....	\$1,560	
10	Other:		
11	Total.....		<u>\$1,984</u>
Other General and Administrative:			
12	Office Supplies.....	\$8,400	
13	Postage.....	\$5,977	
14	Telephone.....	\$15,560	
15	Advertising.....	\$509	
16	General Liability Insurance.....	\$15,658	
17	Dues and Subscriptions.....	\$2,053	
18 a	Other (Schedule Attached).....	\$76,474	
18 b	Other: Corporate Support Services.....	\$364,082	
19	Total.....		<u>\$488,712</u>
20	Total General and Administrative Expenses (To Page 2, Line 13).....		<u><u>\$637,503</u></u>

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Other Professional Services:		
5.1	Public Affairs / Public Relations	<u>\$7,692</u>
5.2	Management & Human Resources	<u>\$3,156</u>
5.3	Medical Direction	<u>\$5,917</u>
5.4	Other (did not fit any other line item)	<u>\$15,646</u>
5.5		<u> </u>
5.6		<u> </u>
5.7		<u> </u>
5	Total.....Page 5, Other General & Administrative.	<u>\$32,411</u>

Other General and Administrative:		
18.a.1	Public Relations	<u>\$8</u>
18.a.2	Printing	<u>\$5,311</u>
18.a.3	Business Licenses & Misc Taxes	<u>\$26,948</u>
18.a.4	Bank Charges, Outside Claims & Miscellaneous	<u>\$44,208</u>
18.a.5		<u> </u>
18.a	Total.....Page 5, Other General & Administrative.	<u>\$76,474</u>

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FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

OTHER OPERATING EXPENSES

Line No.	<u>DESCRIPTION</u>		
	Depreciation and Amortization:		
01	Depreciation (Attach Schedule III) Ln 20 Col I Pg 13	\$73,263	
02	Amortization.....	\$0	
03	Total.....		<u>\$73,263</u>
04	Rent/Lease (Attach Scedule III Ln 20 Col K Pg 13		<u>\$190,157</u>
	Building/Station Expense:		
05	Building & Cleaning Supplies.....	\$1,253	
06	Utilities.....	\$39,195	
07	Property Taxes.....	\$8,648	
08	Property Insurance.....		
09	Repairs & Maintenance.....	\$45,041	
10	Other (Attach Schedule).....		
11	Total.....		<u>\$94,137</u>
	Vehicle Expense - Ambulance Units:		
12	Licenses / Registration.....	\$7,632	
13	Fuel.....	\$170,715	
14	General Vehicle Service & Maintenance.....	\$2,800	
15	Major Repairs.....		
16	Insurance - Service Vehicles.....	\$19,239	
17	Other: Tires	\$19,167	
18	Total.....		<u>\$219,553</u>
	Other Expenses:		
19	Dispatch.....	\$247,949	
20	Education / Training.....	\$375	
21	Uniforms & Uniform Cleaning.....		
22	Meals & Travel for Ambulance Personnel.....		
23	Maintenance Contracts.....	\$16,779	
24	Minor Equipment - Not Capitalized.....	\$3,848	
25	Ambulance Supplies - (Nonchargeable).....		
26	Other (Attach Schedule)		
27	Total.....		<u>\$268,950</u>
28	Total Other Operating Expenses (To Page 2, Line 15)		<u><u>\$846,060</u></u>

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FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

DETAIL OF CONTRACTUAL ALLOWANCES

Line No.	Name of Contracting Entity	Total Billable Runs	Gross Billing	Percent Discount	Allowance
01					
02	N/A				
03					
04					
05					
06					
07					
08					
09					
10					
11					
12					
13					
14					
15					
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24					
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31					
32					
33					
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36					
37					
38					
39					
40					
41					
42					
43					
ALLOWANCE TOTAL To Page 2 Line 4		0	\$0		\$0

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

SUBSCRIPTION SERVICE REVENUE AND DIRECT SELLING EXPENSES

Line No.	DESCRIPTION	_____
01	Billings at Fully Established Rate (Informational Only - Detail Reported On Page 2 Line 1)	_____
	LESS:	
02	AHCCCS Settlement	_____
03	Medicare Settlement	_____
04	Subscription Service Settlements	_____
05	Subscription Service Bad Debt	_____
06	Total (Informational Only - Detail Reported On Page 2 Lines 2, 3 and 11)	_____
07	Net Revenue from Subscription Service Runs	_____
08	Sales of Subscription Contracts (To Page 2 Line 9)	\$0
09	Other Revenue (Attach Schedule)	_____
10	Total Subscription Service Revenue	=====
	Direct Expenses Incurred Selling Subscription Contracts:	
11	Salaries/Wages	_____
12	Payroll Taxes	_____
13	Employee Fringe Benefits	_____
14	Professional Services	_____
15	Contract Labor	_____
16	Travel	_____
17	Other General & Administrative Expenses	_____
18	Depreciation/Amortization	_____
19	Rent/Lease	_____
20	Building/Station Expenses	_____
21	Transportation-Vehicles	_____
22	Other (Not Classified Above and Misc)	_____
23	Total Subscription Service Expenses (Informational Only - Detail Reported On Page 2, Lines 12 - 16)	=====

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

OTHER OPERATING REVENUES AND EXPENSES

Line No.	<u>DESCRIPTION</u>	
Other Operating Revenues:		
01	Supportive Funding - Local (Attach Schedule)	_____
02	Grant Funds - State (Attach Schedule)	_____
03	Grant Funds - Federal (Attach Schedule)	_____
04	Grant Funds - Other (Attach Schedule)	_____
05	Patient Finance Charges	_____
06	Patient Late Payment Charges	_____
07	Interest Earned - Related Person/Organization	_____
08	Interest Earned - Other	_____
09	Interest Income and Miscellaneous Revenue	\$2,119
10	Gain On Sale of Operating Property	1,204
11	Other:	_____
12	Total Other Operating Revenues	<u>\$3,323</u>
Other Operating Expenses:		
13	(Loss) On Sale of Operating Property	\$0
14	Other:	_____
15	Other:	_____
16	Total Other Operating Expenses	<u>\$0</u>
17	Net Other Operating Revenues and Expenses (To Page 2, Line 20)	<u><u>\$3,323</u></u>

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AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

**SCHEDULE II
DETAIL OF SALARIES / WAGES**

Management, Ambulance Personnel, Other Personnel

Line
No.

Detail of Salaries/Wages - Other Than Officers/Owners

		METHOD OF COMPENSATION			
	Certification and/or Title	Scheduled Shifts (i.e. 40 or 60 hours a week)	Hourly Wage	Annual Salary	\$'s per Run or Shift
01	MANAGEMENT:				
	Various Local Management	40 Hours a week	x	x	N/A
	Various Regional Management	40 Hours a week	x	x	N/A
02	AMBULANCE PERSONNEL:				
	Paramedic	56/50/48/40 hours/week	x		N/A
	EMT	56/50/48/40 hours/week	x		N/A
	Nurse	56/50/48/40 hours/week	x		N/A
03	OTHER PERSONNEL				
	Various Support Staff	40 Hours a week	x	x	N/A

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FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

**SCHEDULE III
DEPRECIATION AND/OR RENT / LEASE EXPENSES (AMBULANCE VEHICLES & ACCESSORIAL EQUIPMENT ONLY)**

Line	A Description of Property	B Date Placed in Service	C Cost or Other Basis	D Business Use Percent	E Basis for Depreciation	F Method	G Recovery Period	H Deprec. Prior Years	I Current Year Deprec.	J Remaining Basis	K Rent/Lease Amount*
01	Vehicle Rental			100%							\$0
02	Equipment Rental			100%							\$8,412
03											
04	Ambulances	Various	\$417,657	100%	\$417,657	SL	Various	\$0	\$24,170	\$362,886	
05	Accessorial Equipment	Various	\$26,051	100%	\$26,051	SL	Various	\$0	\$12,276	\$13,775	
06											
07											
08											
09											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20	SUBTOTAL		\$443,708		\$443,708				\$36,446		\$8,412

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* Complete description of property, date placed in service, and rent/lease amount columns only.

AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

**SCHEDULE III
DEPRECIATION AND / OR RENT / LEASE EXPENSES (ALL OTHER ITEMS)**

Line	A Description of Property	B Date Placed in Service	C Cost or Other Basis	D Business Use Percent	E Basis for Depreciation	F Method	G Recovery Period	H Deprec. Prior Years	I Current Year Deprec.	J Remaining Basis	K Rent/Lease Amount*
01	Rented Real Estate			100%							\$172,109
02	OH Vehicle Rental			100%							\$0
03	OH Equipment Rental			100%							\$9,635
04											
05	Other Vehicles	Various	\$0	100%	\$0	SL	Various	\$0	\$0	\$0	
06	Non-Vehicle Fixed Assets	Various	\$2,853	100%	\$2,853	SL	Various	\$0	\$335	\$2,518	
07											
08	OH Vehicles	Various		100%		SL	Various		\$4,330		
09	OH Non-Vehicle Fixed Assets	Various		100%		SL	Various		\$32,152		
10											
11											
12											
13											
14											
15											
16											
17											
18	SUBTOTAL (above)		\$2,853		\$2,853			\$0	\$36,817		\$181,745
19	SUBTOTAL (from Pg 12 Ln 20)		\$443,708		\$443,708				\$36,446		\$8,412
20	SUM of Ln 18 and 19		\$446,560		\$446,560			\$0	\$73,263		\$190,157

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To Pg 6, Ln 01

* Complete description of property, date placed in service, and rent/lease amount columns only.

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AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

**Schedule IV
DETAIL OF INTEREST**

Line No.	Description	(1) Interest Rate	(2) Principal Balance Beg. of Period	(3) End of Period	(4) Interest Expense Related Persons or Organizations	(5) Other
<u>Service Vehicles & Accessorial Equipment</u>						
<u>Name of payee:</u>						
01		%	\$		\$	
02						
03						
04						
<u>Communications Equipment</u>						
<u>Name of Payee:</u>						
05		%	\$		\$	
06						
07						
<u>Other Property & Equipment</u>						
<u>Name of Payee:</u>						
08		%	\$		\$	
09						
10						
<u>Working Capital</u>						
<u>Name of Payee:</u>						
11	Various - See Audited Financials	Various	In Corp Balances \$		0	\$295,636
12						
13						
<u>Other</u>						
<u>Name of Payee:</u>						
14		%	\$		\$	
15	TOTAL		N/A	N/A	0	\$295,636

----- (To Pg 2, Cl 2, Ln 16) -----

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FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

BALANCE SHEET

(in thousands, except shares)

ASSETS			
Current assets:			
01	Cash and cash equivalents	\$	199
02	Restricted cash		13
03	Accounts receivable, net		1,193
04	Inventories		56
05	Deferred tax assets, net		256
06	Prepaid expenses and other current assets		86
07	Total current assets		1,802
08	Property and equipment, net		546
09	Goodwill		1,185
10	Intangible assets, net		1,550
11	Deposits		332
12	Deferred tax assets, net		0
13	Other assets		51
14	Total assets	\$	5,466
LIABILITIES AND STOCKHOLDER'S EQUITY			
15	Accounts payable	\$	244
16	Accrued and other current liabilities		332
17	Deferred revenue		150
18	Deferred tax liabilities, net		0
19	Current portion of long-term debt		197
20	Total current liabilities		922
21	Long-term debt, net of current portion		2,917
22	Deferred tax liabilities, net		830
23	Other liabilities		313
24	Total liabilities		4,982
Stockholder's equity:			
25	Common stock, \$0.01 par value, 900 shares authorized, 100 shares issued and outstanding		0
26	Preferred stock, \$0.01 par value, 100 shares authorized, zero shares issued and outstanding		0
27	Additional paid-in capital		849
28	Accumulated other comprehensive loss		(16)
29	Accumulated deficit		(349)
30	Total stockholder's equity		484
31	Total liabilities and stockholder's equity	\$	5,466

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AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY: Southwest Ambulance and Rescue of Arizona

FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

STATEMENT OF CASH FLOWS

(in thousands)

Cash flows from operating activities:		
01	Net loss	\$ (349)
Adjustments to reconcile net loss to net cash used in operating activities:		
02	Depreciation and amortization	237
03	Amortization of debt issuance costs	8
04	Accretion of interest on debt	32
05	Share-based compensation expense	2
06	Loss on sale of assets and property and equipment	3
07	Impairment of property and equipment, goodwill and intangible assets	18
Change in assets and liabilities:		
08	Accounts receivable, net	(496)
09	Inventories	4
10	Prepaid expenses and other current assets	25
11	Deposits	(2)
12	Other assets	12
13	Accounts payable	(34)
14	Accrued and other current liabilities	62
15	Deferred revenue	(3)
16	Other liabilities	54
17	Net cash used in operating activities	<u>(428)</u>
Cash flows from investing activities:		
18	Purchase of property and equipment	(181)
19	Proceeds from the sale/disposal of property and equipment	3
20	Decrease in restricted cash	101
21	Net cash used in investing activities	<u>(76)</u>
Cash flows from financing activities:		
22	Borrowings on Working Capital Loan	177
23	Payments on capital leases	(6)
24	Reduction of Deposits related to Backstop Loan	3
25	Payments on Backstop Loan	(3)
26	Debt issuance costs	(25)
27	Proceeds received from Reorganized Parent's issuance of equity	190
28	Net cash provided by financing activities	<u>336</u>
29	Decrease in cash and cash equivalents	(168)
30	Cash and cash equivalents, beginning of period	367
31	Cash and cash equivalents, end of period	<u>\$ 199</u>

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FOR THE PERIOD FROM: 1/1/14 TO: 12/31/14

The Notes below apply to the preceding Ambulance Revenue and Cost Report Page 15 and Page 16.

Note 1 The preceding Ambulance Revenue and Cost Report Page 15 and Page 16 are Special Purpose Reports.

Note 2 The preceding Ambulance Revenue and Cost Report Page 15 and Page 16 Special Purpose Reports formats do not comply with generally accepted accounting principles and are not prepared using the accrual method of accounting.

Note 3 The preceding Ambulance Revenue and Cost Report Page 15 and Page 16 Special Purpose Reports are unaudited.

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