

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

UNITED STATES OF AMERICA	)	
	)	Case No. 14 CR 732
vs.	)	
	)	
JANET GUERRERO,	)	Violations: Title 18, United States
SHERWIN CUBELO,	)	Code, Sections 1035,
JOSEPHINE TINIMBANG,	)	1347, 1349, and 1956
JOSE CALUB,	)	
SHARON GULLA,	)	
MARILOU LOZANO,	)	
RONALD MALALIS,	)	
MARY PILAR MENDOZA, and	)	
ISABELITA SABEJON	)	

**SUPERSEDING INDICTMENT**

**COUNT ONE**

The SPECIAL SEPTEMBER 2014 GRAND JURY charges:

1. At times material to this Indictment:

**The Medicare Program**

a. The Medicare program was a federal health care program providing benefits to persons who were over the age of 65 or disabled. Medicare was administered by the Centers for Medicare and Medicaid Services, a federal agency under the United States Department of Health and Human Services. Individuals who received benefits under Medicare were referred to as Medicare “beneficiaries.”

b. Medicare was a “health care benefit program,” as defined by Title 18, United States Code, Section 24(b).

c. The Medicare program included coverage under two primary components, hospital insurance (“Part A”) and medical insurance (“Part B”). Part A of the Medicare program

covered the cost of home health care services such as skilled nursing services and physical therapy.

d. Palmetto GBA and National Government Services were the CMS-contracted carriers for Medicare Part A in the state of Illinois. TrustSolutions, LLC and Cahaba Safeguard Administrators, LLC were the Program Safeguard Contractors for Medicare Part A in the state of Illinois.

e. By becoming a participating provider in Medicare, enrolled providers agreed to abide by the policies and procedures, rules, and regulations governing reimbursement. To receive Medicare funds, enrolled providers, together with their authorized agents, employees, and contractors, were required to abide by all the provisions of the Social Security Act, the regulations promulgated under the Act, and applicable policies and procedures, rules, and regulations issued by CMS and its authorized agents and contractors. Health care providers were given and provided with online access to Medicare manuals and service bulletins describing proper billing procedures and billing rules and regulations.

f. Upon certification, the medical provider, whether a clinic or an individual, was assigned a provider identification number for billing purposes (referred to as a PIN). When the medical provider rendered a service, the provider submitted a claim for reimbursement to the Medicare contractor/carrier that included the PIN assigned to that medical provider.

g. Medicare Part A regulations required health care providers enrolled with Medicare to maintain complete and accurate medical records reflecting the medical assessment and diagnoses of their patients, as well as records documenting the actual treatment of the patients to whom services were provided and on whose behalf claims for payment were submitted. These records were required to be sufficient to permit Medicare, through its

contractors, to review the appropriateness of payments made to the health care provider under the Part A program.

h. Providers could submit claims to Medicare only for services they rendered, and providers were required to maintain patient records to verify that the services were provided as described in claims for payment submitted to Medicare.

i. To receive reimbursement for a covered service from Medicare, a provider was required to submit a claim, either electronically or using a form, containing the required information appropriately identifying the provider, patient, and services rendered.

j. A home health agency was an entity that provided health care services to Medicare beneficiaries in their homes. Home health care services included but were not limited to skilled nursing services and physical therapy. Medicare covered home health care services when beneficiaries needed skilled care and were homebound.

k. For a beneficiary to be eligible to receive home health care services covered by Medicare, a physician was required to certify that the patient needed skilled care and was homebound. In addition, the home health agency was required to provide the beneficiary with a comprehensive assessment of the beneficiary's health status, as conducted by a registered nurse. The registered nurse was required to independently assess the beneficiary's homebound status.

l. The comprehensive assessment required by Medicare was also referred to as the Outcome and Assessment Information Set, or OASIS. The health information collected during the comprehensive assessment was required to be reported to Medicare, and Medicare used the information to calculate the amount the home health agency would be paid for the

episode of care. Medicare paid the home health agency more for an episode of care when the comprehensive assessment indicated the beneficiary's clinical condition was more severe.

m. Federal law prohibited physicians who received compensation from a home health care company from referring patients to that company for home health care services. Such physicians were expressly prohibited from supplying home health certifications, or establishing or reviewing the home health plan of treatment, for any patient of the home health care company from which the physician received compensation.

### **Defendants and The Companies**

n. Donnarich Home Health Care, Inc. was a home health care company enrolled in Medicare that purported to provide home health care services to patients in their homes. Donnarich was located in Lincolnwood, Illinois.

o. Josdan Home Health Care Inc. was a home health care company enrolled in Medicare that purported to provide home health services to patients in their homes. Josdan was located in Lincolnwood, Illinois.

p. Pathways Home Health Services LLC was a home health care company enrolled in Medicare that purported to provide home health services to patients in their homes. Pathways was located in Lincolnwood, Illinois.

q. Skilled Resource Network was a corporation registered in the state of Illinois. The entity and its bank accounts were funded by deposits from Josdan and Pathways and used by JOSEPHINE TINIMBANG and others.

r. 6420 N. Longmeadow, LLC was a limited liability company registered in the state of Illinois. The entity's members were relatives of JOSEPHINE TINIMBANG.

s. All In One Marketing Agency Inc. was a corporation registered in the state of Illinois and located in Hammond, Indiana.

t. JANET GUERRERO, a resident of Cook County, Illinois, was the Office Manager of Josdan and was listed as the owner of Pathways.

u. SHERWIN CUBELO, a resident of Lake County, Indiana, was the President of All In One Marketing. He recruited Medicare beneficiaries for Donnarich, Josdan, and Pathways.

v. JOSEPHINE TINIMBANG, a resident of Cook County, Illinois until approximately June 2012, was an owner and operator of Donnarich, Josdan, and Pathways.

w. JOSE CALUB, a resident of Cook County, Illinois, was the medical director of Donnarich, Josdan, and Pathways. He was a licensed physician who certified Medicare beneficiaries as eligible to receive home health services.

x. SHARON GULLA, a resident of Cook County, Illinois, was a registered nurse who worked as a director of nursing at Josdan and a quality assurance supervisor at Pathways.

y. MARILOU LOZANO, a resident of Cook County, Illinois, was a registered nurse who enrolled beneficiaries in home health services at Josdan and Pathways;

z. RONALD MALALIS, a resident of Cook County, Illinois, was a registered nurse who enrolled beneficiaries in home health services at Josdan and Pathways;

aa. MARY PILAR MENDOZA, a resident of Cook County, Illinois, was a registered nurse who enrolled beneficiaries in home health services at Pathways;

bb. ISABELITA SABEJON, a resident of Cook County, Illinois, was a registered nurse who enrolled beneficiaries in home health services at Josdan and Pathways;

2. From in or around January 2008 and continuing through in or around March 2014, at Cook County, in the Northern District of Illinois, and elsewhere,

JANET GUERRERO,  
SHERWIN CUBELO,  
JOSEPHINE TINIMBANG,  
JOSE CALUB,  
SHARON GULLA,  
MARILOU LOZANO,  
RONALD MALALIS,  
MARY PILAR MENDOZA, and  
ISABELITA SABEJON,

defendants herein, did conspire with each other and others, known and unknown to the Grand Jury, to violate Title 18, United States Code, Section 1347, that is, knowingly and willfully to execute a scheme and artifice to defraud a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, Medicare, and to obtain, by means of materially false and fraudulent pretenses, representations, and promises, money and property owned by, and under the custody and control of, said health care benefit program, in connection with the delivery of and payment for health care benefits, items, and services, which conspiracy is further described below.

**Purpose of the Conspiracy**

3. It was a purpose of the conspiracy for defendants JANET GUERRERO, SHERWIN CUBELO, JOSEPHINE TINIMBANG, JOSE CALUB, SHARON GULLA, MARILOU LOZANO, RONALD MALALIS, MARY PILAR MENDOZA, and ISABELITA SABEJON to unlawfully enrich themselves and others by, among other things, submitting or causing the submission of false and fraudulent claims to Medicare, and diverting proceeds of the fraud for the personal use and benefit of the defendants and their co-conspirators.

### **Manner and Means**

4. It was part of the conspiracy that SHERWIN CUBELO and others supplied Donnarich, Josdan, and Pathways with the names and contact information of Medicare beneficiaries who did not qualify for home health care services because they were not homebound and did not need skilled care.

5. It was further part of the conspiracy that SHERWIN CUBELO and others received bribe and kickback payments from JOSEPHINE TINIMBANG and others in exchange for supplying Medicare beneficiaries to Donnarich, Josdan, and Pathways.

6. It was further part of the conspiracy that JOSEPHINE TINIMBANG caused JANET GUERRERO and others to keep track of the beneficiaries referred to Donnarich, Josdan, and Pathways by CUBELO and others.

7. It was further part of the conspiracy that JOSEPHINE TINIMBANG caused JANET GUERRERO and others to calculate the bribe and kickback payments CUBELO and others were owed in exchange for referring Medicare beneficiaries to Donnarich, Josdan, and Pathways.

8. It was further part of the conspiracy that JANET GUERRERO, JOSEPHINE TINIMBANG, SHARON GULLA, and others arranged for and caused others to arrange for home health services for the beneficiaries referred by SHERWIN CUBELO and others, knowing that such beneficiaries did not need home health care and were not qualified for home health care because they were not homebound.

9. It was further part of the conspiracy that JANET GUERRERO and others communicated with SHERWIN CUBELO and other referral sources when the beneficiaries

those sources referred to Donnarich, Josdan, and Pathways refused services, so that CUBELO and others could contact the beneficiaries and persuade them to enroll in home health care.

10. It was further part of the conspiracy that at times, SHERWIN CUBELO paid the beneficiaries he referred to Donnarich, Josdan, and Pathways to induce them to agree to accept home health care services.

11. It was further part of the conspiracy that JANET GUERRERO, JOSEPHINE TINIMBANG, JOSE CALUB, SHARON GULLA, MARILOU LOZANO, RONALD MALALIS, MARY PILAR MENDOZA, ISABELITA SABEJON, and others enrolled and caused to be enrolled Medicare beneficiaries in home health care at Donnarich, Josdan, and Pathways even though they were aware that the beneficiaries did not need or qualify for the care, causing Medicare to pay Donnarich, Josdan, and Pathways for home health care services that were not medically necessary and were not provided.

12. It was further part of the conspiracy that JOSEPHINE TINIMBANG, JOSE CALUB, SHARON GULLA, and others subjected Medicare beneficiaries to and caused them to be subjected to a pre-planned schedule of enrollments, discharges, and re-enrollments, such that beneficiaries were discharged from care and re-enrolled in care regardless of whether they qualified for or wanted it.

13. It was further part of the conspiracy that JOSE CALUB would be paid a salary by Donnarich, Josdan, and Pathways, and would also bill Medicare and cause Medicare to be billed for visiting beneficiaries and certifying and re-certifying them as homebound and eligible to receive home health care when they were in fact not homebound and not eligible to receive home health care.



14. It was further part of the conspiracy that when JOSE CALUB could not personally bill Medicare for visiting and certifying the patients he enrolled in home health care at Donnarich, Josdan, and Pathways – because some of the patients did not have the pertinent type of Medicare coverage – JOSE CALUB would submit invoices to Donnarich, Josdan, and Pathways, and the three home health companies would pay JOSE CALUB for those patients directly.

15. It was further part of the conspiracy that JOSEPHINE TINIMBANG, JANET GUERRERO, SHARON GULLA, and others ignored the findings of physicians who concluded that beneficiaries were not homebound, were not qualified for home health care, and did not need it; and obtained other physicians, including JOSE CALUB, to certify the beneficiaries as eligible to receive home health care.

16. It was further part of the conspiracy that MARILOU LOZANO, RONALD MALALIS, MARY PILAR MENDOZA, ISABELITA SABEJON, and others falsified information in medical records, including but not limited to OASIS forms, to make it appear that beneficiaries were homebound and qualified for home health care services when in fact they were not homebound and did not qualify.

17. It was further part of the conspiracy that MARILOU LOZANO, RONALD MALALIS, MARY PILAR MENDOZA, ISABELITA SABEJON, and others falsified information in medical records, including but not limited to OASIS forms, to make it appear that beneficiaries were sicker than they truly were, and needed assistance that they did not in fact need, so that Medicare would pay more money to the home health care companies.

18. It was further part of the conspiracy that JANET GUERRERO, SHERWIN CUBELO, JOSEPHINE TINIMBANG, JOSE CALUB, SHARON GULLA, MARILOU

LOZANO, RONALD MALALIS, MARY PILAR MENDOZA, ISABELITA SABEJON, and others caused Donnarich, Josdan, and Pathways to submit claims to Medicare for services that were not medically necessary, and caused Medicare to make more than \$60 million in payments for home health care services, at least \$45 million of which were fraudulent.

19. It was further part of the conspiracy that JANET GUERRERO, JOSEPHINE TINIMBANG, and others would transfer and disburse, and cause the transfer and disbursement of, funds from the various bank accounts of Donnarich, Josdan, and Pathways, and from secondary bank accounts that were funded by Donnarich, Josdan, and Pathways, to themselves and others.

20. It was further part of the conspiracy that JOSEPHINE TINIMBANG, JANET GUERRERO, and others would cause the proceeds of the fraud to be used to purchase assets for the benefit of JOSEPHINE TINIMBANG and others, including but not limited to assets such as investment accounts, shares of stock, vehicles, real estate, and jewelry.

21. It was further part of the conspiracy that the defendants and others misrepresented, concealed, hid, and caused to be misrepresented, concealed, and hidden, the purpose of the conspiracy and acts done in furtherance of the conspiracy.

All in violation of Title 18, United States Code, Section 1349.

## COUNTS TWO THROUGH EIGHT

The SPECIAL SEPTEMBER 2014 GRAND JURY further charges:

1. The allegations of Paragraph 1 of Count One of this Indictment are incorporated here.
2. From in or around January 2008 and continuing through in or around March 2014, at Cook County, in the Northern District of Illinois, and elsewhere,

JOSEPHINE TINIMBANG,  
JOSE CALUB,  
MARILOU LOZANO,  
RONALD MALALIS, and  
ISABELITA SABEJON,

defendants herein, participated in a scheme to defraud a health care benefit program affecting commerce, as defined in Title 18, United States Code, Section 24(b), that is, Medicare, and to obtain, by means of materially false and fraudulent pretenses, representations, and promises, money and property owned by, and under the custody and control of, said health care benefit program, in connection with the delivery of and payment for health care benefits, items, and services, which scheme is further described below.

3. It was part of the scheme that JOSEPHINE TINIMBANG, JOSE CALUB, MARILOU LOZANO, RONALD MALALIS, ISABELITA SABEJON, and others enrolled and caused to be enrolled Medicare beneficiaries in home health care at Josdan and Pathways even though they were aware that the beneficiaries did not need or qualify for the care, causing Medicare to pay Donnarich, Josdan, and Pathways for home health care services that were not medically necessary and were not provided.

4. It was further part of the scheme that MARILOU LOZANO, RONALD MALALIS, ISABELITA SABEJON, and others falsified information in medical records,

including but not limited to OASIS forms, to make it appear that beneficiaries were homebound and qualified for home health care services when in fact they were not homebound and did not qualify.

5. It was further part of the scheme that MARILOU LOZANO, RONALD MALALIS, ISABELITA SABEJON, and others falsified information in medical records, including but not limited to OASIS forms, to make it appear that beneficiaries were sicker than they truly were, and needed assistance that they did not in fact need, so that Medicare would pay more money to the home health care companies.

6. It was further part of the scheme that JOSE CALUB would be paid a salary by Donnarich, Josdan, and Pathways, and would also bill Medicare and cause Medicare to be billed for visiting beneficiaries and certifying and re-certifying them as homebound and eligible to receive home health care when they were in fact not homebound and not eligible to receive home health care.

7. It was further part of the scheme that when JOSE CALUB could not personally bill Medicare for visiting and certifying the patients he enrolled in home health care at Donnarich, Josdan, and Pathways – because some of the patients did not have a pertinent type of Medicare coverage – JOSE CALUB would submit invoices to Donnarich, Josdan, and Pathways, and the three home health companies would pay JOSE CALUB for those patients directly.

8. It was further part of the scheme that JOSEPHINE TINIMBANG, JOSE CALUB, MARILOU LOZANO, RONALD MALALIS, ISABELITA SABEJON, and others caused Donnarich, Josdan, and Pathways to submit claims to Medicare for services that were not medically necessary, and caused Medicare to make more than \$60 million in payments for home health care services, at least \$45 million of which were fraudulent.

9. It was further part of the scheme that JOSEPHINE TINIMBANG and others transferred and disbursed, and caused to be transferred and disbursed, funds from the various bank accounts of Donnarich, Josdan, and Pathways, and from secondary bank accounts that were funded by Donnarich, Josdan, and Pathways, to themselves and others.

10. It was further part of the conspiracy that JOSEPHINE TINIMBANG and others would cause the proceeds of the fraud to be used to purchase assets for the benefit of JOSEPHINE TINIMBANG and others, including but not limited to assets such as investment accounts, shares of stock, vehicles, real estate, and jewelry.

11. It was further part of the scheme that JOSEPHINE TINIMBANG and others concealed and hid, and caused to be concealed and hidden, the acts done and the purpose of the acts done as part of the scheme.

12. On or about the dates enumerated below, in the Northern District of Illinois and elsewhere,

JOSEPHINE TINIMBANG,  
JOSE CALUB,  
MARILOU LOZANO,  
RONALD MALALIS, and  
ISABELITA SABEJON,

defendants herein, did knowingly and willfully execute, and attempt to execute, the above described scheme, as follows:

Count	Defendant	Medicare Ben'y	Purported Dates of Service	Date Billed	Items Billed	Amount Paid by Medicare
2	TINIMBANG CALUB	L.B.	3/16/2012 – 5/13/2012	6/18/2012	Home Health Episode of Care (Pathways)	\$2,487.62
3	TINIMBANG CALUB	L.B.	3/16/2012	8/28/2012	G0179 Home Health Recertification	\$34.92

4	TINIMBANG CALUB	M.C.	6/21/2012 – 8/19/2012	9/6/2012	Home Health Episode of Care (Josdan)	\$1,661.34
5	TINIMBANG CALUB	M.C.	6/21/2012	7/19/2012	G0180 Home Health Certification	\$45.10
6	TINIMBANG LOZANO	J.R.	10/20/2011 – 12/18/2011	1/20/2012	Home Health Episode of Care (Pathways)	\$3,820.49
7	TINIMBANG MALALIS	L.B.	1/5/2011 – 3/2/2011	4/5/2011	Home Health Episode of Care (Josdan)	\$2,475.61
8	TINIMBANG SABEJON	P.H.	2/6/2012 – 4/5/2012	5/23/2012	Home Health Episode of Care (Pathways)	\$2,043.93

All in violation of Title 18, United States Code, Section 1347.

**COUNTS NINE THROUGH ELEVEN**

The SPECIAL SEPTEMBER 2014 GRAND JURY further charges:

1. The allegations of Paragraph 1(a) to 1(m), and Paragraph 1(y) to 1(bb) of Count One of this Indictment are incorporated here.

2. On or about the dates set forth in the table below, in the Northern District of Illinois, Eastern Division, and elsewhere,

MARILOU LOZANO,  
RONALD MALALIS, and  
ISABELITA SABEJON,

defendants herein, did knowingly and willfully make and cause to be made a materially false, fictitious, and fraudulent statement and representation, and make and cause to be made a materially false writing and document, knowing the same to contain a materially false, fictitious, and fraudulent statement and entry, in a matter involving a health care benefit program, that is, Medicare, in connection with payment for healthcare benefits, items, and services, by causing to be submitted claims containing fabricated information, including information that made it appear that beneficiaries were homebound and sicker than they actually were, namely:

<b>Count</b>	<b>Defendant</b>	<b>Medicare Ben'y</b>	<b>Purported Dates of Service</b>	<b>Date Billed</b>	<b>Items Billed</b>	<b>Amount Paid by Medicare</b>
9	TINIMBANG LOZANO	J.R.	10/20/2011 – 12/18/2011	1/20/2012	Home Health Episode of Care (Pathways)	\$3,820.49
10	TINIMBANG MALALIS	L.B.	1/5/2011 – 3/2/2011	4/5/2011	Home Health Episode of Care (Josdan)	\$2,475.61
11	TINIMBANG SABEJON	P.H.	2/6/2012 – 4/5/2012	5/23/2012	Home Health Episode of Care (Pathways)	\$2,043.93

All in violation of Title 18, United States Code, Section 1035(a)(2).

**COUNTS TWELVE THROUGH FOURTEEN**

The SPECIAL SEPTEMBER 2014 GRAND JURY further charges:

1. The allegations of Paragraph 1(q), 1(r), and 1(v) of Count One of this Indictment are incorporated here.

2. On or about the dates set forth in the table below, in the Northern District of Illinois, Eastern Division, and elsewhere,

JOSEPHINE TINIMBANG,

defendant herein, knowingly conducted and attempted to conduct the financial transactions listed below, namely, deposits and withdrawals for the purchase of diamond jewelry, in or affecting interstate commerce, each such financial transaction constituting a separate count, which financial transactions involved the proceeds of a specified unlawful activity, namely, conspiracy to commit health care fraud, knowing that that the financial transactions were designed in whole and in part to conceal and disguise the nature, location, source, ownership, and control of the proceeds of the specified unlawful activity and, while conducting such financial transactions, knowing that the property involved in the financial transactions represented the proceeds of some form of unlawful activity:

<b>Count</b>	<b>Amount</b>	<b>Date</b>	<b>Transaction</b>
12	\$100,000	2/25/2011 (deposit)	Check 1185 drawn on JP Morgan Chase account x0910, made payable to Janet Guerrero but deposited to Skilled Resource Network
13	\$15,000	3/23/2011 (deposit)	Check 22491 drawn on Bank of America account x5022, made payable to 6420 N. Longmeadow but deposited to Skilled Resource Network



14	\$75,000	4/7/2011	Cashier's check 2005019554, purchased with funds from Skilled Resource Network and made payable to Edward Simonian Inc.
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All in violation of Title 18, United States Code, Section 1956(a)(1)(B)(i).

## FORFEITURE ALLEGATIONS

The SPECIAL SEPTEMBER 2014 GRAND JURY further alleges:

1. The allegations contained in Counts One through Fourteen of this Indictment are incorporated here for the purpose of alleging forfeiture pursuant to the provisions of Title 18, United States Code, Section 982.

2. Upon conviction of a violation of Title 18, United States Code, Sections 1035, 1347, or 1349, as alleged in Counts One through Twelve of this Indictment, the defendants shall forfeit to the United States of America, pursuant to Title 18, United States Code, Section 982(a)(7), any property, real or personal, that constitutes or is derived, directly or indirectly, from gross proceeds traceable to the commission of the offense.

3. Upon conviction of a violation of Title 18, United States Code, Section 1956, as alleged in Counts Thirteen through Fifteen of this Indictment, the defendants shall forfeit to the United States of America, pursuant to Title 18, United States Code, Section 982(a)(1), any property, real or personal, involved in such offense and any property traceable to such property.

4. The property to be forfeited includes, but is not limited to, the following:

### Money Judgment

a. A forfeiture judgment of at least \$45 million.

### Amounts Seized from Bank Accounts

b. Six thousand two hundred seven dollars and eighteen cents seized on or about March 5, 2014 from JP Morgan Chase Bank account 805445244, held in the name of Josdan Home Health Care Inc.;

- c. Seven thousand seven hundred ninety dollars and seventy-five cents seized on or about March 5, 2014 from Associated Bank account 2153141631, held in the name of Skilled Resource Network, Inc.;
- d. Eleven thousand five hundred twelve dollars and fifty-five cents seized on or about March 5, 2014 from JP Morgan Chase Bank account 858450851, held in the name of Pathways Home Health Services;
- e. Eighty-three thousand four hundred ninety-six dollars and thirty cents seized on or about March 5, 2014 from Bank of America account 5201745022, held in the name of Josdan Home Health Care Inc.;
- f. Ninety-one thousand six hundred thirty-nine dollars and thirty-seven cents seized on or about March 5, 2014 from JP Morgan Chase Bank account 713560910, held in the name of Pathways Home Health Services LLC;
- g. One million five hundred seventy-two thousand nine hundred six dollars and eighty-eight cents seized on or about March 5, 2014 from Pershing Advisor Solutions LLC investment account number AUG-709598, held in the name of First USA Finance and Investment Inc.; and
- h. One million four hundred thirty-eight thousand fifty dollars and no cents seized on or about April 24, 2014, resulting from the sale of Facebook shares held in Computershare account number C0000017621, in the name of First USA Finance and Investment.

Vehicles

- i. A 2009 Mercedes-Benz GL320, VIN 4JGBF25E89A498040, seized on or about March 5, 2014;

- j. A 2010 Land Rover Range Rover, VIN SALSH2E41AA231602, seized on or about March 16, 2014; and
- k. A 2007 BMW X5, VIN 5UXFE43517LY83916, seized on or about March 18, 2014, and any proceeds resulting from the sale of such vehicle.

Real Property

- l. \$425,967.24 in proceeds from the sale of real property located at 6430 N. Longmeadow, Lincolnwood, Illinois, and legally described as:

THE NORTHEASTERLY 80 FEET OF LOTS 3, 4, AND 5, TAKEN AS A TRACT IN LINCOLN TOWER'S EIGHTH ADDITION SUBDIVISION OF THE NORTHWESTERLY HALF OF LOT 21 (EXCEPT THE NORTHWESTERLY 161.50 FEET THEREOF) IN BRONSON'S PART OF CALDWELL'S RESERVE IN TOWNSHIP 40 AND 41 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THEREFROM THE NORTHEAST 33 FEET AND THE SOUTHEAST 33 FEET THEREOF) AND (EXCEPT THEREFROM THAT PART LYING SOUTH A LINE 50 FEET NORTH OF THE CENTER LINE OF DEVON AVENUE) IN COOK COUNTY, ILLINOIS.

PIN: 10-33-427-034-0000

- m. Real property located at 7225 N. Kostner Avenue, Units A and B, Lincolnwood, Illinois, and legally described as:

UNIT A IN THE 7225 KOSTNER CONDOMINIUM, AS DELINEATED ON THE PLAT OF SURVEY OF THE FOLLOWING DESCRIBED TRACT OF LAND: LOTS 11, 12, 13, 14, AND 15 IN BLOCK 1 IN KOSTNER AVENUE ADDITION TO KENILWORTH HIGHLANDS, A SUBDIVISION OF THE SOUTH ½ OF THE WEST 10 ACRES OF THE SOUTH 20 ACRES OF THE WEST 80 ACRES OF THE SOUTHEAST ¼ OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN ALSO THAT PART OF THE WEST ½ OF THE VACATED NORTH AND SOUTH ALLEY EAST AND ADJOINING SAID LOTS 11, 12, 13, 14, AND 15 ALSO THAT PART OF THE NORTH ½ OF THE VACATED EAST AND WEST ALLEY LYING SOUTH AND ADJOINING LOT 11 AND SOUTH AND ADJOINING THE SOUTH LINE OF LOT 11 EXTENDED EAST TO THE CENTER LINE OF SAID VACATED NORTH AND SOUTH ALLEY IN BLOCK 1 IN KOSTNER AVENUE ADDITION TO KENILWORTH

HIGHLANDS, IN COOK COUNTY, ILLINOIS, WHICH PLAT OF SURVEY IS ATTACHED AS AN EXHIBIT TO THE DECLARATION OF CONDOMINIUM RECORDED MARCH 30, 2010 AS DOCUMENT NUMBER 1008934039, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS.

UNIT NUMBER(S) B IN THE 7225 KOSTNER CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED TRACT OF LAND: LOTS 11, 12, 13, 14, AND 15 IN BLOCK 1 IN KOSTNER AVENUE ADDITION TO KENILWORTH HIGHLANDS, A SUBDIVISION OF THE SOUTH ½ OF THE WEST 10 ACRES OF THE SOUTH 20 ACRES OF THE WEST 80 ACRES OF THE SOUTHEAST ¼ OF SECTION 27, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, ALSO THAT PART OF THE WEST ½ OF THE VACATED NORTH AND SOUTH ALLEY EAST AND ADJOINING SAID LOTS 11, 12, 13, 14, AND 15, ALSO THAT PART OF THE NORTH ½ OF THE VACATED EAST AND WEST ALLEY LYING SOUTH AND ADJOINING LOT 11 AND SOUTH AND ADJOINING THE SOUTH LINE OF LOT 11 EXTENDED EAST TO THE CENTER LINE OF SAID VACATED NORTH AND SOUTH ALLEY IN BLOCK 1 IN KOSTNER AVENUE ADDITION TO KENILWORTH HIGHLANDS. ALL IN COOK COUNTY, ILLINOIS. WHICH SURVEY IS ATTACHED AS EXHIBIT “A” TO THE DECLARATION OF CONDOMINIUM OWNERSHIP RECORDED 3/30/10 AS DOCUMENT NUMBER 1008934039: TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN COOK COUNTY, ILLINOIS.

PIN: 10-27-424-046-1001 AND 10-27-424-046-1002; 10-27-424-024-0000 (AFFECTS UNDERLYING PARCEL)

- n. Real property located at 6420 N. Longmeadow, Lincolnwood, Illinois, and legally described as:

THE SOUTHWESTERLY 80.00 FEET OF THE NORTHEASTERLY 160.0 FEET OF LOTS 3, 4 AND 5, TAKEN AS A TRACT IN LINCOLN TOWER’S EIGHT ADDITION SUBDIVISION OF THE NORTHWESTERLY HALF OF LOT 21 (EXCEPT THE NORTHWESTERLY 161.50 FEET THEREOF) IN BRONSON’S PART OF CALDWELL’S RESERVE IN TOWNSHIP 40 AND 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THEREFROM THE NORTHEAST 33 FEET AND THE SOUTHEAST 33 FEET AND THE SOUTHEAST 33 FEET THEREOF) AND (EXCEPT THEREFROM THAT PART LYING SOUTH OF A LINE 50 FEET NORTH OF THE CENTER LINE OF DEVON AVENUE) IN COOK COUNTY, ILLINOIS.

PIN:10-33-427-035-0000

- o. Real property located at 6451 N. Leroy Avenue, Lincolnwood, Illinois, and legally described as:

LOT 5 EXCEPT THE SOUTHWESTERLY 10 FEET (AS MEASURED AT RIGHT ANGLES TO THE SOUTHERLY LINE OF LOT 5) IN LINCOLNWOOD TOWERS 5<sup>TH</sup> ADDITION, BEING A SUBDIVISION OF PART OF LOT 22 IN BRONSON'S PART OF CALDWELLS RESERVE IN TOWNSHIPS 40 AND 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 10-33-427-011-0000

- 5. If any of the property described above, as a result of any act or omission of the defendants:

- i. cannot be located upon the exercise of due diligence;
- ii. has been transferred or sold to, or deposited with, a third party;
- iii. has been placed beyond the jurisdiction of the Court;
- iv. has been substantially diminished in value; or
- v. has been commingled with other property that cannot be subdivided without difficulty;

it is the intent of the United States, pursuant to Title 21, United States Code, Section 853(p), to seek to forfeit any other property of the defendants up to the value of the forfeitable property described above.

A TRUE BILL:

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FOREPERSON

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UNITED STATES ATTORNEY

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UNITED STATES DEPARTMENT OF JUSTICE  
CRIMINAL DIVISION, FRAUD SECTION  
DEPUTY CHIEF