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April 16, 2026

Via Electronic Filing

Matthew L. Homsher, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street
Harrisburg, Pennsylvania 17120

**Re: Application to Begin Service (Motor Common Carrier of Persons in
Paratransit Service);**

To Whom It May Concern:

This firm represents Carefully Caring Transport LLC in connection with its submitted application to begin service.

Please contact me this firm any questions. Thank you.

Sincerely,

Brian T. Boyle, Esq.

APPLICATION CHECKLIST

Motor Common Carrier of Persons in Paratransit Service

Use this checklist to make sure you have enclosed all required items or your application will not be processed. You cannot operate in Pennsylvania until you receive a Certificate of Public Convenience from the Commission.

- The original Application with original signatures (unless e-Filed with the Commission's online e-Filing system at www.puc.pa.gov).
- Verified Statement of Applicant.
- A certified check, money order, or check from your attorney for \$350 made payable to "Commonwealth of Pennsylvania."
- IF application is being made as an individual or sole proprietor.
- IF application is being filed by a Partnership, provide a list of the names and addresses of ALL partners.
- IF application is being filed by a Limited Partnership, provide a list of names and addresses of ALL partners, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Limited Liability Partnership, provide a list of names and addresses of ALL partners, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Limited Liability Company, provide a list of the names and addresses of ALL members and the Title of each member, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Corporation for Profit, provide a list of ALL corporate officers and titles, the name of each shareholder, distribution of shares, and your PA Corporation Bureau Entity ID Number.
- IF application is being filed by a Corporation Non-Profit, provide a list of ALL corporate officers and titles and those serving on the Board of Directors, and your PA Corporation Bureau Entity ID Number.

ALL Parties to proceedings pending before the Commission must open and use an e-filing account through the Commission's website, OR you may submit your filing by overnight delivery. If a filing contains confidential or proprietary material, the filing is required to be submitted by overnight delivery.

If not e-Filed, mail your application and attachments to: SECRETARY PA PUBLIC UTILITY COMMISSION, 400 NORTH STREET, 2ND FLOOR, HARRISBURG, PA 17120

Corporate entities (corporations, LPs, LLPs, and LLCs) and fictitious trade names must be registered with the PA Department of State. Companies incorporated in other states must register as a foreign business corporation. Individuals acting as sole proprietors and partnerships do not have to register.

If you are not registered with the PA Department of State, you can apply at its website at www.dos.state.pa.us/corps on how to do business in Pennsylvania as:

PA Corporations (Profit and Non-Profit) – apply for Articles of Incorporation

Foreign Corporations – apply for a Certificate of Authority

PA Limited Partnerships (LPs), Limited Liability Partnerships (LLPs), and Limited Liability Companies (LLCs) – apply for an Application of Registration

Fictitious Name Registration – File ONLY IF Trade Name will be different than the business name you register with the PA Department of State.

General Information for Preparing and Filing the Application for Motor Common Carrier of Persons in Paratransit Service.

1. This application is required to request a Certificate of Public Convenience to operate as a commercial carrier of people, when providing transportation on a nonexclusive, advance reservation basis. Service includes, but not restricted to:
 - Transportation of people whose personal convictions prevent them from owning or operating motor vehicles.
 - Transportation of people to correctional facilities for visitation.
 - Transportation of people in wheelchair and stretcher vans.

****Important Note: Paratransit carriers may not render service to or from airports.***

2. Upon approval of the application, you will be notified that prior to providing service in Pennsylvania you must submit evidence of insurance to the Public Utility Commission. **Your permanent evidence of insurance will be a Form E for bodily injury and property damage insurance.** This form is mailed to the Commission directly from the home office of your insurance carrier. The name and address on your Form E must **exactly** match the name and address you have provided on your application. Your insurance company must subscribe to the NIC Insurance Filing website at www.nicinsurancefilings.com . You will request the insurance company (not the agent) to file the required insurance forms electronically through NIC. Mailed insurance forms are no longer acceptable. The minimum limits of insurance are as follows:

Minimum limit dependent upon manufactured rated seating capacity of the vehicle. Carriers operating any vehicle of

- | | | |
|------------------------|-----|--|
| 15 passengers or less: | (a) | \$35,000 to cover liability for bodily injury, death or property damage incurred in an accident (BIPD). |
| | (b) | \$25,000 first party medical benefits, \$10,000 first party wage loss benefits, and conforming to 75 PA C.S. §§1701 - 1798 (relating to Motor Vehicle Financial Responsibility Law). |
| | (c) | First party coverage of the driver of certificated vehicles shall meet the requirements of 75 PA C.S. §1711 (relating to required benefits). |

Application for Motor Common Carrier of Persons in Paratransit Service

THIS APPLICATION IS TO BE USED FOR COMMON CARRIER PASSENGER SERVICE WHEN PROVIDING TRANSPORTATION ON A NONEXCLUSIVE, ADVANCE RESERVATION BASIS.

1. **Legal Name of Applicant** (Individual, Partnership or Corporation)

Carefully Caring Transport LLC

- If you are an individual who has not formed any type of corporate entity, you should enter your name **as it will appear on your insurance documents**.
- If you are filing for a partnership, but **not a limited liability partnership**, the names of all partners must be entered on this line. Those names should be entered **as they will appear on your insurance documents**. This includes husbands and wives filing jointly.
- If you are filing for a corporate entity (corporation, limited liability company, or limited liability partnership), **even if you are the sole shareholder member**, you must enter the name **exactly as it appears on the registration papers from the Corporation Bureau of the Pennsylvania Department of State**.

2. **Trade Name** (Attach a copy of fictitious name registration if applicable)

N/A

This is any name which you will be operating under which differs from the **LEGAL NAME OF APPLICANT**. A **TRADE NAME** is considered a **FICTITIOUS NAME** if the identity of the applicant cannot be readily determined. *EXAMPLE: John Doe is the applicant and wants to use the name "Johnboy Vans" as his trade name. People cannot readily determine that John Doe is the actual operator; therefore, the name is fictitious and must be registered as such. Trade names such as "John Doe Vans" or "J. Doe Vans" are not considered fictitious and would not have to be registered.*

3. **Do you currently hold PUC Authority?** **NO** **Previous Authority?** **NO**

If YES, at PUC No. A- _____

4. **Are you a business entity registered with the PA Dept. of State?** **NO**

If NO, you must register (see checklist on how to register)

If YES, provide your PA Corporation Bureau Entity ID Number 15173435

(See checklist and indicate type of business entity registered)

10. Describe the service area proposed by this application.
(Use the space below or attach additional sheet if space provided is not sufficient).

Company plans to offer transportation services to disabled and elderly residents between doctors, homes, and other locations necessary for care and treatment for non-emergency medical transportation (NEMT) between points in Pennsylvania originating from the following counties:

- Philadelphia County
 - Montgomery County
 - Bucks County
 - Berks County
 - Delaware County
-

Examples:

- *To transport people whose personal convictions prevent them from owning or operating motor vehicles from points in Lancaster County to points in PA, and return.*
- *To transport people from the city and county of Philadelphia to correctional facilities in PA, and return.*
- *To transport people in wheelchair and stretcher vans from points in the city of Pittsburgh to points in Allegheny County, and return.*
- *To transport people between points in Northumberland County.*

11. Certification:

Applicant certifies that it is not now engaged in unauthorized intrastate transportation for compensation between points in Pennsylvania and will not engage in said transportation unless and until authorization is received from the Pennsylvania Public Utility Commission.

Applicant further certifies that it understands the requirements of the Pennsylvania Public Utility Commission, especially as they relate to safety and insurance and that it may be subject to civil penalties, suspension or cancellation of the Certificate for failure to comply with Commission requirements.

Applicant further certifies that it understands that it is subject to an annual assessment based upon its reported gross Pennsylvania intrastate revenues; said assessment to help defray expenses incurred in regulating Motor Common Carriers of Persons in Paratransit Service; and acknowledges that failure to report revenue and pay its annual assessment may result in civil penalties, suspension or cancellation of the certificate.

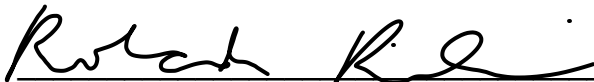
Verification of Application

I/We hereby state that the statement(s) made in this application is/are true and correct to the best of my/our knowledge and belief.

The undersigned understands that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Rolanda Robinson, Member

(Print Name)



(Signature)

4/16/2026

(Date)

The verification of the application must be completed by the applicant appearing on Line 1 of the application by the named individual, all partners if a partnership, a member (if a limited liability company), or by the President or Secretary (if a corporation).

VERIFIED STATEMENT OF APPLICANT

THE FOLLOWING INFORMATION IS REQUIRED BY THE COMMISSION TO DETERMINE THE APPLICANT'S FITNESS TO OPERATE. STATEMENTS SHOULD BE TYPED OR PRINTED. ILLEGIBLE STATEMENTS WILL DELAY YOUR APPLICATION.

Carefully Caring Transport LLC _____
Legal Name of Applicant

N/A _____
Trade Name, if any

7275 Cornelius St, Philadelphia PA 19138
Street Address (principal place of business) City or Municipality State Zip Code

The Verified Statement of the Applicant factual details about your proposed transportation service. Your Verified Statement must answer all of the items listed below and on the following pages. Provide as much information as possible to prevent delay in processing your application. If you need more space to provide your answer, please attach additional pages identifying the appropriate item number.

1. Identify the person making the Verified Statement on behalf of the applicant. If an employee/officer of applicant is making the statement, give name, title, business address and telephone number.

Rolanda Robinson: Member,
7275 Cornelius St
Philadelphia, PA 19138

2. List the applicant's affiliation (owner, manager, controls) with any other carrier, with the description of affiliation.

N/A

3. Describe the applicant's business experience, particularly any experience relating to the operation of a transportation service. If practical experience is lacking, please provide an explanation and description of any education or training that you believe may be relevant.

Applicant has over 18 years of experience in healthcare and home care management. As the Member of Carefully Caring Transport LLC, Applicant oversees daily operations, staff supervision, and ensures compliance with all state regulations. Through participation in the Goldman Sachs 10,000 Small Businesses Program, Applicant strengthened skills in business management, leadership, and strategic growth all of which continue to guide how to operate and expand the company. This includes extensive research on PA transportation laws and regulations.

4. Describe your facilities, record maintenance plan and your communication network. Please include a description of your physical location, to including office machines that will be utilized, and the facility to house vehicles. As a carrier of household goods in use, applicant should include a description of storage facilities, if applicable. Please include an explanation of your plan to maintain records required by the PUC, as well as normal business records. In regard to your communication network, please explain how you will receive customer requests for transportation, how you will dispatch the vehicles to fulfill the request, and how you will maintain continuous communication with your drivers.

The 3500 Scotts Lane facility serves as the administrative and operational headquarters. Has offices for management and administrative staff, space for meetings and training, and secure file storage. Is equipped with desktop computers, laptops, printers, scanners, and high-speed internet for efficient communication and documentation processes. Vehicles are housed and maintained on the same property, with parking and easy access for routine inspections, cleaning, and daily dispatching. All records will be maintained in accordance with PUC requirements and state record retention standards. All records are securely stored in password-protected systems with regular data backups, physical files are kept in locked cabinets within the administrative office. Trip logs, vehicle maintenance reports, driver credentials, incident reports, and client service documentation are organized and retained for the required timeframes. Customer transportation requests are received through phone, email, and an online scheduling system. The administrative office will log each request, verify service details, and assign trips through a digital dispatch platform. Third party Dispatchers will coordinate routes and schedules daily, maintaining real-time communication with drivers via cell phones, two-way radios, and GPS tracking systems. This network allows for immediate updates, route adjustments, and emergency support as needed, ensuring safe, reliable, and timely service for all clients. Additional information in supplemental document.

5. Please state the number of drivers you intend to use or hire in your business and explain why that number of drivers is appropriate for the size of the territory you will be serving. In addition, please explain:
 - a. Your hiring standards for drivers;
 - b. Your system for conducting criminal background checks;
 - c. Your driver training program;
 - d. Your system for conducting driver license checks;
 - e. Your policies regarding alcohol and drug use by your drivers.

Current plans are to hire 4 drivers. This is because the planned services are for transport assistance for medical appointments and community activities. Multiple drivers will help transport multiple patients to differing locations at the same time. All drivers will be subject to the Patch background check system. Drivers will be trained though a third party via dispatch company Driver license checks shall be through PennDOT Driver's License Information System (DLIS) / MVR. Alcohol and Drug use policies and additional informations are attached in separate documents.

6. Please state the number of vehicles you plan to use in your business and why that number is appropriate to provide reasonable and efficient service to the territory you will be serving. If you have already obtained vehicles for your business, please list them in the chart below.

<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>SEATING CAPACITY*</u>	<u>VEHICLE ID #</u>	<u>MILEAGE</u>
2022	Ford	Transit Connect XL	5	NM0GE20M1521538	51666

*Vehicles with seating capacity of more than 15 passengers, including driver, can't be used in paratransit service.

Plan to start with three (3) Vehicles. This will be needed because the planned services are for transport assistance for medical appointments and community activities. Multiple vehicles will help transport multiple patients to differing locations at the same time.

7. Describe your vehicle safety program. Please include the following in your explanation:
 - a. Your periodic vehicle maintenance plan
 - b. Your system for ensuring your vehicles will continuously comply with applicable Pennsylvania vehicle equipment standards (67 Pa. Code, Chapter 175).

See attached documentation.

8. Please explain what steps you have taken to determine if you can obtain insurance and pay the required insurance premiums.

Insurance has been acquired. Please see attached documentation.

9. State whether the applicant has been convicted of a misdemeanor or felony. If applicant is partnership, limited liability partnership, corporation, or limited liability company this question applies to all members, officers, and/or shareholders. If "YES", explain.

_____ YES X NO

10. Financial Data. Complete the "Statement of Financial Position", which follows this page. Please feel free to also provide additional information explaining why you believe you have sufficient funds to ensure your transportation business can provide reliable service to the public in a safe manner.

Verification of Statement

The undersigned deposes and says that he/she is authorized to and does make this verification and that the facts set forth therein are true and correct to the best of his/her knowledge, information, and belief. The undersigned understands that false statements herein are made subject to penalties of 18 Pa. C. S. Section 4904 relating to unsworn falsification to authorities.


 (Signature)

4/16/2026
 (Date)

Rolanda Robinson, Member
 (Name and Title, printed or typed)

Statement of Financial Position (Balance Sheet)
As of (date) 4/16/2026
(Must be less than 6 months old)

ASSETS

Current Assets		
Cash	0 _____	
Other Current Assets (specify)	0 _____	
Total Current Assets		0 _____
Tangible Assets		
Motor Vehicle Equipment	0 _____	
Property (buildings, land, etc.)	0 _____	0 _____
Office Equipment		0 _____
TOTAL ASSETS		0 _____

LIABILITIES

Current Liabilities (Due within one year of date)		
Loans	0 _____	
Credit cards/revolving credit	0 _____	
Other Liabilities (Attach schedule)	0 _____	
Total Current Liabilities		0 _____
Long Term Liabilities (Due after one year of date)		
Mortgage	0 _____	
Long term commercial loan	0 _____	
Other Liabilities (Attach Schedule)	0 _____	
Total Long-Term Liabilities		0 _____
TOTAL LIABILITIES		0 _____

SEE: Statement of Financial Capacity and Partnership Support Attached Below

Carefully Caring Transport LLC

Drug and Alcohol Use Policy

****PUC Compliance – Pennsylvania****

Purpose

The purpose of this policy is to ensure the safety of the public, passengers, and employees by maintaining a drug- and alcohol-free workplace in accordance with the Pennsylvania Public Utility Commission (PUC) regulations and, where applicable, U.S. Department of Transportation (DOT) 49 CFR Part 40 and Part 382 standards.

Scope

This policy applies to all drivers and safety-sensitive employees operating company vehicles or performing duties regulated by the PUC. Compliance with this policy is a condition of employment.

Policy Statement

Premium Care Ems strictly prohibits the use, possession, sale, distribution, or being under the influence of alcohol or any controlled substance while:

- Operating a company vehicle;
- On duty or on company premises; or
- Within four (4) hours prior to performing safety-sensitive functions.

Drivers must remain fit for duty at all times and must comply with all applicable state and federal laws regarding substance use and impairment.

Prohibited Conduct

1. Alcohol:

- No driver shall report for duty or remain on duty while having an alcohol concentration of 0.02% or greater.
- Consumption of alcohol is prohibited within four (4) hours before operating any company or regulated vehicle.

2. Controlled Substances:

- Use or possession of any Schedule I drug (such as marijuana, even if medically prescribed), narcotic, amphetamine, or other controlled substance is prohibited.
- Drivers may not report for duty while using any substance that impairs their ability to operate a vehicle safely.

Testing Requirements

In accordance with PUC and DOT-aligned safety standards, the following testing shall occur:

- Pre-Employment Testing: All driver candidates must pass a drug screen before performing any safety-sensitive duties.
- Random Testing: Drivers are subject to unannounced random drug and alcohol testing throughout employment.

- Post-Accident Testing: Testing is required after any accident involving injury, fatality, or vehicle damage requiring towing.
- Reasonable Suspicion Testing: Conducted when a supervisor observes behavior indicating possible impairment.
- Return-to-Duty and Follow-Up Testing: Required after any violation of this policy and completion of an approved substance abuse program.

Recordkeeping

All testing records, results, and related documents will be maintained in confidential secured files for the period required by PUC and DOT regulations. Access is limited to authorized management personnel.

Consequences of Policy Violation

- Any driver who tests positive for drugs or alcohol, refuses a test, or violates this policy will be immediately removed from safety-sensitive duties.
- Violations may result in disciplinary action up to and including termination of employment and notification to the PUC as required.
- Drivers who test positive may be referred to a Substance Abuse Professional (SAP) and must successfully complete a return-to-duty process before resuming work.

Employee Education

Drivers will receive education and training regarding the effects of drugs and alcohol on performance, as well as company testing procedures. Supervisors responsible for reasonable suspicion determinations will receive specialized training as required by regulation.

Acknowledgment

All drivers must read, understand, and sign this policy as a condition of employment and continued operation under the company's PUC authority.

Employee Signature

Date

Carefully Caring Transport LLC

Vehicle Safety and Maintenance Program

PUC Compliance – Pennsylvania

Purpose

The purpose of this Vehicle Safety Program is to ensure that all company-owned and operated vehicles are maintained in safe operating condition, inspected regularly, and continuously comply with all Pennsylvania Department of Transportation (PennDOT) and Pennsylvania Public Utility Commission (PUC) equipment and safety standards.

Safety Commitment

Our company is committed to providing safe, reliable, and well-maintained vehicles for all transportation operations. Safety is a core value of our service, and no vehicle will be operated unless it is fully compliant with all applicable safety regulations and in proper working condition.

Vehicle Maintenance Plan

All vehicles will be subject to a preventive maintenance schedule designed to identify and correct mechanical issues before they lead to unsafe conditions or service interruptions.

1. Daily Pre-Trip and Post-Trip Inspections

- Each driver is required to complete a pre-trip inspection prior to starting a route, checking critical systems such as brakes, tires, steering, lights, horn, windshield wipers, mirrors, lift/ramp systems, and safety equipment.
- Drivers must also complete a post-trip inspection at the end of the day, documenting any defects, warning lights, or maintenance needs.
- Any vehicle found to be unsafe will be immediately removed from service until repairs are completed.

2. Preventive Maintenance Schedule

- Routine maintenance is performed at least every 3,000–5,000 miles or per the manufacturer's recommendations.
- Preventive maintenance includes oil and filter changes, tire rotations, brake inspections, fluid checks, and system diagnostics.
- Maintenance records will document all services performed, parts replaced, and inspections completed.

3. Periodic Safety Inspections

- All vehicles are required to pass annual Pennsylvania State Safety Inspections and emissions testing as mandated by PennDOT.
- Internal quarterly safety inspections will be conducted by a qualified mechanic to ensure ongoing compliance with Title 67, Chapter 175 (Vehicle Equipment and Inspection Regulations).

4. Corrective Maintenance

- Vehicles identified with mechanical issues are removed from service immediately.
- Repairs are completed only by certified mechanics, and all replaced parts are documented in the maintenance log.
- Vehicles are not returned to operation until cleared through a final inspection and road test.

Recordkeeping and Compliance

Maintenance records are kept for a minimum of 12 months and include the vehicle identification number (VIN), mileage, inspection reports, repairs, and parts replaced. Records are maintained both electronically and in physical files at the main office and are available for review by the PUC or PennDOT upon request. All records will be stored securely in compliance with PUC record retention requirements.

Vehicle Equipment Compliance System

To ensure continuous compliance with Pennsylvania equipment standards:

- Each vehicle will be equipped with all legally required safety devices, including seat belts, lights, fire extinguishers, reflective triangles, first aid kits, and emergency contact information.
- A Vehicle Compliance Checklist will be maintained and reviewed monthly by the Safety Officer or designee.
- Any equipment deficiencies identified during inspections will be corrected immediately and documented.
- Fleet management software or internal tracking logs will be used to monitor inspection dates, preventive maintenance intervals, and safety certification renewals.

Training and Accountability

All drivers receive training in vehicle inspection procedures, defect reporting, and safe driving practices. Supervisors and mechanics receive periodic updates on PUC and PennDOT standards to ensure awareness of current regulations. Failure to comply with inspection or reporting requirements may result in disciplinary action, up to and including suspension from driving duties.

Program Oversight

The Operations Manager or designated Safety Officer is responsible for overseeing this program, maintaining compliance documentation, and ensuring that all vehicles meet or exceed Pennsylvania safety and equipment standards at all times.

Safety Officer Signature

Date

Supplemental Information for Paratransit Service Application

Question #5. **Driver Information-** initially, the Company intends to hire 4 drivers based upon initial demand, but will hire more to support needs as they change.

- a. All drivers must be licensed to operate a vehicle in PA and pass criminal background check and license check requirements. Drivers will be at least 18 years of age (as verified prior to employment) and authorized to work in the United States. Drivers will also be required to acknowledge and agree to an Employee Handbook and sign the Company's Vehicle Safety and Maintenance Program, which will set forth additional minimum safety standards and expectations for drivers. Any Driver hired under the age of 18 shall be registered as a certified emergency medical services vehicle operator (EMSVO) with the Department of Health. The person shall carry the Department-issued registration of their EMSVO certification on board while operating a paratransit vehicle under 28 Pa. Code §1023.21(h). The company shall verify that the driver is in good standing with the Department and maintain records for 4 years to prove each driver's EMSVO certificate registration. The Company shall notify the Commission's Bureau of Technical Utility Services within 3 calendar days of the occurrence of the following events involving a paratransit driver who is under 21 years of age of any accident, driving-related violation such as a moving violation, reckless driving, or driving under the influence of alcohol or drugs.
- b. In order to be hired, drivers will initially be required to pass a criminal background, motor vehicle report check, pre-employment drug screen, and license check, which will require them to be free from major traffic violations for at least 3 years prior to employment. Pennsylvania State Police criminal background check, Child Abuse History Clearance, and FBI fingerprint-based background check when required by law or contract. The Company will not employ or contract with a driver whose criminal history includes offenses that pose a risk to vulnerable passengers, including but not limited to: crimes of violence, sexual offenses, abuse, neglect, or exploitation, drug trafficking or DUI-related felony offenses. Additionally, drivers will be required to acknowledge and agree to an Employee Handbook, which will require them to provide any updates to the company regarding any changes to criminal activity, license status, etc. Copies of the criminal history record will be kept on file by the Company for the duration of the drivers' work with the Company and made available to PUC upon request.
- c. Drivers will receive training both directly from the Company and through third party driver safety companies regarding job expectations, safety, applicable Pennsylvania driving laws, and more. Drivers will also receive training documents and an Employee Handbook, which they will be required to read and sign. This will include appearance requirements, such as being neatly attired in professional clothing, displaying professional behavior at all times, refraining from inappropriate language or conduct, assisting passengers with luggage and doors (unless declined), only engaging in authorized pickups, and emergency care for passengers. Drivers will also be trained on operating vehicles safely and in compliance with traffic laws, following

designated routes, refraining from using mobile phones or other electronic devices while driving (except hands-free), refraining from smoking, and keeping the vehicle clean, safe, and in good repair.

- d. In order to be hired, drivers will initially be required to pass a criminal background, motor vehicle report check, pre-employment drug screen, and license check, which will require them to be free from major traffic violations for at least 3 years prior to employment. Additionally, drivers will be required to acknowledge and agree to an Employee Handbook, which will require them to provide any updates to the company regarding any changes to criminal activity, license status, etc. Copies of the criminal history record will be kept on file by the Company for the duration of the drivers' work with the Company and made available to PUC upon request.
- e. The Company has a clear policy against drug and alcohol use while driving, and against operating a vehicle under the influence of drugs, alcohol, or any controlled substance. Drivers will be made aware of this policy and will be required to sign a policy stating such. Drivers must complete and pass a pre-employment drug screen as well, and consent to random drug and alcohol screening.

Question #4 - record maintenance plan and your communication network. The company has established infrastructure in staffing, scheduling, compliance, billing, and risk management that will support safe and reliable passenger transportation.

The Company proposes to:

- Transport public clients who require assistance, supervision, or specialized support due to physical, cognitive, intellectual, or behavioral needs.
- Provide non-emergency medical transportation to the public to and from medical appointments, dialysis, hospital discharges, therapy, and other medically necessary services.
- Coordinate trips in collaboration with waiver Support Coordinators, Service Coordinators, hospitals, clinics, and community agencies.

The Company leadership has over 18 years of combined experience in human services, home care, and operational management, including managing staff schedules, shift coverage, and time-sensitive services. The agency currently serves Medicaid waiver participants and has experience working with state and managed care requirements around safety, documentation, and quality assurance.

The Company's Vehicle Safety & Maintenance Plan ensures that all company-operated vehicles are safe, properly equipped, and maintained per manufacturer recommendations and PUC requirements. The Company will operate standard sedans/minivans for ambulatory passengers and wheelchair-accessible vans for passengers using mobility devices when available. Preventive maintenance includes daily pre-trip inspections by drivers—checking brakes, lights, horn, wipers, mirrors, tires, leaks, seatbelts, wheelchair lifts, and interior hazards, with completion of a Daily Vehicle Inspection Form—and routine maintenance by approved mechanics, including oil changes, filters, and fluids every 5,000 miles, brake and suspension checks every six months or

10,000 miles, and annual state safety inspections. Any defects found are documented, reported to the Transportation Supervisor, and corrected before the vehicle returns to service if safety-related. Maintenance logs, inspection records, and repair invoices will be retained for at least three years, identifying vehicle details, service type, date, odometer reading, and repair facility.

The Operating Plan of the Company includes centralized dispatch and scheduling using software or logs, with routes assigned daily based on passenger needs, geography, and appointment times, and real-time changes managed by a dispatcher. Standard operating hours are 6:00 AM to 8:00 PM, Monday through Saturday, with additional hours on an as-needed basis. The Transportation Supervisor oversees driver hiring, training, vehicle assignments, and incident reviews, while drivers adhere to CCHC policies. Passenger safety requires mandatory seatbelt use, securement of wheelchairs with approved tie-downs, and no passengers left unattended; incident reports are completed for injuries, collisions, behavioral events, and breakdowns. Each trip is documented with date, time, origin, destination, passenger ID, driver name, and mileage for billing. Billing will be made to existing accounts on file with the company in accordance with the client's current billing schedules or for new clients, billing will be set up ahead of time for each new client. The Proposed Tariff applies to paratransit and non-emergency medical transportation within specified Pennsylvania counties and includes base rates for ambulatory and wheelchair trips, additional mileage charges, wait-time fees, optional after-hours/weekend surcharges, and no-show fees.



COMMONWEALTH OF PENNSYLVANIA
 Department of State
 Bureau of Corporations and Charitable Organizations
 PO Box 8722
 Harrisburg, Pennsylvania 17105-8722
CERTIFICATE OF ORGANIZATION -
LIMITED LIABILITY COMPANY
 Fee: \$125

Pennsylvania Department of State

-FILED-

File #: 0015173435
 Date Filed: 2/2/2026

DSCB:15-8821 (rev. 2/2017)

In compliance with the requirements of [15 Pa.C.S. § 8821](#) relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

Limited Liability Company Type Filing type Domestic Limited Liability Company Limited liability company subtype Limited Liability Company	
Limited Liability Company Name Entity name Carefully Caring Transport LLC	
Effective Date The filing shall be effective when filed with the Department of State	
Registered Office The address of this limited liability company's proposed registered office in this Commonwealth is 7275 CORNELIUS ST PHILADELPHIA, PA 19138-1629 PHILADELPHIA	
Organizers	
Name of individual or organization	Address
Rolanda Robinson	7275 CORNELIUS ST PHILADELPHIA, PA 19138-1629
Additional provisions, if any Additional provisions	
<input type="checkbox"/> I qualify for a veteran/reservist-owned small business fee exemption (see help)	
Electronic Signature IN TESTIMONY WHEREOF, the organizer(s) has (have) executed this Certificate of Organization.	
<i>Rolanda Robinson</i> _____ Rolanda Robinson	02/02/2026 _____ Date

B1002-0132 02/02/2026 1:51 PM Received by Pennsylvania Department of State

Statement of Financial Capacity and Partnership Support

This Statement is provided to confirm that Carefully Caring Transport LLC possesses the necessary financial resources to ensure its transportation operations are conducted in a safe, reliable, and responsible manner for the public.

The business's sole member is also the sole member of Carefully Caring Homecare Agency LLC. The two entities will be working collaboratively in partnership, allowing Carefully Caring Transport LLC to leverage the financial stability, operational experience, and established infrastructure of Carefully Caring Homecare Agency LLC.

As a result of this relationship, Carefully Caring Transport LLC is financially supported and adequately capitalized to maintain vehicles, employ qualified personnel, comply with all applicable safety and regulatory requirements, and provide consistent and dependable transportation services to the public.

Attached hereto are the financial statements of Carefully Caring Homecare Agency LLC, which further demonstrate the financial strength and resources available to support the transportation business's ongoing operations and obligations.

Please feel free to contact should any additional information or clarification be required.

Management Report

Carefully Caring Homecare Agency LLC
For the period ended December 31, 2025



Prepared on
January 26, 2026

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Accountants Letter

To Management
Carefully Caring Home Care Services LLC
Philadelphia, Pennsylvania

We have prepared the accompanying financial statements of Carefully Caring Home Care Services LLC, which comprise the statement of financial position, statement of activities, month-wise statement of activities and statement of cash flows as of December 31st 2025, and the related notes to the financial statements for December 2025, in accordance with Generally Accepted Accounting Principles (GAAP).

Basis of Preparation

These financial statements were prepared based on the information provided by management. Our role was limited to presenting this information in financial statement format and ensuring compliance with GAAP.

No Assurance Provided

Our engagement was limited to preparation services. We have not audited, reviewed, or compiled these financial statements. Accordingly, we do not express an opinion or provide any assurance regarding the financial statements.

Management's Responsibility

Management is responsible for the accuracy and completeness of the financial information provided, as well as the maintenance of adequate accounting records and internal controls to safeguard the integrity of the financial statements.

GAMBLE & ASSOCIATES, LLC

Bala Cywynyd, PA

January 26, 2025

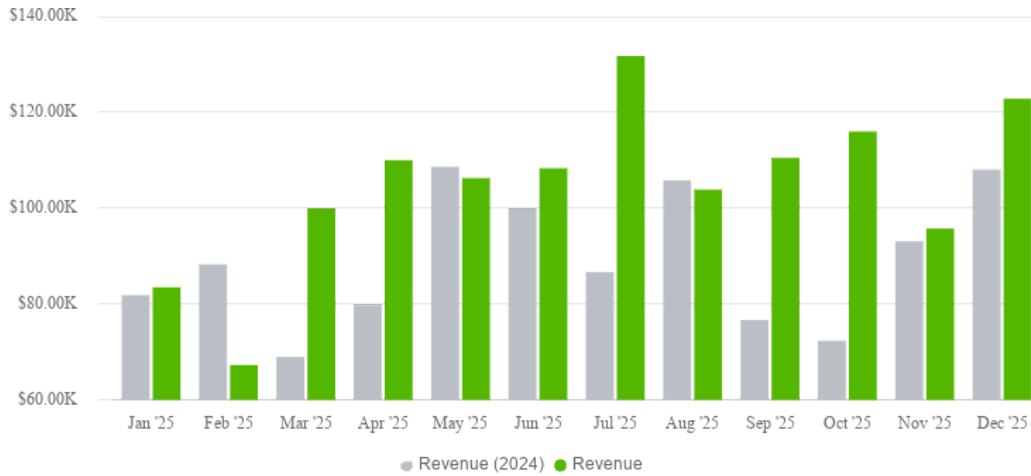
Carefully Caring Homecare Agency LLC

REVENUE BY TIME

Last fiscal year

\$1,256,068.99

Total revenue



Time period	Revenue (2024)	Revenue
Jan '25	\$81,838.20	\$83,491.40
Feb '25	\$88,245.97	\$67,290.01
Mar '25	\$68,949.27	\$99,960.36
Apr '25	\$79,830.19	\$110,014.68
May '25	\$108,630.18	\$106,282.14
Jun '25	\$99,960.28	\$108,319.35
Jul '25	\$86,648.34	\$131,761.41
Aug '25	\$105,799.69	\$103,876.76
Sep '25	\$76,662.52	\$110,483.50
Oct '25	\$72,346.53	\$115,986.98
Nov '25	\$93,093.18	\$95,763.56
Dec '25	\$108,048.80	\$122,838.84

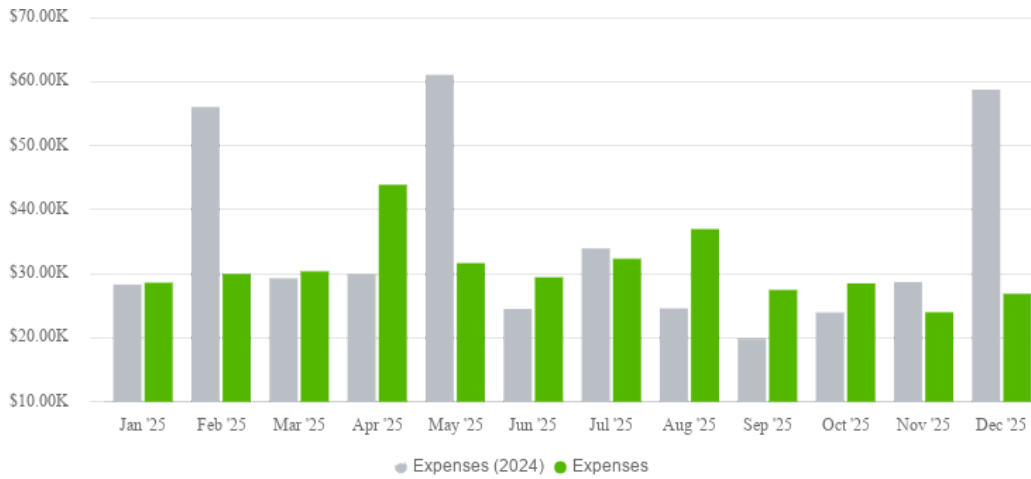
Carefully Caring Homecare Agency LLC

EXPENSES BY TIME

Last fiscal year

\$369,911.26

Total expenses



Time period	Expenses (2024)	Expenses
Jan '25	\$28,283.81	\$28,585.86
Feb '25	\$56,011.30	\$29,961.87
Mar '25	\$29,263.07	\$30,366.18
Apr '25	\$29,953.88	\$43,877.59
May '25	\$61,044.63	\$31,650.22
Jun '25	\$24,477.90	\$29,418.57
Jul '25	\$33,937.35	\$32,329.45
Aug '25	\$24,578.72	\$36,954.88
Sep '25	\$19,791.15	\$27,466.55
Oct '25	\$23,925.10	\$28,476.02
Nov '25	\$28,681.92	\$23,969.33
Dec '25	\$58,722.02	\$26,854.74

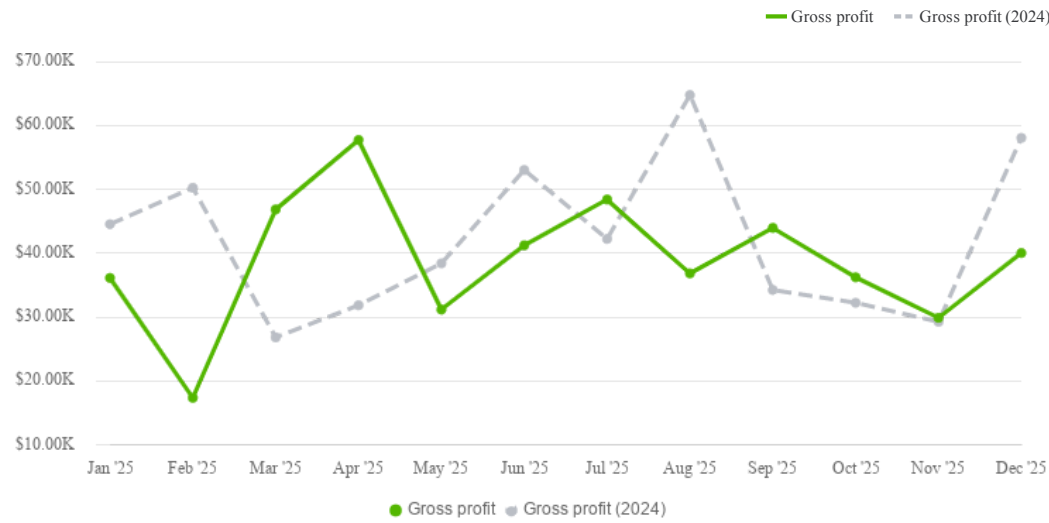
Carefully Caring Homecare Agency LLC

GROSS PROFIT BY TIME

Last fiscal year

\$465,807.88

Total gross profit



Time period	Gross profit	Gross profit (2024)
Jan '25	\$36,128.07	\$44,523.69
Feb '25	\$17,368.96	\$50,234.70
Mar '25	\$46,848.97	\$26,826.59
Apr '25	\$57,705.63	\$31,852.03
May '25	\$31,176.45	\$38,405.74
Jun '25	\$41,232.35	\$53,015.13
Jul '25	\$48,403.45	\$42,231.90
Aug '25	\$36,841.37	\$64,751.25
Sep '25	\$43,961.22	\$34,239.41
Oct '25	\$36,226.04	\$32,241.71
Nov '25	\$29,885.17	\$29,266.74
Dec '25	\$40,030.20	\$58,039.62

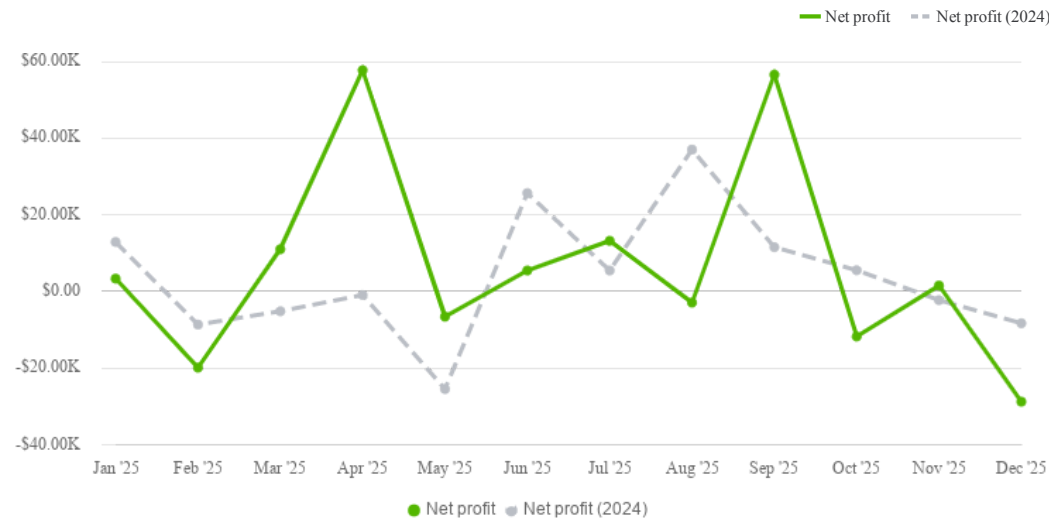
Carefully Caring Homecare Agency LLC

NET PROFIT BY TIME

Last fiscal year

\$79,192.65

Total net profit



Time period	Net profit	Net profit (2024)
Jan '25	\$3,367.29	\$12,917.85
Feb '25	-\$19,849.99	-\$8,622.18
Mar '25	\$11,033.13	-\$5,135.84
Apr '25	\$57,713.88	-\$911.92
May '25	-\$6,556.93	-\$25,436.35
Jun '25	\$5,489.62	\$25,677.52
Jul '25	\$13,226.35	\$5,489.60
Aug '25	-\$2,885.10	\$37,007.51
Sep '25	\$56,553.74	\$11,570.69
Oct '25	-\$11,720.66	\$5,548.88
Nov '25	\$1,553.18	-\$2,244.60
Dec '25	-\$28,731.86	-\$8,273.06

Carefully Caring Homecare Agency LLC

CURRENT RATIO BY TIME

This fiscal year to date

24.49

Current ratio



Time period	Current ratio	Current ratio (2025)
Jan '26	24.49	6.57

Carefully Caring Homecare Agency LLC

QUICK RATIO BY TIME

This fiscal year to date

24.49

Quick ratio



Time period	Quick ratio	Quick ratio (2025)
Jan '26	24.49	6.57

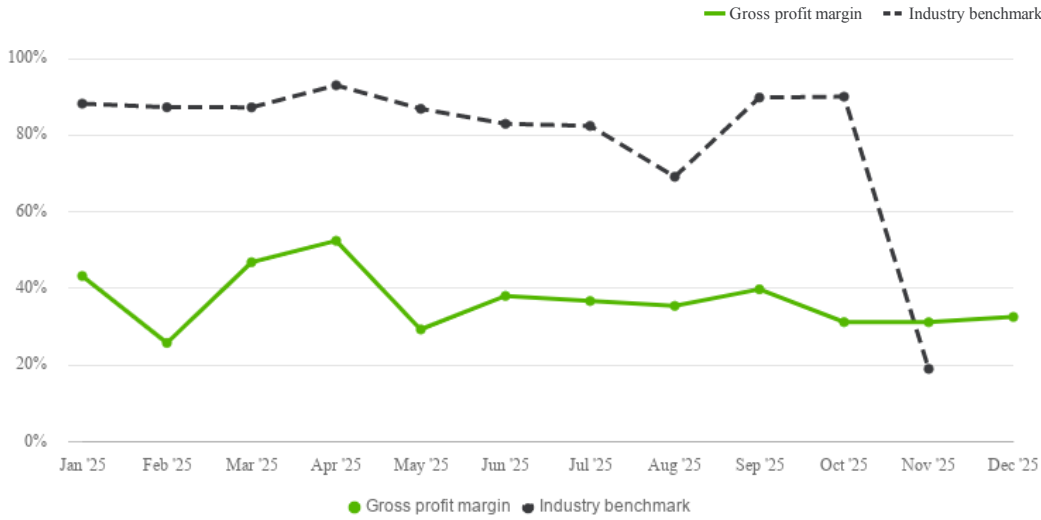
Carefully Caring Homecare Agency LLC

GPM VS INDUSTRY BENCHMARKS

Last 12 months

32.59%

Total gross profit margin



Time period	Gross profit margin	Industry benchmark
Jan '25	43%	88%
Feb '25	26%	87%
Mar '25	47%	87%
Apr '25	52%	93%
May '25	29%	87%
Jun '25	38%	83%
Jul '25	37%	82%
Aug '25	35%	69%
Sep '25	40%	90%
Oct '25	31%	90%
Nov '25	31%	19%
Dec '25	33%	

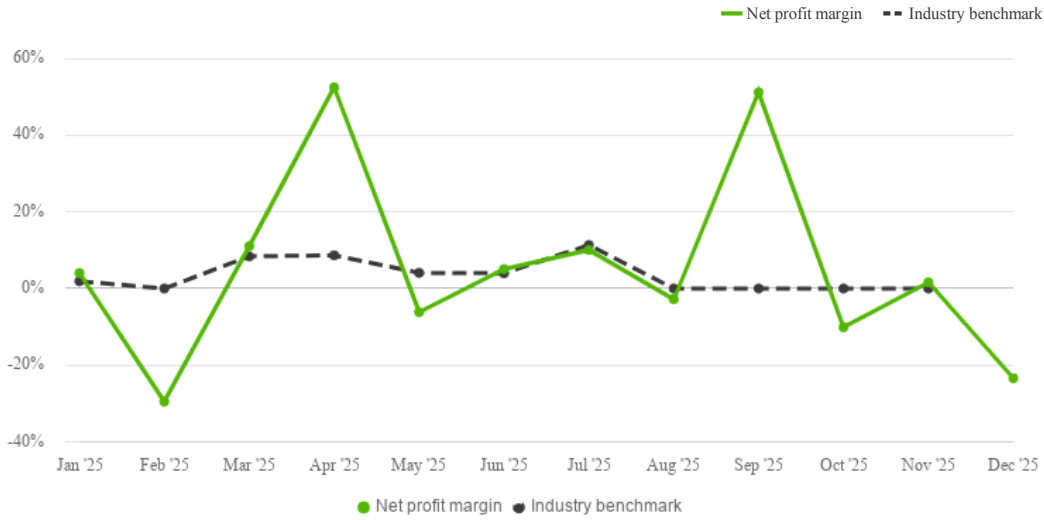
Carefully Caring Homecare Agency LLC

NPM VS INDUSTRY BENCHMARKS

Last 12 months

-23.39%

Total net profit margin



Time period	Net profit margin	Industry benchmark
Jan '25	4%	2%
Feb '25	-29%	0%
Mar '25	11%	8%
Apr '25	52%	9%
May '25	-6%	4%
Jun '25	5%	4%
Jul '25	10%	11%
Aug '25	-3%	0%
Sep '25	51%	0%
Oct '25	-10%	0%
Nov '25	2%	0%
Dec '25	-23%	0%

Balance Sheet

January-December, 2025

DISTRIBUTION ACCOUNT	TOTAL	
	AS OF DECEMBER 31, 2025	AS OF DECEMBER 31, 2024 (PY)
Assets		
Current Assets		
Bank Accounts		
Santander Bank Account #5421 (deleted)	0.00	0.00
Truist Bank Account #7550	150,270.96	
Truist Dynamic Business Checking 7073 - 1	21,576.44	121,897.44
Total for Bank Accounts	\$171,847.40	\$121,897.44
Other Current Assets		
Due to/from ATS Enterprise	145,610.14	145,610.14
Undeposited Funds	0.00	
Total for Other Current Assets	\$145,610.14	\$145,610.14
Total for Current Assets	\$317,457.54	\$267,507.58
Fixed Assets		
Computer Equipment	7,048.79	
Construction Cost	40,950.00	
Ford Transit Van	\$51,516.64	\$51,516.64
Accumulated Depreciation	(25,757.92)	(15,454.96)
Total for Ford Transit Van	\$25,758.72	\$36,061.68
Leasehold Improvements	100,720.45	
Mercedes GLE 350	\$67,771.00	\$67,771.00
Accumulated Depreciation	(33,885.00)	(20,331.00)
Total for Mercedes GLE 350	\$33,886.00	\$47,440.00
Total for Fixed Assets	\$208,363.96	\$83,501.68
Total for Assets	\$525,821.50	\$351,009.26
Liabilities and Equity		
Liabilities		
Current Liabilities		
Credit Cards		
Amex Amazon Business Prime Card (1005) - 2	0.00	0.00
Amex Blue Business Cash(TM) (1000) - 2	88.74	17.96
Amex Blue Business Plus Card	0.00	3,103.75

DISTRIBUTION ACCOUNT	TOTAL	
	AS OF DECEMBER 31, 2025	AS OF DECEMBER 31, 2024 (PY)
(1003) - 2		
Amex Blue Business Plus Card	671.62	270.00
(1005) - 2		
Amex Business Gold Card (1008) - 2	1,571.91	0.00
Amex Business Platinum Card®	936.44	10,439.60
(2001) - 2		
Amex Hilton Honors Business Card	0.00	0.00
(1002) - 2		
Chase CC R. ROBINSON (7858) - 3	60.00	412.00
Discover CC #8141	0.00	270.00
Truist Bank CC 3692	2,716.88	2,556.30
Total for Credit Cards	\$6,045.59	\$17,069.61
Other Current Liabilities		
AMEX Line of Credit	0.00	26,614.03
Garnishment Payable	0.00	0.00
Net Salary	747.66	0.00
Payroll Tax Payable	79.57	0.00
Professional Fees	0.00	20,317.67
Total for Other Current Liabilities	\$827.23	\$46,931.70
Total for Current Liabilities	\$6,872.82	\$64,001.31
Long-term Liabilities		
Business Loan	0.00	0.00
Business Loan-2	0.00	0.00
Construction Loan	197,333.12	
Mortgage Payment	0.00	0.00
Truist Loan 89001	44,659.29	56,063.24
Truist Loan 99001	35,358.48	41,843.74
Total for Long-term Liabilities	\$277,350.89	\$97,906.98
Total for Liabilities	\$284,223.71	\$161,908.29
Equity		
Member's Distribution	(15,681.79)	(1,976.32)
Opening Balance Equity	68,322.04	68,322.04
Personal Pay and Expenses	(4,647.01)	0.00
Retained Earnings	114,411.90	75,167.15
Net Income	79,192.65	47,588.10
Total for Equity	\$241,597.79	\$189,100.97
Total for Liabilities and Equity	\$525,821.50	\$351,009.26

Profit and Loss

December 2025

DISTRIBUTION ACCOUNT	TOTAL			
	DEC 1 - DEC 31 2025	JAN 1 - DEC 31 2024 (PY YTD)	JAN 1 - DEC 31 2025 (YTD)	% OF INCOME
Income				
Comm of PA	72,421.42	743,717.35	746,252.77	58.96 %
Keystone	40,064.86	191,818.52	327,023.30	32.62 %
Sales	1,680.00	49,437.96	6,216.00	1.37 %
UPMC	8,672.56	85,079.32	176,576.92	7.06 %
Total for Income	\$122,838.84	\$1,070,053.15	\$1,256,068.99	100.0 %
Cost of Goods Sold				
Salary & Wages	69,405.10	522,412.42	689,395.48	56.5 %
Subcontractors	10,170.30	33,910.46	53,670.80	8.28 %
Supplies & Materials - COGS	3,233.24	8,101.76	47,194.83	2.63 %
Total for Cost of Goods Sold	\$82,808.64	\$564,424.64	\$790,261.11	67.41 %
Gross Profit	\$40,030.20	\$505,628.51	\$465,807.88	32.59 %
Expenses				
401 (K)	147.17	736.82	1,812.17	0.12 %
Accounting fees	875.50	16,375.00	11,676.00	0.71 %
Bank Charges	40.00	1,841.38	2,013.10	0.03 %
Dues & subscriptions	534.50	684.68	6,478.76	0.44 %
Gas & Fuel	261.73	5,709.09	5,555.41	0.21 %
Internet & Telecommunication	278.53	1,423.49	1,355.88	0.23 %
IT Software	1,583.60	3,471.54	13,024.35	1.29 %
Officer's Salary	10,692.32	105,000.16	121,077.08	8.7 %
Officer's Taxes				0.0 %
FUTA	11.54	42.00	53.54	0.01 %
Medicare Taxes	155.02	1,522.52	1,479.89	0.13 %
Social Security Taxes	662.92	6,509.96	6,328.73	0.54 %
SUTA	73.49	174.67	278.92	0.06 %
Total for Officer's Taxes	\$902.97	\$8,249.15	\$8,141.08	0.74 %
Office Supplies Expense	75.12	8,824.86	9,432.11	0.06 %
Payroll Fees	679.84	5,959.99	8,507.33	0.55 %
Payroll Tax				0.0 %
ER Medicare Taxes	1,005.03	7,575.16	10,284.40	0.82 %
ER Social Security	4,297.27	32,389.70	43,973.31	3.5 %

DISTRIBUTION ACCOUNT	TOTAL			
	DEC 1 - DEC 31 2025	JAN 1 - DEC 31 2024 (PY YTD)	JAN 1 - DEC 31 2025 (YTD)	% OF INCOME
Fed Unemployment Taxes	119.94	959.71	1,301.89	0.1 %
State Unemployment Taxes	821.32	4,593.70	11,069.47	0.67 %
Total for Payroll Tax	\$6,243.56	\$45,518.27	\$66,629.07	5.08 %
Recruiting and Hiring Tools	44.00	616.00	1,191.00	0.04 %
Rent and Lease	2,218.69	21,136.53	25,628.48	1.81 %
Travel and Transportation		\$706.00	\$42.00	0.0 %
Travel Meals	632.86	6,801.94	6,185.19	0.52 %
Uber	368.40	451.12	2,585.28	0.3 %
Accommodation		4,148.46	562.96	0.0 %
Airfare		99.00	1,045.18	0.0 %
Car Rental		4,036.49	2,300.60	0.0 %
Parking and Tolls		1,474.32	756.81	0.0 %
Total for Travel and Transportation	\$1,001.26	\$17,717.33	\$13,478.02	0.82 %
Utilities	63.03		787.73	0.05 %
Worker's Compensation	1,212.92	9,374.91	12,423.59	0.99 %
Advertising & Marketing		8,168.34	3,000.00	0.0 %
Automobile Expenses		2,224.82	775.01	0.0 %
Business Gifts		4,665.18	2,100.00	0.0 %
Business License & Permits		13.00	113.00	0.0 %
Business Meetings		6,188.02		0.0 %
Charitable Contributions		450.00	333.21	0.0 %
City Taxes		4,573.00	9,497.36	0.0 %
Education and Trainings		458.93	2,081.28	0.0 %
Field Trip		343.85	896.75	0.0 %
Fines & Penalties		104.00		0.0 %
Gifts to Employees		217.08		0.0 %
Insurance		\$12,501.95	\$4,961.99	0.0 %
Auto Insurance		7,638.03	2,665.54	0.0 %
Building Insurance			2,000.00	0.0 %
Liability Insurance			7,467.75	0.0 %
Total for Insurance		\$20,139.98	\$17,095.28	0.0 %
Legal & Professional Fees		110,089.76	21,700.00	0.0 %
Medical expenses		3,835.24	227.71	0.0 %

DISTRIBUTION ACCOUNT	TOTAL			
	DEC 1 - DEC 31 2025	JAN 1 - DEC 31 2024 (PY YTD)	JAN 1 - DEC 31 2025 (YTD)	% OF INCOME
Postage and Delivery		22.49	168.68	0.0 %
Printing & Stationery		106.86		0.0 %
Repair & Maintenance		1,261.80	487.52	0.0 %
State Taxes		102.89	2,040.00	0.0 %
Travel		1,951.48	60.00	0.0 %
Uniforms		1,114.93		0.0 %
Processing Fees			124.00	0.0 %
QuickBooks Payments Fees			0.30	0.0 %
Total for Expenses	\$26,854.74	\$418,670.85	\$369,911.26	21.86 %
Net Operating Income	\$13,175.46	\$86,957.66	\$95,896.62	10.73 %
Other Income				
Interest Income	270.96		1,407.79	0.22 %
Refund and Rewards	19.20	128.21	118.60	0.02 %
Grant Income			50,000.00	0.0 %
Rewards and Refunds			52.63	0.0 %
Total for Other Income	\$290.16	\$128.21	\$51,579.02	0.24 %
Other Expenses				
Ask my Accountant	39,499.36	72.63	16,029.98	32.16 %
Depreciation	1,988.08	23,856.96	23,856.96	1.62 %
Interest Expense	710.04	15,208.18	28,218.30	0.58 %
Reimbursement		360.00	177.75	0.0 %
Total for Other Expenses	\$42,197.48	\$39,497.77	\$68,282.99	34.35 %
Net Other Income	(\$41,907.32)	(\$39,369.56)	(\$16,703.97)	-34.12 %
Net Income	(\$28,731.86)	\$47,588.10	\$79,192.65	-23.39 %

Statement of Cash Flows

January-December, 2025

FULL NAME	TOTAL
OPERATING ACTIVITIES	
Net Income	79,192.65
Adjustments to reconcile Net Income to Net Cash provided by operations:	
Accounts Receivable (A/R)	0.00
Amex Amazon Business Prime Card (1005) - 2	0.00
Amex Blue Business Cash(TM) (1000) - 2	70.78
Amex Blue Business Plus Card (1003) - 2	(3,103.75)
Amex Blue Business Plus Card (1005) - 2	401.62
Amex Business Gold Card (1008) - 2	1,571.91
Amex Business Platinum Card® (2001) - 2	(9,503.16)
Amex Hilton Honors Business Card (1002) - 2	0.00
AMEX Line of Credit	(26,614.03)
Chase CC R. ROBINSON (7858) - 3	(352.00)
Discover CC #8141	(270.00)
Ford Transit Van:Accumulated Depreciation	10,302.96
Garnishment Payable	0.00
Mercedes GLE 350:Accumulated Depreciation	13,554.00
Net Salary	747.66
Payroll Tax Payable	79.57
Professional Fees	(20,317.67)
Truist Bank CC 3692	160.58
Total for Adjustments to reconcile Net Income to Net Cash provided by operations:	(\$33,271.53)
Net cash provided by operating activities	\$45,921.12
INVESTING ACTIVITIES	
Computer Equipment	(7,048.79)
Construction Cost	(40,950.00)
Leasehold Improvements	(100,720.45)
Net cash provided by investing activities	(\$148,719.24)
FINANCING ACTIVITIES	
Construction Loan	197,333.12
Member's Distribution	(13,705.47)
Personal Pay and Expenses	(4,647.01)
Retained Earnings	(8,343.35)
Truist Loan 89001	(11,403.95)
Truist Loan 99001	(6,485.26)

FULL NAME	TOTAL
Net cash provided by financing activities	\$152,748.08
NET CASH INCREASE FOR PERIOD	\$49,949.96
Cash at beginning of period	\$121,897.44
CASH AT END OF PERIOD	\$171,847.40

Profit and Loss by Month

January 1-December 31, 2025

DISTRIBUTION ACCOUNT	JANUARY 2025	FEBRUARY 2025	MARCH 2025	APRIL 2025	MAY 2025	JUNE 2025	JULY 2025	AUGUST 2025	SEPTEMBER 2025	OCTOBER 2025	NOVEMBER 2025	DECEMBER 2025	TOTAL
Income													
Comm of PA	54,278.00	41,784.19	72,430.90	73,086.36	59,757.32	59,760.83	72,366.21	56,301.42	50,448.08	75,679.10	57,938.94	72,421.42	746,252.77
Keystone	13,433.86	15,306.10	13,245.56	26,205.98	29,810.58	29,062.76	36,524.82	29,616.90	37,181.18	29,084.28	27,486.42	40,064.86	327,023.30
Sales		10.00				1,182.24				1,258.48	2,085.28	1,680.00	6,216.00
UPMC	15,779.54	10,189.72	14,283.90	10,722.34	16,714.24	18,313.52	22,870.38	17,958.44	22,854.24	9,965.12	8,252.92	8,672.56	176,576.92
Total for Income	83,491.40	67,290.01	99,960.36	110,014.68	106,282.14	108,319.35	131,761.41	103,876.76	110,483.50	115,986.98	95,763.56	122,838.84	\$1,256,068.99
Cost of Goods Sold													
Salary & Wages	44,574.55	47,616.23	49,755.26	47,282.41	68,487.62	58,043.42	71,732.73	56,058.84	57,862.97	64,883.75	53,692.60	69,405.10	689,395.48
Subcontractors	1,422.25	1,708.28	1,559.46	2,820.55	3,895.92	3,089.38	3,884.72	3,182.70	3,134.60	8,666.24	10,136.40	10,170.30	53,670.80
Supplies & Materials - COGS	1,366.53	596.54	1,796.67	2,206.09	2,722.15	5,954.20	7,740.51	7,793.85	5,524.71	6,210.95	2,049.39	3,233.24	47,194.83
Total for Cost of Goods Sold	47,363.33	49,921.05	53,111.39	52,309.05	75,105.69	67,087.00	83,357.96	67,035.39	66,522.28	79,760.94	65,878.39	82,808.64	\$790,261.11
Gross Profit	36,128.07	17,368.96	46,848.97	57,705.63	31,176.45	41,232.35	48,403.45	36,841.37	43,961.22	36,226.04	29,885.17	40,030.20	\$465,807.88
Expenses													
401 (K)	75.00	78.85	76.92	76.92	96.16	120.83	161.82	134.38	138.40	576.54	129.18	147.17	1,812.17
Accounting fees	875.50	875.50	875.50	1,395.50	1,525.50	875.50	875.50	875.50		1,751.00	875.50	875.50	11,676.00
Advertising & Marketing		3,000.00											3,000.00
Automobile Expenses			34.78			740.23							775.01
Bank Charges	955.00	47.00	14.00	7.00	81.00	429.00	136.00	101.00	2.10	79.00	122.00	40.00	2,013.10
Business Gifts				2,100.00									2,100.00
Business License & Permits				13.00						100.00			113.00
Charitable Contributions		104.64			150.00			78.57					333.21
City Taxes				9,397.36					100.00				9,497.36
Dues & subscriptions	515.47	529.47	133.43	449.39	592.41	495.47	748.71	755.83	681.73	527.85	514.50	534.50	6,478.76
Education and Trainings	947.28		1,134.00										2,081.28
Field Trip			312.50	76.00	15.00			280.23		134.45	78.57		896.75
Gas & Fuel	617.90	498.56	676.00	58.11	1,399.60	594.45	415.22	298.11	275.72	88.68	371.33	261.73	5,555.41
Insurance	740.26	740.26	740.24	740.24	740.24					629.25	631.50		\$4,961.99
Auto Insurance			1,923.50				742.04						2,665.54
Building Insurance		1,000.00	1,000.00										2,000.00
Liability Insurance				1,248.50	634.25	1,253.50		3,702.25	629.25				7,467.75
Total for Insurance	740.26	1,740.26	3,663.74	1,988.74	1,374.49	1,253.50	742.04	3,702.25	629.25	629.25	631.50		\$17,095.28
Internet & Telecommunication						40.00	49.84	208.10	262.57	233.03	283.81	278.53	1,355.88
IT Software	1,357.54	212.62	2,533.42	223.14	888.39	876.39	1,045.23	2,216.87	249.06	1,555.56	282.53	1,583.60	13,024.35
Legal & Professional Fees	5,500.00	2,100.00		1,500.00	1,600.00	2,000.00	2,000.00	3,000.00	2,000.00	2,000.00			21,700.00
Medical expenses			38.58		189.13								227.71
Officer's Salary	7,692.32	7,692.32	7,692.32	11,692.32	11,615.40	9,692.32	13,615.40	11,692.32	10,692.32	9,615.40	8,692.32	10,692.32	121,077.08
Officer's Taxes													
FUTA	42.00											11.54	53.54
Medicare Taxes	111.53	111.52	111.52	111.52	139.40	111.52	139.40	111.52	111.52	139.40	126.02	155.02	1,479.89
Social Security Taxes	476.92	476.92	476.92	476.92	596.15	476.92	596.15	476.92	476.92	596.15	538.92	662.92	6,328.73
SUTA	158.56	46.87										73.49	278.92
Total for Officer's Taxes	789.01	635.31	588.44	588.44	735.55	588.44	735.55	588.44	588.44	735.55	664.94	902.97	\$8,141.08
Office Supplies Expense	30.23	965.69	224.20	1,478.41	90.23	1,980.43	420.02	2,386.88	471.84	133.85	1,175.21	75.12	9,432.11
Payroll Fees	915.89	403.55	590.24	626.94	848.38	613.38	669.90	868.20	644.87	929.82	716.32	679.84	8,507.33
Payroll Tax													
ER Medicare Taxes	660.07	690.42	721.52	743.64	1,022.08	870.67	1,098.16	870.90	882.54	940.82	778.55	1,005.03	10,284.40
ER Social Security	2,822.36	2,952.26	3,084.83	3,179.52	4,370.17	3,722.70	4,695.42	3,723.66	3,773.44	4,022.78	3,328.90	4,297.27	43,973.31
Fed Unemployment Taxes	273.16	273.89	146.17	80.75	104.04	74.49	92.97	49.36	23.35	22.61	41.16	119.94	1,301.89
State Unemployment Taxes	945.23	1,198.79	3,321.33	1,113.36	897.86	644.95	780.39	523.75	409.24	151.13	262.12	821.32	11,069.47
Total for Payroll Tax	4,700.82	5,115.36	7,273.85	5,117.27	6,394.15	5,312.81	6,666.94	5,167.67	5,088.57	5,137.34	4,410.73	6,243.56	\$66,629.07
Postage and Delivery		22.32			5.58	6.31			129.17	5.30			168.68
Processing Fees				124.00									124.00
QuickBooks Payments Fees											0.30		0.30
Recruiting and Hiring Tools	160.00	66.00	88.00	200.00	132.00	66.00	22.00	44.00	88.00	171.00	110.00	44.00	1,191.00
Rent and Lease	1,300.89	3,560.89	2,060.89	2,060.89	2,060.89	2,060.89	2,060.89	2,060.89	2,060.89	2,060.89	2,060.89	2,218.69	25,628.48
Repair & Maintenance	17.95	469.57											487.52
State Taxes				2,040.00									2,040.00
Travel						60.00							60.00
Travel and Transportation						42.00							\$42.00
Accommodation			269.37			10.57			283.02				562.96
Airfare		815.64	119.00	110.54			0.00						1,045.18
Car Rental				991.12					1,309.48				2,300.60
Parking and Tolls				15.14	95.08	40.00	70.00	43.00	149.37	16.22	328.00		756.81
Travel Meals	436.96	133.92	840.00	378.11	416.36	289.02	307.26	997.90	127.21	510.13	1,115.46	632.86	6,185.19
Uber	152.11	58.78	31.40	157.37	111.37	125.64	261.79	110.68	391.50	355.69	460.55	368.40	2,585.28
Total for Travel and Transportation	589.07	1,008.34	1,259.77	1,652.28	622.81	507.23	639.05	1,151.58	2,260.58	882.04	1,904.01	1,001.26	\$13,478.02
Utilities			224.86	114.37		54.61		293.00	37.86			63.03	787.73

DISTRIBUTION ACCOUNT	JANUARY 2025	FEBRUARY 2025	MARCH 2025	APRIL 2025	MAY 2025	JUNE 2025	JULY 2025	AUGUST 2025	SEPTEMBER 2025	OCTOBER 2025	NOVEMBER 2025	DECEMBER 2025	TOTAL
Worker's Compensation	805.73	835.62	870.74	897.51	1,233.55	1,050.78	1,325.34	1,051.06	1,065.18	1,129.47	945.69	1,212.92	12,423.59
Total for Expenses	28,585.86	29,961.87	30,366.18	43,877.59	31,650.22	29,418.57	32,329.45	36,954.88	27,466.55	28,476.02	23,969.33	26,854.74	\$369,911.26
Net Operating Income	7,542.21	(12,592.91)	16,482.79	13,828.04	(473.77)	11,813.78	16,074.00	(113.51)	16,494.67	7,750.02	5,915.84	13,175.46	\$95,896.62
Other Income													
Grant Income				50,000.00									50,000.00
Interest Income									296.23	470.66	369.94	270.96	1,407.79
Refund and Rewards	4.10	1.75	60.00	1.67	2.78	1.63	5.54	5.78	1.86	3.50	10.79	19.20	118.60
Rewards and Refunds	52.63												52.63
Total for Other Income	56.73	1.75	60.00	50,001.67	2.78	1.63	5.54	5.78	298.09	474.16	380.73	290.16	\$51,579.02
Other Expenses													
Ask my Accountant	500.00					225.00			(42,912.02)	16,746.88	1,970.76	39,499.36	16,029.98
Depreciation	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	1,988.08	23,856.96
Interest Expense	1,565.82	5,270.75	3,521.58	4,127.75	4,097.86	4,112.71	865.11	789.29	1,162.96	1,209.88	784.55	710.04	28,218.30
Reimbursement	177.75												177.75
Total for Other Expenses	4,231.65	7,258.83	5,509.66	6,115.83	6,085.94	6,325.79	2,853.19	2,777.37	(39,760.98)	19,944.84	4,743.39	42,197.48	\$68,282.99
Net Other Income	(4,174.92)	(7,257.08)	(5,449.66)	43,885.84	(6,083.16)	(6,324.16)	(2,847.65)	(2,771.59)	40,059.07	(19,470.68)	(4,362.66)	(41,907.32)	(\$16,703.97)
Net Income	3,367.29	(19,849.99)	11,033.13	57,713.88	(6,556.93)	5,489.62	13,226.35	(2,885.10)	56,553.74	(11,720.66)	1,553.18	(28,731.86)	\$79,192.65



717-42-01-00 10548 0 C 001 30 S 66 002
CAREFULLY CARING HOME CARE AGENCY LLC
7275 CORNELIUS ST
PHILADELPHIA PA 19138-1629

Your account statement

For 02/27/2026

Contact us



Truist.com



(844) 4TRUIST or
(844) 487-8478

■ TRUIST BUSINESS MONEY MARKET [REDACTED]

Account summary

Your previous balance as of 01/31/2026	\$140,404.87
Checks	- 0.00
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 211.49
Your new balance as of 02/27/2026	= \$140,616.36

Interest summary

Interest paid this statement period	\$211.49
2026 interest paid year-to-date	\$468.54
Interest rate	1.93%
Annual percentage yield (APY) earned	1.98%
On 02/10/2026 the interest rate changed from 2.03% to 1.93%	

Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
02/27	EFFECTIVE DATE 2-28-26 INTEREST PAYMENT	211.49
Total deposits, credits and interest		= \$211.49



Questions, comments or errors?

For general questions/comments or to report errors about your statement or account, please call us at 1-844-4TRUIST (1-844-487-8478) 24 hours a day, 7 days a week. Truist Contact Center teammates are available to assist you from 8am – 8pm EST Monday-Friday and 8am – 5pm EST on Saturday. You may also contact your local Truist branch. To locate a Truist branch in your area, please visit Truist.com.

Electronic fund transfers (For Consumer Accounts Only. Commercial Accounts refer to the Commercial Bank Services Agreement.)

Services such as Bill Payments and Zelle® are subject to the terms and conditions governing those services, which may not provide an error resolution process in all cases. Please refer to the terms and conditions for those services.

In case of errors or questions about your electronic fund transfers, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt, IMMEDIATELY call 1-844-487-8478 or write to:

Fraud Management
P.O. Box 1014
Charlotte, NC 28201

Tell us as soon as you can, if you think your statement or receipt is wrong, or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than sixty (60) days after we sent the FIRST statement on which the problem or error appeared.

- Tell us your name and deposit account number (if any)
- Describe the error or transfer you are unsure of, and explain as clearly as you can why you believe it is an error or why you need more information
- Tell us the dollar amount of the suspected error

If you tell us orally, we may require that you also send us your complaint or question in writing within ten (10) business days. We will tell you the results of our investigation within ten (10) business days after we hear from you, and we will correct any error promptly. If we need more time, however, we may take up to forty-five (45) days to investigate your complaint or questions for ATM transactions made within the United States and up to ninety (90) days for new accounts, foreign initiated transactions and point-of-sale transactions. If we decide to do this, we will re-credit your account within ten (10) business days for the amount you think is in error, minus a maximum of \$50. If we ask you to put your complaint in writing, and we do not receive it within ten (10) business days, we may not re-credit your account and you will not have use of the money during the time it takes us to complete our investigation.

Tell us AT ONCE if you believe your access device has been lost or stolen, or someone may have electronically transferred money from your account without your permission, or someone has used information from a check to conduct an unauthorized electronic fund transfer. If you tell us within two (2) business days after you learn of the loss or theft of your access device or the unauthorized transaction, you can lose no more than \$50 if someone makes electronic transfers without your permission.

If you do NOT tell us within two (2) business days after you learn of the loss or theft of your access device or the unauthorized transaction, and we can prove we could

have stopped someone from making electronic transfers without your permission if you had told us, you could lose as much as \$500. Also, if your periodic statement shows transfers you did not make, tell us at once. If you do not tell us within sixty (60) days after the statement was mailed to you, you may not get back any money you lost after sixty (60) days if we can prove we could have stopped someone from taking the money if you had told us in time.

Important information about your Truist Ready Now Credit Line Account

Once advances are made from your Truist Ready Now Credit Line Account, an INTEREST CHARGE will automatically be imposed on the account's outstanding "Average daily balance." The INTEREST CHARGE is calculated by applying the "Daily periodic rate" to the "Average daily balance" of your account (including current transactions) and multiplying this figure by the number of days in the billing cycle. To get the "Average daily balance," we take the beginning account balance each day, add any new advances or debits, and subtract any payments or credits and the last unpaid INTEREST CHARGE. This gives us the daily balance. Then we add all of the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "Average daily balance."

Billing Rights Summary

In case of errors or questions about your Truist Ready Now Credit Line statement

If you think your statement is incorrect, or if you need more information about a Truist Ready Now Credit Line transaction on your statement, please call 1-844-4TRUIST or visit your local Truist branch. To dispute a payment, please write to us on a separate sheet of paper at the following address:

Card and Direct to Consumer Lending
PO Box 200
Wilson NC 27894-0200

We must hear from you no later than sixty (60) days after we sent you the FIRST statement on which the error or problem appeared. You may telephone us, but doing so will not preserve your rights. In your letter, please provide the following information:

- Your name and account number
- Describe the error or transfer you are unsure about, and explain in detail why you believe this is an error or why you need more information
- The dollar amount of the suspected error

During our investigation process, you are not responsible for paying any amount in question; you are, however, obligated to pay the items on your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount in question.

Mail-in deposits

If you wish to mail a deposit, please send a deposit ticket and check to your local Truist branch. Visit Truist.com to locate the Truist branch closest to you. Please do not send cash.

Change of address

If you need to change your address, please visit your local Truist branch or call Truist Contact Center at 1-844-4TRUIST (1-844-487-8478).

How to Reconcile Your Account		Outstanding Checks and Other Debits (Section A)			
		Date/Check #	Amount	Date/Check #	Amount
1.	List the new balance of your account from your latest statement here:				
2.	Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:				
3.	Subtract the amount in Line 2 above from the amount in Line 1 above and enter the total here:				
4.	Record any outstanding credits in section B. Record the transaction date, credit type and the credit amount. Add up all of the credits and enter the sum here:				
		Outstanding Deposits and Other Credits (Section B)			
5.	Add the amount in Line 4 to the amount in Line 3 to find your balance. Enter the sum here. This amount should match the balance in your register.	Date/Type	Amount	Date/Type	Amount

For more information, please contact your local Truist branch, visit Truist.com or contact us at 1-844-4TRUIST (1-844-487-8478). MEMBER FDIC