## FORM 1-2: ANNUAL PROVIDER FEE

Line		TOTAL
[1]	Total Operating Expenses (including depreciation and debt service - interest only)	7,038,192.00
[a]	Depreciation	1,027,268.00
[b]	Debt Service (Interest Only)	1,134,150.00
[2]	Subtotal (add Line 1a and 1b)	2,161,418.00
[3]	Subtract Line 2 from Line 1 and enter result.	4,876,774.00
[4]	Percentage allocated to continuing care residents (Form 1-1, Line 11)	72.00
[5]	Total Operating Expense for Continuing Care Residents (multiply Line 3 by Line 4)	3,511,277.28
[6]	Total Amount Due (multiply Line 5 by .001)	3,511.28
PROV	IDER: Pacifica Devonshire LLC	
	IUNITY:	