

**Exhibit G - Attachment 2
REPORT G3: Quarterly Balance Sheet**

M H O: **Jefferson Behavioral Health (JBH)**

Report Period: 1st Quarter (Jan-Mar) 2nd Quarter (Apr-Jun)
 3rd Quarter (Jul-Sep) 4th Quarter (Oct-Dec)

Report Due within 60 days after the end of each calendar quarter.

Category	MHO Activities Under this Agreement
CURRENT ASSETS	
1. Cash and Cash Equivalents	
2. Short-Term Investments	
3. Investment Income Receivables	
4. Health Care Receivables	
5. Prepaid Expenses	
6. Other Current Assets	
7. Total Current Assets	
OTHER ASSETS	
8. Restricted Cash and Restricted Securities	
9. Other Long-Term Investments	
10. Other Assets (Please specify)	
(a)	
(b)	
(c)	
11. Total Other Assets	
PROPERTY AND EQUIPMENT	
12. Land, Buildings, and Improvements	
13. Furniture and Equipment	
14. Leasehold and Improvements	
15. Other Property and Equipment	
16. Total Property and Equipment	
17. TOTAL ASSETS	

Category	MHO Activities Under this Agreement
CURRENT LIABILITIES	
18. Accounts Payable	
19. Claims Payable	
20. Incurred but Not Reported	
21. Accrued Medical Incentive Pool	
22. Loans and Notes Payable	
23. Other Current Liabilities	
24. Stop Loss Coverage	
25. Total Current Liabilities	
OTHER LIABILITIES	
26. Loans and Notes Payable	
27. Other Liabilities	
28. Total Other Liabilities	
29. TOTAL LIABILITIES	
NET WORTH	
30. Contributed Capital	
31. Contingency Reserves	
32. Retained Earnings/Fund Balance	
33. Other Net Worth	
34. Total Net Worth	
35. TOTAL LIABILITY AND NET WORTH	

Notes: _____

Revised, January 1, 2009

 Preparer's Signature and Phone number