

Fill in this information to identify the case:

Debtor 1	Curae Health Inc.
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court	MIDDLE DISTRICT OF TENNESSEE
Case number:	18-05665

FILED
 U.S. Bankruptcy Court
 MIDDLE DISTRICT OF TENNESSEE
 10/1/2018
 MATTHEW T. LOUGHNEY, Clerk

**Official Form 410
 Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	AIRGAS USA LLC	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
	AIRGAS USA LLC	
	Name	Name
	110 West 7th Street Suite 1400 Tulsa, OK 74119	
	Contact phone 918-551-4742	Contact phone
	Contact email Carrie.Dodson@Airgas.com	Contact email
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) Filed on MM/DD/YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 7010

7. How much is the claim? \$ 18912.32 Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as healthcare information.
GOODS SOLD/AIRGAS CYLINDER RENT

9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
 Fixed
 Variable

10. Is this claim based on a lease? No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No	
	<input type="checkbox"/> Yes. Check all that apply:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____
* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.		

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157 and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 10/1/2018
MM / DD / YYYY

/s/ Carrie Ann Dodson

Signature

Print the name of the person who is completing and signing this claim:

Name Carrie Ann Dodson

First name Middle name Last name

Title AR Specialist

Company Airgas USA, LLC

Identify the corporate servicer as the company if the authorized agent is a servicer

Address 110 West 7th St. Suite 1400

Number Street

Tulsa, OK 74119

City State ZIP Code

Contact phone 918-551-4742 Email Carrie.Dodson@Airgas.com

Clarksdale Regional Medical Center, Inc. Case #18-05678

Airgas USA, LLC - Account Number ***7010

Invoice	Reference	Amount Due	Tax, Surcharge, Misc	Billing Date	Due Date	NOTES
9074568638	1067854356	\$ 500.59	\$ 38.17	4/4/2018	5/4/2018	
9075590898	1068471747	\$ 791.06	\$ 39.17	5/3/2018	6/2/2018	
9076141362	1069222410	\$ 116.29	\$ 39.67	5/17/2018	6/16/2018	
9076548817	1069507993	\$ 181.03	\$ 39.67	5/29/2018	6/28/2018	
9077312540	1070182971	\$ 624.29	\$ 39.67	6/20/2018	7/20/2018	
9078208613	1070710517	\$ 1,523.39	\$ 39.67	7/17/2018	8/16/2018	
9078305393	1070973303	\$ 663.01	\$ 39.67	7/18/2018	8/17/2018	
9078504400	1071155990	\$ 659.04	\$ 39.67	7/25/2018	8/24/2018	
9078696850	4000288152	\$ 1,350.00	\$ -	7/31/2018	8/30/2018	
9079665914	1071974564	\$ 4,279.93	\$ 50.00	8/21/2018	9/20/2018	
9079665915	1071975104	\$ 1,730.75	\$ 50.00	8/21/2018	9/20/2018	
9952565382	RENT	\$ 1,075.71	\$ 40.00	3/31/2018	4/30/2018	
9953258204	RENT	\$ 1,029.37	\$ 40.00	4/30/2018	5/30/2018	
9953963448	RENT	\$ 1,130.96	\$ 40.00	5/31/2018	6/30/2018	
9954637468	RENT	\$ 1,087.60	\$ 40.00	6/30/2018	7/30/2018	
9955346351	RENT	\$ 1,167.70	\$ 40.00	7/31/2018	8/30/2018	
9079831509	4000281445	\$ 1,001.60	\$ -	8/31/2018	9/30/2018	PRE-PET BALANCE ONLY
TOTAL		18,912.32	615.36			



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

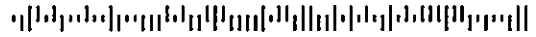
STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
04/04/2018	[REDACTED] 10	9074568638	05/04/2018	\$ 500.59

SOLD BY AIRGAS USA, LLC (C094)
1350 DESOTO AVE
CLARKSDALE MS 38614-6939
662-627-3438

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Airgas USA, LLC
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DALLAS TX 75267-6015

15370101907456863800000500595

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1067854356	9074568638	04/04/2018	[REDACTED] 10	NORTH MS REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY		SHIP VIA		PAYMENT TERMS		ORDER DATE	
749-6718945				ARGTRK		NET 30		04/04/2018	
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHPD	RETD			
8074268779 NITROGEN MEDICAL NF 300 CGA 580	NI NF300	6	CL	6	6		8.81	CL	52.86 N (H)
8074268779 NITROUS OXIDE USP SIZE 56LBS	NS USP56	4	CL	4	4		77.28	CL	309.12 N (H)
8074268779 OXYGEN USP MEDICAL PURE EA CGA VIPR	OX USPEAWBDS	27	CL	27	31		3.72	CL	100.44 N (H)
	CY-CD USP50	0				2			0.00
	CY-CD USPE	0				3			0.00
Sale subtotal:									462.42
								Delivery Flat Fee	21.22
								Fuel Surcharge Flat	1.95
								Airgas Hazmat Charge	15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	500.59
--------	--------



SHIP TO: [REDACTED] 0
NORTH MS REGIONAL MEDICAL CENTER
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

FOR WIRE TRANSFER PAYMENTS
Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053

Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
05/03/2018	[REDACTED] 010	9075590898	06/02/2018	\$ 791.06

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15370101907559089800000791061

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1068471747	9075590898	05/03/2018	[REDACTED] 010	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS	ORDER DATE			
749-6735-626				ARGTRK	NET 30	04/24/2018			
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHPD	RETD			
8074979075 CD USP50 CARBON DIOXIDE USP 50 POUND CGA 320		4	CL	4	1		23.26	CL	93.04 N (H)
8074979075 CD USPE CARBON DIOXIDE USP E CGA 940		1	CL	1			7.76	CL	7.76 N (H)
8074979075 NI NF300 NITROGEN MEDICAL NF 300 CGA 580		6	CL	6	6		8.81	CL	52.86 N (H)
8074979075 NS USP56 NITROUS OXIDE USP SIZE 56LBS		4	CL	4	4		77.28	CL	309.12 N (H)
8074979075 OX USPEAWBDS OXYGEN USP MEDICAL PURE EA CGA VIPR		45	CL	45	26		3.72	CL	167.40 N (H)
8074979075 HE 200 HELIUM INDUSTRIAL 200 CGA 580 Product Surcharge		1	CL	1	1		104.64	CL	104.64 N (H) 2.19
8074979075 OX USPEAWBDSMRI OXYGEN USP MEDICAL PURE EA CGA VIPR		4	CL	4	4		3.72	CL	14.88 N (H)
Sale subtotal:									751.89
Delivery Flat Fee									21.22
Fuel Surcharge Flat									2.95
Airgas Hazmat Charge									15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	791.06
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Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

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DBA NORTHWEST MS MEDICAL CENTER
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

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Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
05/17/2018	[REDACTED] 10	9076141362	06/16/2018	\$ 116.29

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DALLAS TX 75267-6015

15370101907614136200000116299

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1069222410	9076141362	05/17/2018	[REDACTED] 10	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY		SHIP VIA		PAYMENT TERMS		ORDER DATE	
749-6779248				ARGTRK		NET 30		05/17/2018	
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHP'D	RET'D			
8075775771 NITROGEN INDUSTRIAL 40 CGA 580	NI 40	1	CL	1	1		31.60	CL	31.60 N (H)
8075775771 ACETYLENE IND XC CGA 200	AC MC	2	CL	2	2		22.51	CL	45.02 N (H)
								Sale subtotal:	76.62
Delivery Flat Fee									21.22
Fuel Surcharge Flat									3.45
Airgas Hazmat Charge									15.00
Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale									

AMOUNT	116.29
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DBA NORTHWEST MS MEDICAL CENTER
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

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Acct No 8606074174
PNC Bank, ABA No 031000053

Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101



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PO Box 1152
Tulsa, OK 74101

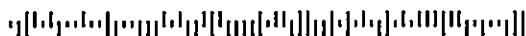
STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
05/29/2018	[REDACTED]	9076548817	06/28/2018	\$ 181.03

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15370101907654881700000181030

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1069507993	9076548817	05/29/2018	[REDACTED]	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS	ORDER DATE			
749-6682274				ARGTRK	NET 30	05/29/2018			
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHPD	RETD			
8076C91671 OX USPEAWBDS		38	CL		38	40	3.72	CL	141.36 N
OXYGEN USP MEDICAL PURE EA CGA VIPR (Vol: 912 FT3)									
	CY-CD USPE	0				4			0.00
	CY-Z04NI7852003060	0				1			0.00
	CY-CD USP50	0				2			0.00
	CY-Z02HE701EAC509	0				2			0.00
Sale subtotal:									141.36
Delivery Flat Fee									21.22
Fuel Surcharge Flat									3.45
Airgas Hazmat Charge									15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	181.03
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Airgas USA, LLC
PO Box 1152
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Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
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STANDARD INVOICE

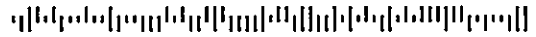
INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
06/20/2018	[REDACTED] 0	9077312540	07/20/2018	\$ 624.29

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15370101907731254000000624295

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME						
1070182971	9077312540	06/20/2018	[REDACTED] 10	CLARKSDALE REGIONAL MEDICAL CENTER						
PO / RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS	ORDER DATE				
749-6792468				ARGTRK	NET 30	06/20/2018				
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT	
					SHPD	RETD				
8076754097 NS USP56 NITROUS OXIDE USP SIZE 56LBS (Vol: 224 LBS)		4	CL	4	4		77.28	CL	309.12 N (H)	
8076754097 NI NF300 NITROGEN MEDICAL NF 300 CGA 580 (Vol: 1824 FT3)		6	CL	6	6		8.81	CL	52.86 N (H)	
8076754097 CD USP50 CARBON DIOXIDE USP 50 POUND CGA 320 (Vol: 100 LBS)		2	CL	2	2		23.26	CL	46.52 N (H)	
8076754097 OX USPEAWBDS OXYGEN USP MEDICAL PURE EA CGA VIPR (Vol: 936 FT3)		39	CL	39	28		3.72	CL	145.08 N (H)	
8076754097 CD USPE CARBON DIOXIDE USP E CGA 940 (Vol: 24 LBS)		4	CL	4			7.76	CL	31.04 N (H)	
Sale subtotal:									584.62	
									Delivery Flat Fee	21.22
									Fuel Surcharge Flat	3.45
									Airgas Hazmat Charge	15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	624.29
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CLARKSDALE REGIONAL MEDICAL CENTER
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1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053

Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

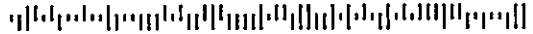
STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
07/17/2018	[REDACTED] 0	9078208613	08/16/2018	\$ 1,523.39

SOLD BY AIRGAS USA, LLC (C094)
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DALLAS TX 75267-6015

15370101907820861300001523397

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1070710517	9078208613	07/17/2018	[REDACTED] 010	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY	SHIP VIA	PAYMENT TERMS	ORDER DATE				
749-6779828			ARGTRK	NET 30	07/16/2018				
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHPD	RETD			
8077632548 OX USP180LT230 OXYGEN USP LIQ 180LT 230PSI (Vol: 20096 FT3)		4	CL	4			212.71	CL	850.84 N (H)
8077632548 OX USP180LT350 OXYGEN USP LIQ 180LT 350PSI (Vol: 4650 FT3)		1	CL	1			238.69	CL	238.69 N (H)
8077632548 OX USP200 OXYGEN USP MEDICAL PURE 200 CGA 540 (Vol: 1506 FT3)		6	CL	6			64.23	CL	385.38 N (H)
8077632548 NI NF300 NITROGEN MEDICAL NF 300 CGA 580 (Vol: 304 FT3)		1	CL	1			8.81	CL	8.81 N (H)
Sale subtotal:									1,483.72
								Delivery Flat Fee	21.22
								Fuel Surcharge Flat	3.45
								Airgas Hazmat Charge	15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	1,523.39
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Airgas USA, LLC
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FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

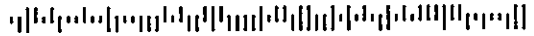
STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
07/18/2018	[REDACTED] 10	9078305393	08/17/2018	\$ 663.01

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15370101907830539300000663011

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1070973303	9078305393	07/18/2018	[REDACTED]	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY	SHIP VIA	PAYMENT TERMS	ORDER DATE				
749-6779828			ARGTRK	NET 30	07/18/2018				
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/D	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHPD	RETD			
8077720637 OX USP180LT230		2	CL		2	1	212.71	CL	425.42 N
OXYGEN USP LIQ 180LT 230PSI	(Vol: 10048 FT3)								(H)
8077720637 NS USPE		2	CL		2		98.96	CL	197.92 N
NITROUS OXIDE USP E CGA 910	(Vol: 14 LBS)								(H)
	CY-OX USP180LT350	0				1			0.00
Sale subtotal:									623.34
Delivery Flat Fee									21.22
Fuel Surcharge Flat									3.45
Airgas Hazmat Charge									15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	663.01
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Acct No 8806074174
PNC Bank, ABA No 031000053



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Tulsa, OK 74101

STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
07/25/2018	[REDACTED]	9078504400	08/24/2018	\$ 659.04

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15370101907850440000000659046

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1071155990	9078504400	07/25/2018	[REDACTED]	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS	ORDER DATE			
749-6781214				ARGTRK	NET 30	07/24/2018			
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHIP'D	RET'D			
8077945352 NITROGEN MEDICAL NF 300 CGA 580 (Vol: 1520 FT3)	NI NF300	5	CL	5	7		8.81	CL	44.05 N (H)
8077945352 NITROUS OXIDE USP SIZE 56LBS (Vol: 224 LBS)	NS USP56	4	CL	4	4		77.28	CL	309.12 N (H)
8077945352 OXYGEN USP MEDICAL PURE EA CGA VIPR (Vol: 936 FT3)	OX USPEAWBDS	39	CL	39	41		3.72	CL	145.08 N (H)
8077945352 CARBON DIOXIDE USP 50 POUND CGA 320 (Vol: 100 LBS)	CD USP50	2	CL	2	2		23.26	CL	46.52 N (H)
8077945352 CARBON DIOXIDE USP E CGA 940 (Vol: 12 LBS)	CD USPE	2	CL	2	2		7.76	CL	15.52 N (H)
8077945352 OXYGEN USP MEDICAL PURE EA CGA 870 (Vol: 48 FT3)	OX USPEA	2	CL	2			29.54	CL	59.08 N (H)
	CY-OX USP180IT230	0			5				0.00
	CY-OX USP200	0			6				0.00
Sale subtotal:									619.37
									21.22
									3.45
									15.00

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

AMOUNT	659.04
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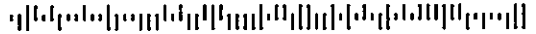
STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
07/31/2018	[REDACTED]	9078696850	08/30/2018	\$ 1,350.00

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
4000288152	9078696850	07/31/2018	[REDACTED]	CLARKSDALE REGIONAL MEDICAL CENTER					
PO / RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS	ORDER DATE			
FACILITY FEE					NET 30	07/31/2018			
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER		UNIT PRICE	UOM	AMOUNT
					SHPD	RETD			
4000288152 RNTTANKMED RENTAL MEDICAL BULK TANK Serial: E-209967 Monthly fee for 6000 Gallon USP Oxygen bulk tank - Serial #E-209967 07/01/2018 - 07/31/2018 RYAN-250-6075-V-GA		1	EA				1,350.00	EA	1,350.00 N
4000288152 RNTTANKMED RENTAL MEDICAL BULK TANK Monthly fee for 500 Gallon USP Oxygen back up bulk tank - Serial #50676 07/01/2018 - 07/31/2018		1	EA						0.00 N
Sale subtotal:									1,350.00

AMOUNT	1,350.00
--------	----------



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Tulsa, OK 74101

STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
08/21/2018	[REDACTED]	9079665914	09/20/2018	\$ 4,279.93

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15370101907966591400004279936

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME				
1071974564	9079665914	08/21/2018	[REDACTED]	CLARKSDALE REGIONAL MEDICAL*DNU*				
PO / RELEASE		ORDERED BY	SHIP VIA	PAYMENT TERMS	ORDER DATE			
749-6798429			ARGTRK	NET 30	08/21/2018			
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER SHIP'D RET'D	UNIT PRICE	UOM	AMOUNT
8078819417 OX USPBLK OXYGEN USP BULK (Vol: 563990 FT3) ALTO Qty 563990 SCF ALTO Delivery DZ1288217 07/19/2018 1537010_621388 Loc: M415_R001		563,990	SCF			0.75	CCF	4,229.93 N
Delivery Flat Fee BK							Sale subtotal:	4,229.93 50.00



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

SHIP TO [REDACTED]
CLARKSDALE REGIONAL MEDICAL*DNU*
SEE 3801655
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

AMOUNT	4,279.93
--------	----------

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STANDARD INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
08/21/2018	[REDACTED] 0	9079665915	09/20/2018	\$ 1,730.75

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15370101907966591500001730757

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME					
1071975104	9079665915	08/21/2018	[REDACTED] 0	CLARKSDALE REGIONAL MEDICAL*DNU*					
PO / RELEASE		ORDERED BY	SHIP VIA	PAYMENT TERMS	ORDER DATE				
749-6798429			ARGTRK	NET 30	08/21/2018				
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER	UNIT PRICE	UOM	AMOUNT	
					SHPD	RETD			
8078830047	OX USPBLK	224,100	SCF				0.75	CCF	1,680.75 N
OXYGEN USP BULK (Vol: 224100 FT3)									
ALTO Qty 224100 SCF									
ALTO Delivery DZ1323787 08/07/2018									
1537010_621388 Loc: M415_R001									
Delivery Flat Fee BK							Sale subtotal:		1,680.75
									50.00



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Tulsa, OK 74101

SHIP TO: [REDACTED]
CLARKSDALE REGIONAL MEDICAL*DNU*
SEE 3801655
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

AMOUNT	1,730.75
--------	----------

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CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
03/31/2018	[REDACTED] 0	9952565382	04/30/2018	\$ 1,075.71

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15370101995256538200001075715

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS					
9952565382	[REDACTED] 0	[REDACTED] 0	03/31/2018	RENT	NET 30					
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLILG-HE - Rent Cyl Ind Large Helium 3	0	0	0	0	3	0	3	93	\$0.14/DAY	\$13.02 N
RRCYMLG-AI - Rent Cyl Med Large Air 2	0	0	0	0	2	0	2	62	\$0.14/DAY	\$8.68 N
RRCYMLG-CD - Rent Cyl Med Large Carbon Dioxide 5	0	2	0	0	3	0	3	107	\$0.14/DAY	\$14.98 N
RRCYMLG-NI - Rent Cyl Med Large Nitrogen 17	0	0	0	0	17	0	17	527	\$0.14/DAY	\$73.78 N
RRCYMLG-NS - Rent Cyl Med Large Nitrous Oxide 18	0	0	0	0	18	0	18	558	\$0.14/DAY	\$78.12 N
RRCYMLG-OX - Rent Cyl Med Large Oxygen 3	0	0	0	0	3	0	3	93	\$0.14/DAY	\$13.02 N
RRCYMLGOTH - Rent Cyl Med Large Other 1	0	0	0	0	1	0	1	31	\$0.14/DAY	\$4.34 N
RRCYLMWBDSS - Rent Cyl Med W-O2-B Diss Valve 80	39	40	0	0	79	0	79	2456	\$0.14/DAY	\$343.84 N
RRCYLMXS-AI - Rent Cyl Med Xs Air 2	0	0	0	0	2	0	2	62	\$0.11/DAY	\$6.82 N
RRCYLMXS-CD - Rent Cyl Med Xs Carbon Dioxide 44	0	1	0	0	43	0	43	1340	\$0.11/DAY	\$147.40 N
RRCYLMXS-NS - Rent Cyl Med Xs Nitrous Oxide 2	0	0	0	0	2	0	2	62	\$0.11/DAY	\$6.82 N
RRCYLMXS-OX - Rent Cyl Med Xs Oxygen 62	0	0	0	0	62	0	62	1922	\$0.11/DAY	\$211.42 N

CONTINUED

Important: See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT

FOR WIRE TRANSFER PAYMENTS

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CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
03/31/2018	[REDACTED] 0	9952565382	04/30/2018	SEE PAGE 1

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS					
9952565382	[REDACTED]	[REDACTED]	03/31/2018	RENT	NET 30					
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLMXSOTH - Rent Cyl Med Xs Other	5	0	0	0	5	0	5	155	\$0.11/DAY	\$17.05 N
RRCYLVHP06K - Rent Cyl Very High Pressure 6K	6	0	0	0	6	0	6		\$16.07/ZM	\$96.42 N
=====										
250 39 43 0 246										\$1,035.71
=====										
Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale										
										Hazmat: 40.00

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT	\$ 1,075.71
--------	-------------

FOR WIRE TRANSFER PAYMENTS

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PNC Bank, ABA No 031000053



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CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
04/30/2018	[REDACTED] 10	9953258204	05/30/2018	\$ 1,029.37

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS					
9953258204	[REDACTED] 0	[REDACTED] 0	04/30/2018		NET 30					
RENT										
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLILG-HE - Rent Cyl Ind Large Helium 3	1	1	0	3	0	3	90	\$0.14/DAY	\$12.60 N	
RRCYMLG-AI - Rent Cyl Med Large Air 2	0	0	0	2	0	2	60	\$0.14/DAY	\$8.40 N	
RRCYMLG-CD - Rent Cyl Med Large Carbon Dioxide 3	4	3	0	4	0	4	54	\$0.14/DAY	\$7.56 N	
RRCYMLG-NI - Rent Cyl Med Large Nitrogen 17	12	12	0	17	0	17	510	\$0.14/DAY	\$71.40 N	
RRCYMLG-NS - Rent Cyl Med Large Nitrous Oxide 18	8	8	0	18	0	18	540	\$0.14/DAY	\$75.60 N	
RRCYMLG-OX - Rent Cyl Med Large Oxygen 3	0	0	0	3	0	3	90	\$0.14/DAY	\$12.60 N	
RRCYMLGOTH - Rent Cyl Med Large Other 1	0	0	0	1	0	1	30	\$0.14/DAY	\$4.20 N	
RRCYLMWBDSS - Rent Cyl Med W-O2-B Diss Valve 79	76	61	0	94	0	94	2376	\$0.14/DAY	\$332.64 N	
RRCYLMXS-AI - Rent Cyl Med Xs Air 2	0	0	0	2	0	2	60	\$0.11/DAY	\$6.60 N	
RRCYLMXS-CD - Rent Cyl Med Xs Carbon Dioxide 43	1	3	0	41	0	41	1215	\$0.11/DAY	\$133.65 N	
RRCYLMXS-NS - Rent Cyl Med Xs Nitrous Oxide 2	0	0	0	2	0	2	60	\$0.11/DAY	\$6.60 N	
RRCYLMXS-OX - Rent Cyl Med Xs Oxygen 62	0	0	0	62	0	62	1860	\$0.11/DAY	\$204.60 N	

CONTINUED

Important: See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT

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Acct No 8606074174
PNC Bank, ABA No 031000053



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Tulsa, OK 74101

CYLINDER RENTAL INVOICE

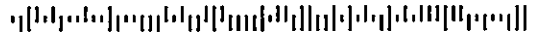
INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
04/30/2018	[REDACTED]	9953258204	05/30/2018	SEE PAGE 1

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15370101995325820400001029370

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS						
9953258204	[REDACTED]	[REDACTED]	04/30/2018	RENT	NET 30						
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE	
RRCYLMXSOTH - Rent Cyl Med Xs Other	5	0	0	0	5	0	5	150	\$0.11/DAY	\$16.50 N	
RRCYLVHP06K - Rent Cyl Very High Pressure 6K	6	0	0	0	6	0	6		\$16.07/ZM	\$96.42 N	
=====											
	246	102	88	0	260					\$989.37	
=====											
Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale											
										Hazmat :	40.00

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT	\$ 1,029.37
--------	-------------

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

SHIP TO [REDACTED]
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or call 855-470-2666



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
05/31/2018	[REDACTED]	9953963448	06/30/2018	\$ 1,130.96

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1.5370101995396344800001130961

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.						TERMS
9953963448	[REDACTED]	[REDACTED]	05/31/2018	RENT						NET 30
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLILG-HE - Rent Cyl Ind Large Helium 3 0 0 0 3 0 3 93 \$0.14/DAY										\$13.02 N
RRCYLISM-AC - Rent Cyl Ind Small Acetylene 0 2 2 0 0 0 0 \$314.68/ZF										
RRCYLISM-NI - Rent Cyl Ind Small Nitrogen 0 1 1 0 0 0 0 \$314.68/ZF										
RRCYMLG-AI - Rent Cyl Med Large Air 2 0 0 0 2 0 2 62 \$0.14/DAY										\$8.68 N
RRCYMLG-CD - Rent Cyl Med Large Carbon Dioxide 4 0 2 0 2 0 2 118 \$0.14/DAY										\$16.52 N
RRCYMLG-NI - Rent Cyl Med Large Nitrogen 17 0 0 0 17 0 17 527 \$0.14/DAY										\$73.78 N
RRCYMLG-NS - Rent Cyl Med Large Nitrous Oxide 18 0 0 0 18 0 18 558 \$0.14/DAY										\$78.12 N
RRCYMLG-OX - Rent Cyl Med Large Oxygen 3 0 0 0 3 0 3 93 \$0.14/DAY										\$13.02 N
RRCYMLGOTH - Rent Cyl Med Large Other 1 0 1 1 1 0 1 31 \$0.14/DAY										\$4.34 N
RRCYLMWBDSS - Rent Cyl Med W-O2-B Diss Valve 94 38 40 0 92 0 92 2908 \$0.14/DAY										\$407.12 N
RRCYLMXS-AI - Rent Cyl Med Xs Air 2 0 0 0 2 0 2 62 \$0.11/DAY										\$6.82 N
RRCYLMXS-CD - Rent Cyl Med Xs Carbon Dioxide 41 0 4 0 37 0 37 1259 \$0.11/DAY										\$138.49 N

CONTINUED

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

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or call 855-470-2666



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
05/31/2018	[REDACTED] 0	9953963448	06/30/2018	SEE PAGE 1

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15370101995396344800001130961

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.							TERMS
9953963448	[REDACTED]	[REDACTED]	05/31/2018	RENT							NET 30
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE	
RRCYLMXS-NS - Rent Cyl Med Xs Nitrous Oxide	2	0	0	0	2	0	2	62	\$0.11/DAY	\$6.82 N	
RRCYLMXS-OX - Rent Cyl Med Xs Oxygen	62	0	0	0	62	0	62	1922	\$0.11/DAY	\$211.42 N	
RRCYLMXSOTH - Rent Cyl Med Xs Other	5	0	2	0	3	0	3	149	\$0.11/DAY	\$16.39 N	
RRCYLVHP06K - Rent Cyl Very High Pressure 6K	6	0	0	0	6	0	6		\$16.07/ZM	\$96.42 N	
=====											
	260	41	52	1	250					\$1,405.64	
=====											

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

Hazmat: 40.00

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT	\$ 1,130.96
--------	-------------

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

SHIP TO [REDACTED]
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or call 855-470-2666



Airgas USA, LLC
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Tulsa, OK 74101

CYLINDER RENTAL INVOICE

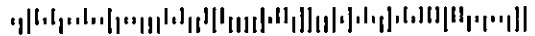
INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
06/30/2018	[REDACTED]	9954637468	07/30/2018	\$ 1,087.60

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DALLAS TX 75267-6015

15370101995463746800001087600

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS					
9954637468	[REDACTED]	[REDACTED]	06/30/2018		NET 30					
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLILG-HE - Rent Cyl Ind Large Helium 3 0 0 0 3 0 3 90 \$0.14/DAY										\$12.60 N
RRCYMLG-AI - Rent Cyl Med Large Air 2 0 0 0 2 0 2 60 \$0.14/DAY										\$8.40 N
RRCYMLG-CD - Rent Cyl Med Large Carbon Dioxide 2 2 2 0 2 0 2 60 \$0.14/DAY										\$8.40 N
RRCYMLG-NI - Rent Cyl Med Large Nitrogen 17 6 6 0 17 0 17 510 \$0.14/DAY										\$71.40 N
RRCYMLG-NS - Rent Cyl Med Large Nitrous Oxide 18 4 4 0 18 0 18 540 \$0.14/DAY										\$75.60 N
RRCYMLG-OX - Rent Cyl Med Large Oxygen 3 0 0 0 3 0 3 90 \$0.14/DAY										\$12.60 N
RRCYMLGOTH - Rent Cyl Med Large Other 1 0 0 0 1 0 1 30 \$0.14/DAY										\$4.20 N
RRCYLMWBDSS - Rent Cyl Med W-O2-B Diss Valve 92 39 28 0 103 0 103 2881 \$0.14/DAY										\$403.34 N
RRCYLMXS-AI - Rent Cyl Med Xs Air 2 0 0 0 2 0 2 60 \$0.11/DAY										\$6.60 N
RRCYLMXS-CD - Rent Cyl Med Xs Carbon Dioxide 37 4 0 0 41 0 41 1154 \$0.11/DAY										\$126.94 N
RRCYLMXS-NS - Rent Cyl Med Xs Nitrous Oxide 2 0 0 0 2 0 2 60 \$0.11/DAY										\$6.60 N
RRCYLMXS-OX - Rent Cyl Med Xs Oxygen 62 0 0 0 62 0 62 1860 \$0.11/DAY										\$204.60 N

CONTINUED

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

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DBA NORTHWEST MS MEDICAL CENTER
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

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or call 855-470-2666



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
06/30/2018	[REDACTED]	9954637468	07/30/2018	SEE PAGE 1

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15370101995463746800001087600

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS					
9954637468	[REDACTED]	[REDACTED]	06/30/2018	RENT	NET 30					
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLMXSOTH - Rent Cyl Med Xs Other	3	0	0	0	3	0	3	90	\$0.11/DAY	\$9.90 N
RRCYLVHP06K - Rent Cyl Very High Pressure 6K	6	0	0	0	6	0	6		\$16.07/ZM	\$96.42 N
=====										
	250	55	40	0	265					\$1,047.60
=====										
Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale										
Hazmat: 40.00										

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT	\$ 1,087.60
--------	-------------

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

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DBA NORTHWEST MS MEDICAL CENTER
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

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or call 855-470-2666



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
07/31/2018	[REDACTED] 0	9955346351	08/30/2018	\$ 1,167.70

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15370101995534635100001167706

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.				TERMS		
9955346351	[REDACTED]	[REDACTED]	07/31/2018	749-6798429				NET 30		
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLILG-HE - Rent Cyl Ind Large Helium 3 0 0 0 3 0 3 93 \$0.14/DAY										\$13.02 N
RRCYMLG-AI - Rent Cyl Med Large Air 2 0 0 0 2 0 2 62 \$0.14/DAY										\$8.68 N
RRCYMLG-CD - Rent Cyl Med Large Carbon Dioxide 2 2 2 0 2 0 2 62 \$0.14/DAY										\$8.68 N
RRCYMLG-NI - Rent Cyl Med Large Nitrogen 17 6 7 0 16 0 16 528 \$0.14/DAY										\$73.92 N
RRCYMLG-NS - Rent Cyl Med Large Nitrous Oxide 18 4 4 0 18 0 18 558 \$0.14/DAY										\$78.12 N
RRCYMLG-OX - Rent Cyl Med Large Oxygen 3 6 6 0 3 0 3 141 \$0.14/DAY										\$19.74 N
RRCYMLGOTH - Rent Cyl Med Large Other 1 0 0 0 1 0 1 31 \$0.14/DAY										\$4.34 N
RRCYLMWBDSS - Rent Cyl Med W-O2-B Diss Valve 103 39 41 0 101 0 101 3179 \$0.14/DAY										\$445.06 N
RRCYLMXS-AI - Rent Cyl Med Xs Air 2 0 0 0 2 0 2 62 \$0.11/DAY										\$6.82 N
RRCYLMXS-CD - Rent Cyl Med Xs Carbon Dioxide 41 2 2 0 41 0 41 1271 \$0.11/DAY										\$139.81 N
RRCYLMXS-NS - Rent Cyl Med Xs Nitrous Oxide 2 2 0 0 4 0 4 90 \$0.11/DAY										\$9.90 N
RRCYLMXS-OX - Rent Cyl Med Xs Oxygen 62 2 0 0 64 0 64 1936 \$0.11/DAY										\$212.96 N

CONTINUED

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT

FOR WIRE TRANSFER PAYMENTS

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PNC Bank, ABA No 031000053



Airgas USA, LLC
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Tulsa, OK 74101

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Tulsa, OK 74101

CYLINDER RENTAL INVOICE

INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
07/31/2018	[REDACTED]	9955346351	08/30/2018	SEE PAGE 1

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15370101995534635100001167706

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INVOICE NO.	SOLD TO NUMBER	SHIP TO	INVOICE DATE	RENTAL PURCHASE ORDER NO.	TERMS					
9955346351	[REDACTED]	[REDACTED]	07/31/2018	749-6798429	NET 30					
MATERIAL / DESCRIPTION DOCUMENT / DATE	BEG BAL	SHIP	RETURN	ADJ	END BAL	LEASES	SUBJECT TO RENT	NET DAYS	RATE	PRICE
RRCYLMXSOTH - Rent Cyl Med Xs Other	3	0	0	0	3	0	3	93	\$0.11/DAY	\$10.23 N
RRCYLVHP06K - Rent Cyl Very High Pressure 6K	6	0	0	0	6	0	6		\$16.07/ZM	\$96.42 N
RRLIQMD-OX - Rent Liquid Medical 160-180 Lt Oxyg	0	7	7	0	0	0	0		\$314.68/ZF	
=====										
265 70 69 0 266										\$1,442.38
=====										

Airgas Hazmat Charge (H) - see Itemized Charges on reverse or visit www.Airgas.com/terms-of-sale

Hazmat: 40.00

Important. See the Notice Regarding Cylinder Rentals/Leases and Responsibility on the Reverse side of this form. You will be deemed to have accepted the provisions in the said Notice as part of the contractual arrangements between you and us, unless you reject such provisions by written advice to us within (15) days after the date of this document.

AMOUNT	\$ 1,167.70
--------	-------------

FOR WIRE TRANSFER PAYMENTS

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Acct No 8606074174
PNC Bank, ABA No 031000053



Airgas USA, LLC
PO Box 1152
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DBA NORTHWEST MS MEDICAL CENTER
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or call 855-470-2666



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

STANDARD INVOICE

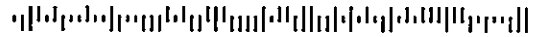
INVOICE DATE	PAYER	INVOICE NO.	DUE DATE	PAY THIS AMOUNT
08/31/2018	[REDACTED] 55	9079831509	09/30/2018	\$ 1,350.00

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38016551907983150900001350007

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ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME				
4000281445	9079831509	08/31/2018	[REDACTED]	CLARKSDALE REGIONAL MEDICAL*DIP*				
PO / RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS	ORDER DATE		
FACILITY FEE					NET 30	08/31/2018		
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER SHPD RETD	UNIT PRICE	UOM	AMOUNT
4000281445 RENTAL MEDICAL BULK TANK Serial: E-209967 Monthly fee for 6000 Gallon USP Oxygen bulk tank - Serial #E-209967 08/01/2018 - 08/31/2018 RYAN-250-6075-V-GA	RNTTANKMED	1	EA			1,350.00	EA	1,350.00 N
4000281445 RENTAL MEDICAL BULK TANK Monthly fee for 500 Gallon USP Oxygen back up bulk tank - Serial #50676 08/01/2018 - 08/31/2018	RNTTANKMED	1	EA					0.00 N
Sale subtotal:							1,350.00	

DEBTOR STATED THEY WOULD ONLY PAY \$348.40 OF THIS INVOICE, AND THAT THE BALANCE IS PRE-PETITION AND SHOULD BE INCLUDED IN THE AIRGAS PROOF OF CLAIM TO THE COURT.



Airgas USA, LLC
PO Box 1152
Tulsa, OK 74101

SHIP TO: [REDACTED]
CLARKSDALE REGIONAL MEDICAL*DIP*
DBA NORTHWEST MS MEDICAL CENTER
1970 HOSPITAL DR
CLARKSDALE MS 38614-7202

AMOUNT 1,350.00

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 8606074174
PNC Bank, ABA No 031000053

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email to: cdv_return_mail@airgas.com
or call 1-855-470-2666

MIDDLE DISTRICT OF TENNESSEE

Claims Register

[3:18-bk-05665 Curae Health Inc.](#)

Judge: Charles M Walker	Chapter: 11
Office: Nashville	Last Date to file claims:
Trustee:	Last Date to file (Govt):
<i>Creditor:</i> (6753527)	Claim No: 61
AIRGAS USA LLC	<i>Original Filed</i>
110 West 7th Street	<i>Date:</i> 10/01/2018
Suite 1400	<i>Original Entered</i>
Tulsa, OK 74119	<i>Date:</i> 10/01/2018
	<i>Status:</i>
	<i>Filed by:</i> CR
	<i>Entered by:</i> admin
	<i>Modified:</i>

Amount claimed: \$18912.32

History:

[Details](#) [61-1](#) 10/01/2018 Claim #61 filed by AIRGAS USA LLC, Amount claimed: \$18912.32 (admin)

Description:

Remarks: (61-1) Account Number (last 4 digits):7010

Claims Register Summary

Case Name: Curae Health Inc.
Case Number: 3:18-bk-05665
Chapter: 11
Date Filed: 08/24/2018
Total Number Of Claims: 1

Total Amount Claimed*	\$18912.32
Total Amount Allowed*	

*Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured		
Priority		
Administrative		