Fill in this i	nformation to identify the case:
Debtor 1	CURAE HEALTH, INC AMORY REGIONAL MEDICAL G
Debtor 2 (Spouse, if filing	AMORY REGIONAL PHYSICIANS LLC
United States	Bankruptcy Court for the: Middle District of Tennessee
Case number	18-05665 18-05675 18-05680

FILED

OCT 192018

U.S. BANKRUPTCY COURT MIDDLE DISTRICT OF TN

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.

	art 1: Identify the CI	aim	-		r		i
1.	Who is the current creditor?	MONROE COUNT Name of the current credit			aim)	unwerten vuwer.	
		Other names the creditor u	used with the debto	or			
2.	Has this claim been acquired from someone else?	V No Ves. From whom?					
3.	Where should notices and payments to the creditor be sent?	Where should notices MONROE COUN				ments to the creditor	
1	Federal Rule of	Name	IT TAX COL	LECTOR	Name		ZIP Code
	Bankruptcy Procedure (FRBP) 2002(g)	PO BOX 684					
	(1101)2002(3)	Number Street			Number Street		
		ABERDEEN	MS	39730			
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 662-36	9-6484		Contact phone		
		Contact email sclark@		com	Contact email		
		Uniform claim identifier fo	r electronic payme	nts in chapter 13 (if you u	use one):		
4.	Does this claim amend one already filed?	M NO	5			5 - 1.04 - 5450.7 5	
	one alleady filed !	Yes. Claim number	er on court claim	is registry (if known) _		Filed on MM / D	D / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No □ Yes. Who made t	he earlier filing?				стан <u>на с</u> ибул типот н

	u have any number se to identify the r?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
How n	nuch is the claim?	\$168,520.66 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).
What i claim?	is the basis of the ?	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 health care information. PERSONAL PROPERTY TAXES
Is all c secure	pr part of the claim ed?	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: \$
0. Is this lease	s claim based on a ?	 ✓ No ❑ Yes. Amount necessary to cure any default as of the date of the petition. \$
	s claim subject to a of setoff?	V No

12. Is all or part of the claim	No No	i - marcine demotorie - antenio
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	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).	\$
	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).	\$
	Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$168,520.66
	Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$
	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 aft	er 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	10/09/2018		
	MMN DD / YYYY		
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Va	14.11	()	
AUF	$(\mathbf{L}), (\mathbf{L})$		
- Wy	· XNOV	10 may	
Signatule			

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

Name	PAT BIRKHOLZ			
4674-634	First name	Middle name		Last name
Title	TAX COLLECTOR			
Company	MONROE COUNT	Y TAX COLLECTOR		
	Identify the corporate service	cer as the company in the auto		
Address	PO BOX 684	cer as the company in the autor		
Address		cer as the company in the autor		
Address	PO BOX 684	cer as the company in the autor	MS	39730
Address	PO BOX 684 Number Street	cer as the company in the auto		

PPMCOL1)rawer Jser ID Mail Flag Posting	COLLECTOR 7 SMC N 10 8 2018	COLLECT Taxes Interest Postage	PERSONAL PROPERTY Total Due 3949.18		PPWCOL11/M6 Balance Due 3949.18 276.45
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Paid By 1	MAC X-RAY/LA	B #6454-781		Check <f6> Credit<f7> Change Due Total Paid</f7></f6>	4225.63-
)p Name	w Rect 3-Chan RAY/LAB #6454		emove 9-View Prior Year PPIN Year 2017 4645 2017		nt Due En 4225.63
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YOU CANNOT COLLECT LESS THAN IS DUE

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YOU CANNOT COLLECT LESS THAN IS DUE

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0131991,ASSET,Z013-COMPUTESS 014203,ASSET,REVIDENCE LUM ALINESCON PUM 0135214,ASSET,AEXCL008-0119089 DRABGER SEVO AUTOEXCL VAPORIZ2007 0135221,ASSET,AEXCL008-0119089 DRABGER SEVO AUTOEXCL VAPORIZ2007 0135220,ASSET,AEXCL008-0119089 DRABGER SEVO AUTOEXCL VAPORIZ2007 0135280,ASSET,2014-FF 0135804,ASSET,2014-FF 0135804,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,2014-FF 013808,ASSET,1105 EARL FRYE BLVD)MDLARIS URO II/LITHOTRIP 013808,ASSET,1105 EARL FRYE BLVD)MDLARIS URO II/LITHOTRIP 013808,ASSET,1105 EARL FRYE BLVD)MDLARIS URO II/LITHOTRIP 1 EA A Leased:SIEMENS FINANCIAL SERVICES INC 1 EA A Leased:SIEMENS FINANCIAL SERVICES INC 1 EA A Leased:SIEMENS FINANCIAL SERVICES INC 1 187395 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 725AR 72	0131988,ASSET,2006-COMPUTERS 2006 1 EA A 1251749 11 20 0131988,ASSET,2007-COMPUTERS 2007 1 EA A 665905 10 20 0131989,ASSET,2007-COMPUTERS 2007 1 EA A 665905 10 20	1.228 307429 1.179 157020 202703	
0135281,ASSET,ARX21028-4119089 DRAEGER SEVO AUTOEXCEL VAPORIZZOO 0135283,ASSET,BEZNON VET-1 0135283,ASSET,BURNN VET-1 0135884,ASSET,2014-F/F 0135884,ASSET,2014-F/F 0135884,ASSET,2014-F/F 0135884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2014-F/F 013884,ASSET,2017 013885,ASSET,2017 013884,ASSET,2017 5805672 7257 7257 7257 7257 7257 7257 7257	0131991,ASSET,ZULA-COMPUTERS 0134300,ASSET,TELEMED CART14-042819-M38 0135214,ASSET,ABBT PLUM A+INFUSION PUM 2014 15 EA A 2014 15 EA A		4573 4608 3900
0135482,ASSET,2014-FVP17-1 0135984,ASSET,2014-MEDICAL EQ 0135984,ASSET,2014-COMPUTERS 0135986,ASSET,2014-COMPUTERS 0135986,ASSET,2014-COMPUTERS 0138084,ASSET,2014-COMPUTERS 0138084,ASSET,11105 EARL FRYE BLVD)1 ADVLA CENTAURA CP & 1 S2013 1 EA A Leased:SIEMENS FINANCIAL SERVICES INC 1 EA A LEASED INCENTIONENT INCENTIONE	0135283,ASSET,ARZJ0295-4119089 DRAEGER SEVO AUTOEXCEL VAPORIZ2005 1 EA A 0135282,ASSET,ARZJ0295-4119089 DRAEGER SEVO AUTOEXCEL VAPORIZ005 1 EA A	CARE CORPORATION CARE CORPORATION	3900 3900 2829
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DEAL MERTY HEALTH GILMOR REMORAL. 4145, 14400 NETCALF, OUELAND PARK, KS 6223- DUSINES FINICE DUSINES

RendRev: 4/ 1/2017 5/25/2016 MH S/25/2016 MH C RW - VALUE C LEASED .005 424680 1 .012 649474 1 22235 COMPANY LLC 4839 COMPANY LLC

YEAR FURNITURE Appraised Values 5805672 YEAR 1 2017 5805672 YEAR 2 2017 5805672 YEAR 3 YEAR 4 YEAR 6 YEAR 6 YEAR 7 YEAR 8 YEAR 9	LOCATION: 1105 EARL FRYE BOULEVARD; AMORT BUILDING AREA: 000000 11010100 OLD/NEW BUSINESS: 00/00/0000 110101000 110101000 1101010000 1101010000 1101010000 11010100000 11010100000 11010100000 110101000000	10 LTH GILMORE
RE MACHINERY LEASED INVENTORIES !!!!!!!!!!!!	TAX DISTRICT: 2220 BUSINESS OPEN/CLOSE PURCH. # /S FOOT C2011 W/S FOOT C2011 1:T, MAZU12015 0 G3 DCG612016 2016 2016 2016 2016 2016 2016 201	#1454, 14400 METCALF, OVERLAN
BANKS MONEY/DEBT MISC. TOTAL 6993067 6993067	FICIAL: MRS UPTON PICIAL: MRS UPTON AppR Color A A Total G DEP - I A A Leased:DIVERSIFIED A A Leased:DIVERSIFIED A A Leased:DIVERSIFIED A A Leased:THE COCA-COI A A Leased:THE COCA-COI A A 184943 1 92 A A 708570 1 87 COLORADO	R S O N A L P R O P E R T Y CARD: 5 OF 5 D PARK, KS 66223- BUSINESS PHONE: MAP/PARCEL NUMBER: 2958

MIDDLE DISTRICT OF TENNESSEE Claims Register

3:18-bk-05665 Curae Health Inc.

Judge: Charles M WalkerChapter: 11Office: NashvilleLast Date to file claims:Trustee:Last Date to file (Govt):

Creditor: (6742304) MONROE COUNTY TAX COLLECTOR PO BOX 684 ABERDEEN MS 39730 Last Date to file (GClaim No: 98StaOriginal FiledFilDate: 10/19/2018En

Original Entered

Date: 10/19/2018

Status: Filed by: CR Entered by: Intake1 Modified:

Amount claimed: \$168520.66 Priority claimed: \$168520.66

History:

Details <u>98-1</u> 10/19/2018 Claim #98 filed by MONROE COUNTY TAX COLLECTOR, Amount claimed: \$168520.66 (Intake1)

Description: (98-1) PERSONAL PROPERTY TAXES *Remarks:*

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*	\$168520.66
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	\$168520.66	
Administrative		