# Debtor 1 PANOLA MEDICAL CENTER Debtor 2 (Spruse, if filing) United States Bankruptcy Court for the: District of Case number 18-05665

# FILED

NOV 27 2018

U.S. BANKRUPTCY COURT MIDDLE DISTRICT OF TN

### Official Form 410

## **Proof of Claim**

12/15

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.

cie	o is the current ditor?	Name of the cur	ynamics Corporation ment creditor (the person or a creditor used with the det	entity to be paid for this cl	aim)				
acc	s this claim been quired from meone else?	No Yes. From	n whom?	A Primary					
and	ere should notices d payments to the	Where should	d notices to the credit	or be sent?	Where should different)	d payments to the cred	litor be sent? (if		
cre	ditor be sent?	Precision D	Oynamics Corporati	on	Precision D	ynamics Corporati	on		
	deral Rule of	Name			Name		management of the same state o		
	nkruptcy Procedure (BP) 2002(a)	27770 N Entertainment Drive Suite			PO Box 71549				
	V	Number	Street	Terres		Street			
		200 Valend	cia CA	91455	Chicago,	JL	60694		
		City	State	ZIP Code	City	State	ZIP Code		
		Contact phone	888-684-1901 / 87	77.395.6808	Contact phone	888-684-1901 / 87	77.395.6808		
		Contact email pdc credit@bradycorp.com			Contact email	pdc_credit@brad	corp.com		
			dentifier for electronic pays			in things against artists.			
	es this claim amend e already filed?	No Yes. Cla	im number on court clai	ims registry (if known)		Filed on	/ DD / YYYY		

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. 2 5 6 9
How much is the claim?	S 1,601.58 . 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 is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Giatin	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.
	Goods Purchased
is all or part of the claim secured?	No The last transfer of the la
Secured	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.  Other Describe:
4	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 filled or recorded.)
Są.	Value of property:
	Amount of the claim that is secured: S
	Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line
	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?	변 No 의 Yes. Amount necessary to cure any default as of the date of the petition.
11. Is this claim subject to a	M No
right of setoff?	Tes. Identify the property:

2. Is all or part of the claim	₩ No						
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	one:	Amount entitled to priori				
A claim may be partly priority and partly	Domesti 11 U.S.	s					
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2 persona	2,775* of deposits toward purchase, lease, or rental of proper id, family, or household use. 11 U.S.C. § 507(a)(7).	ty or services for \$				
challed to priority.	bankrup	salaries, or commissions (up to \$12,475*) earned within 180 top petition is filed or the debtor's business ends, whichever i C. § 507(a)(4).	days before the is earlier.				
	Taxes o	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8	s), \$				
	Contribu	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	S				
	Other, 5	Specify subsection of 11 U.S.C. § 507(a)() that applies.	S <sub>economic resource constitution</sub>				
	* Amounts a	are subject to adjustment on 4/01/16 and every 3 years after that for co	ases begun on or after the date of adjustment.				
Sign Below	Check the course	avelate hov					
he person completing his proof of claim must	Check the appro	* 9.000 ( ) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
ign and date it. RBP 9011(b).	I am the creditor.						
2-45076 SECTION \$15.00014		editor's attorney or authorized agent.	lo 2004				
you file this claim lectronically, FRBP	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.						
			300E				
o establish local rules							
o establish local rules specifying what a signature	Lunderstand the	of an authorized signature on this Proof of Claim serves as an	acknowledgment that when calculating the				
to establish local rules specifying what a signature s.  A person who files a fraudulent claim could be lined up to \$500,000, imprisoned for up to 5	I understand tha amount of the cl		n acknowledgment that when calculating the eived toward the debt.				
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	I understand tha amount of the cl I have examined and correct.	it an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments rec	n acknowledgment that when calculating the eived toward the debt.				
to establish local rules specifying what a signature is.  A person who files a fraudulent claim could be lined up to \$500,000, imprisoned for up to 5 years, or both.	I understand tha amount of the cl I have examined and correct.	at an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments recid the information in this <i>Proof of Claim</i> and have a reasonable penalty of perjury that the foregoing is true and correct.	n acknowledgment that when calculating the eived toward the debt.				
to establish local rules specifying what a signature s. 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	I understand the amount of the cl I have examined and correct. I declare under the Executed on date the Executed o	at an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments rec of the information in this <i>Proof of Claim</i> and have a reasonable penalty of perjury that the foregoing is true and correct.	n acknowledgment that when calculating the eived toward the debt.				
o establish local rules specifying what a signature s. A person who files a raudulent claim could be lined up to \$500,000, mprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and	I understand the amount of the cl I have examined and correct. I declare under the Executed on date the Executed o	at an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments reciding the information in this <i>Proof of Claim</i> and have a reasonable penalty of perjury that the foregoing is true and correct.  In 1/13/2018  MM / DD / YYYY   MCOULD  MM / DD / YYYY	n acknowledgment that when calculating the eived toward the debt.				
to establish local rules specifying what a signature s. 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	I understand the amount of the cl. I have examined and correct. I declare under Executed on da  Walter  Print the name	at an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments rect the information in this <i>Proof of Claim</i> and have a reasonable penalty of perjury that the foregoing is true and correct.  The server of the person who is completing and signing this claim:  Merry McCollum	n acknowledgment that when calculating the eived toward the debt.				
o establish local rules specifying what a signature s. A person who files a raudulent claim could be lined up to \$500,000, mprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and	I understand the amount of the cl. I have examined and correct. I declare under the executed on da secure of the cl. Print the name	at an authorized signature on this Proof of Claim serves as an aim, the creditor gave the debtor credit for any payments rect the information in this Proof of Claim and have a reasonable penalty of perjury that the foregoing is true and correct.  Ite 11/13/2018  MM / DD / YYYY  Of the person who is completing and signing this claim:  Merry McCollum  First name	n acknowledgment that when calculating the eived toward the debt.  e belief that the information is true				
o establish local rules specifying what a signature s. A person who files a raudulent claim could be lined up to \$500,000, mprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and	I understand the amount of the cl I have examined and correct. I declare under the Executed on da  Executed on da  Print the name  Name  Title  Gerspany	at an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments recidition that the information in this <i>Proof of Claim</i> and have a reasonable penalty of perjury that the foregoing is true and correct.  Ite 11/13/2018  MM / DD / YYYY  Of the person who is completing and signing this claim:  Merry McCollum  First name  Credit & Coffection Supervisor  Precision Dynamics Corporation	n acknowledgment that when calculating the eived toward the debt.  e belief that the information is true				
o establish local rules specifying what a signature s. A person who files a raudulent claim could be lined up to \$500,000, mprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and	I understand the amount of the cl I have examined and correct. I declare under the Executed on da  Executed on da  Print the name  Name	at an authorized signature on this Proof of Claim serves as an aim, the creditor gave the debtor credit for any payments recit the information in this Proof of Claim and have a reasonable penalty of perjury that the foregoing is true and correct.  Ite 11/13/2018  MM / DD / YYYY  Of the person who is completing and signing this claim:  Merry McCollum  First name  Credit & Coffection Supervisor  Precision Dynamics Corporation  Identify the corporate servicer as the company if the authorized agent	n acknowledgment that when calculating the eived toward the debt.  e belief that the information is true				
to establish local rules specifying what a signature is.  A person who files a fraudulent claim could be lined up to \$500,000, imprisoned for up to 5 years, or both.  18 U.S.C. §§ 152, 157, and	I understand the amount of the cl I have examined and correct. I declare under the Executed on da  Executed on da  Print the name  Name  Title  Gerspany	at an authorized signature on this <i>Proof of Claim</i> serves as an aim, the creditor gave the debtor credit for any payments recit the information in this <i>Proof of Claim</i> and have a reasonable penalty of perjury that the foregoing is true and correct.  Ite 11/13/2018  MM / DD / YYYY  Of the person who is completing and signing this claim:  Merry McCollum  First narre Middle name  Gredit & Cotlection Supervisor  Precision Dynamics Corporation Identify the corporate servicer as the company if the authorized ager	a acknowledgment that when calculating the eived toward the debt.  e belief that the information is true				
to establish local rules specifying what a signature s. 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	I understand the amount of the cl I have examined and correct. I declare under the Executed on da  Executed on da  Print the name  Name  Title  Gerspany	at an authorized signature on this Proof of Claim serves as an aim, the creditor gave the debtor credit for any payments recit the information in this Proof of Claim and have a reasonable penalty of perjury that the foregoing is true and correct.  Ite 11/13/2018  MM / DD / YYYY  Of title person who is completing and signing this claim:  Merry McCollum  First narre Middle name  Credit & Cotlection Supervisor  Precision Dynamics Corporation Identify the corporate servicer as the company if the authorized ager  27770 N Entertainment Drive Suite 200  Number Street	acknowledgment that when calculating the eived toward the debt.  be belief that the information is true  Last name				



#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4270493	23 - AUG - 18	22-AUG-18	1
Customer P.O		Order No.	Customer No.
00796		.4103897	102569

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 D	AYS	Account Manager MORSE, HEATHER	debits wit	nclose paperwork for any short ship or pricing ith your payment.				
Camer UPS-Parcel-G	round	Tracking Number		Freight Tems Freight Free				
Ordered By AMANDA COOK			Ordered For AMANDA	COOK				
Product Number	000 107 100 100	Description	Unit	Order Qty	Ship Qty	Price	Extended	
WBSHDA-10	WB CONF ADULT 5	IDENT SHIELD POLY SNAP 00 CS KELLY GREEN	CASE	1	1	38.54	38.54	
<del></del>					Subtotal		38.54	
			ì	Other	Charges		0.00	
	1				landling		0.00	
	112				Tax		0.00	
			"I		and Total		38.54	
i.				the state of the s	ayments	- 4	0.00	
,	- 8	i.		14 m 20 00 T	strients		0.00	
		1.		Bala	ince Due	24////	38.54	
No		Products not shipped in full have	been backordered.	Lapit		U	SD	

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All claims for shortages and/or damages must be placed within ten days after receipt of goods. Merchandise returned without written consent will not be accepted.



#### Invoice

Invoice No.	Invoice Date	Order Date	Page	
4264129	17-AUG-18	17-AUG-18	1	
Customer P.O		Order No.	Customer No.	
00772		4098511	102569	

Precision Dynamics Corporation PO Box 71649 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER	107923108000000	Please enclose paperwork for any short ship or pricing debits with your payment. Freight Tems Freight Free				
Carrier UPS-Parcel-Gr	round	Tracking Number 123718670303325673	Freight					
Ordered By AMANDA COOK			Ordered Fo AMANDA	COOK				
Product Number		Description	Unit	Order Qty	Ship City	Price	Extended	
IVSEALST2	IV BAG PORT SEAL BLUE 1.25X2.95 1000/RL		QTY ROLL	2	2	131.36	262.72	
	4				Subtotal		262.72	
	- 1			Other	Charges		0.00	
					ing and landling	0.00		
	1				Tax			
	1			Gra	and Total		262.72	
				P	ayments		0.00	
					stments		0.00	
	1			Bala	nce Due		262.72	
		Products not shipped in full	have been backordered.			U	SD	

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page	
4236221	19-JUL-18	11-JUL-18	1	
Customer P.O		Order No.	Customer No.	
00566		4057763	102569	

Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILTO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 32606

Terms NET DUE 45 DAY							ship or pricing
Camier UPS-Parcel-Gro	und	Tracking Number 1 ZX8576A0347059605		t Free			
Ordered By AMANDA COOK			Ordered F AMANDA	COOK			
Product Number	12.50	Description	tinu	Order City	Ship Qty	Price	Extended
6309-A01-PDG- SI	TUBE Contract#: I	OD LBL,A01,4 UNIT,1 PPMM372 am: 6309-A223668	BOX	2	2	176.55	353.10
	<del> </del>				Subtotal		353.10
	-			Other	Charges		0.00
	-1				ping and Handling		0.00
	- +£				Tax		0.00
1				Gr	and Total	77-11	353.10
t	32 10	<b>©</b>		F	ayments		0.00
*				Adj	ustments		0.00
				Bala	ance Due	es, Linteryn	353.10
O		Products not shipped in full ha	us been bankardere	1 3 3			USD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4214491	27-JUN-19	25-JUN-18	1
Customer P.O		Order No.	Customer No.
00482		4040382	102569

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILLTO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER	debits wit	Please enclose paperwork for any short ship or pricing debits with your payment.  Freight Terms Freight Free				
Camier UPS-Parcel-Gr	ound	Tracking Number 1ZX8576A0346862328	Freight					
Ordered By AMANDA COOK				ered For ANDA COOK				
Product Number		Description	Unit	Order Oty	Ship Qty	Price	Extended	
WBSHDA-10		PIDENT SHIELD POLY SNAP 100 CS KELLY GREEN PPMM372	CASE	1	1	38.54	38.54	
	1	THE WARRY CONTRACTOR OF THE PROPERTY OF THE PR		Subtotal		38.54		
	1			Other	Charges	0.00 0.00		
	1			Shipp	ing and landling			
					Tax			
	1			Gra	and Total		38.54	
				P	ayments		0.00	
	1			Adj	stments	A. Abraids	0.00	
					nce Due		38.54	
		Products not shipped in full have	been backordered.			Ü	SD	

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Invoice Invoice No. 4212765 Customer P.O 00454 Order Date 20-JUN-18 Invoice Date 26 - JUN - 18 Customer No. Order No. 4036248 102569

> Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606 SHIP TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR RATESVILLE MS 38606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER	debits wit	ny short sh	ip or pricing		
Camier UPS-Parcel-Gr	Freight Tems Freight Free						
Ordered By AMANDA COOK			Ordered Fo AMANDA	ANDA COOK			
Product Number	March Street	Description	Unit	Order Qty	Ship Qty	Price	Extended
SDW-SS612	SPEE-D-I MAM NO I 120"/BX Contract# P	A STATE CONTROL OF THE STATE OF	вох	1	1	37.46	37.46
SDG-M612	SPEE-D-I OPAQUE I BURNOUT Contract#: P	100/BX	вох	1	1	34.48	34.48
SDM-W25	SPEE-D-I R/O 100 Contract#: P		BOX	1	1	31.60	31.60
	1-7	<del></del>			Subtotal	-	103.54
				Other	Charges		0.00
					ing and fandling		0.00
		<u>-</u>			Tax	7	0.00
					and Total	12	103.54
					ayments	141	0.00
		13.		A COLUMN TO THE REAL PROPERTY OF THE PARTY O	ustments		0.00
					nce Due		103.54
-	-	Products not shipped in full have	e been backordered		ASSESSMENT OF		USD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4209347	21 - JUN - 18	11-JUN-18	1
Customer P.O		Order No.	Customer No.
00295		4025052	102569

Remit To: **Precision Dynamics Corporation** PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Tems NET DUE 45 DAY	rs	Account Manager MORSE, HEATHER	debits wi	nclose paper th your payr	ny short shi	p or pricing	
Camier UPS-Parcel-Gro	ound			ms t Free			
Ordered By AMANDA COOK			Ordered Fo AMANDA				
Product Number		Description	Unit	Order Qty	Ship Qty	Price	Extended
6309-A01-PDG- SI	TUBE Contract#: I	OD LBL,A01,4 UNIT,1  PDMM372 art: 6309-A223668	вох	2	2	2 176.55	353.10
	<del></del>	The state of the s		r	Subtotal		353.10
				Other	Charges		0.00
					oing and landling	0.000	0.00
					Tax		0.00
				Gra	and Total		353.10
				P	ayments		0.00
				Adj	ustments		0.00
				Bala	noe Due		353.10
	7 - 2	Products not shipped in full ha	ve been backordered			Ü	ISD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4207505	20-JUN-18	14-JUN-18	1
Customer P.O		Order No.	Customer No.
00418		4 0 2 9 4 3 5	102569

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929496

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 D	AYS					y short sh	nip or pricing
Camer UPS-Parcel-G	round	Tracking Number FedEx Tracking #	Freight Ten Freight	t Free			
Ordered By AMANDA COOK			Ordered Fo AMANDA	COOK			
Product Number	是 影響、過過。	Description	Unit	Order Qty	Ship Qty	Price	Extended
5033-03	3/8X1-	BINDER PRINTED ID 5- 3/8 YELLOW 200 RL R PPMM372	QTY ROLL	4	4	12.69	50.76
				1	Subtotal		50.76
				Other	Charges		0.00
					ing and landling		0.00
	40.00				Tax		0.00
ž.	7.3			Gra	nd Total		50.76
		20		P	ayments		0.00
7				Adju	stments		0.00
Ž0	1			Bala	nce Due		50.76
9		Products not shipped in full ha	ye been backordered	5 to 76			USD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page	
4204875	18-JUN-18	15 - JUN - 18	1	
Customer P.O		Order No.	Customer No.	
00431		4031201	102569	

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

SHIP TO: HPTO: PANOLA MEDICAL CENTER ATTN: PO# 00431 303 MEDICAL CENTER DR BATESVILLE MS 38606

Tems NET DUE 45 DA	YS	Account Manager MORSE, HEATHER		nclose paper th your payn		y short ship	o or pricing
Camier UPS-Parcel-Gr	ound	Tracking Number 1ZX8576A0346784887	Freight Tems Freight Free				
Ordered By AMANDA COOK			Ordered For AMANDA COOK				
Product Number		Description	Unit	Order Qty	Ship Qty	Price	Extended
59746005		ALLERGIC"" 1X500"" ED 1""CORE 1RL R PMM372	ROLL	4	4	3.40	13.60
59710132		PATIENT RM NO DOCTOR"" "" ORANGE 1"" CORE 1	ROLL	4	4	2.17	8.68
	4				Subtotal		22.28
				Other	Charges		0.00
					ing and landling		0.00
	1.				Tax		0.00
				Gra	ind Total		22.28
				P	ayments.		0.00
					ustments		0.00
					noe Due		22.28
		Products not shipped in full have	e been backordered			U	SD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4189352	01-JUN-18	01-JUN-18	1
Customer P.O		Order No.	Customer No.
00316		4012951	102569.

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

SHIP TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 39606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER		iclose paper		y short shi	p or pricing
Camer FedEx Standard Overnight: next business day afternoon		Tracking Number 435937909650	Freight Terms Third Party Billing				
Ordered By AMANDA COOK	L.		Ordered Fo				
Product Number		Description	Unit	Order Qty	Ship Oty	Price	Extended
59704842		NDER "ROOM NO." 5- 8 WHITE 500 RL R MM372	QTY ROLL	3	3	10.87	32.61
					Subtotal		32.61
				Other	Charges		0.00
į	1.5				ing and landling		0.00
3		1			Tax		0.00
e .	20 万				nd Total		32.61
A <sub>d</sub>				1.057.68	ayments		0.00
4			3	^ Adju	stments		0.00
		115		Balar	noe Due		32.61
		Products not shipped in full hav	re been backordered.	3		U	SD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page	
4188794	31 - MAY - 18	23 - MAY - 18	1	
Customer P.O		Order No.	Customer No	
00289		4004413	102569	

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER		close paper h your payn	p or pricing				
Carrier UPS-Parcel-Gr	ound	Tracking Number 1ZX8576A0346629287	er FreightTems 346629287 Freight Free						
Ordered By AMANDA COOK			Ordered Fo AMANDA						
Product Number		Description	Unit	Order Qty	Ship Qty	Price	Extended		
MV04SY0431	YELLOW	PPMM372	QTY ROLL	5	5	8.70	43.50		
Live to the street					Subtotal		43.50		
				Other	Charges		0.00		
					ing and landling	- 1000	0.00		
					Tax	- 10	0.00		
				Gra	ind Total		43.50		
				P	ayments		0.00		
				Adju	stments		0.00		
				Bala	noe Due		43.50		
		Products not shipped in full hav	e been backordered.			U	SD		

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4186654	30 - MAY - 18	29-MAY-18	1
Customer P.O		Order No.	Customer No.
00316		4009272	102569

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

SILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606 SHIP TO: PANOLA MEDICAL CENTER ATTN: PO#00316 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DAY	rs	Account Manager MORSE, HEATHER	debits wit	Please enclose paperwork for any short ship debits with your payment.				
Camier UPS-Parcel-Gro	und	Tracking Number 1ZX8576A0346623890	Freight Tems Freight Free					
Ordered By AMANDA COOK			Ordered Fo AMANDA	COOK				
Product Number	SAME TO SERVE	Description	Unit	Order Oty	Ship City	Price	Extended	
59704842		INDER "ROOM NO." 5- /8 WHITE 500 RL R PPMM372	QTY ROLL	3	3	10.87	32.61	
	1				Subtotal		32.61	
				Other	Charges		0.00	
	1				ing and landling		0.00	
	- 4				Tax		0.00	
	la la			Gra	nd Total		32.61	
3				P	ayments		0.00	
5				Adju	stments		0.00	
Ý.				Bala	nce Due	- Establish	32.61	
	-	Products not shipped in full hav	e been backordered.	1 4		1	JSD	

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4186373	30-MAY-18	24-MAY-18	1
Customer P.O		Order No.	Customer No
00295		4006011	102569

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Tems NET DUE 45 DA	YS	Account Manager MORSE, HEATHER	Please enclose paperwork for any short ship or debits with your payment.			p or pricing	
Camier UPS-Parcel-Gr	ound	Tracking Number 1Z8AR4740358501763	Freight	Freight Terms Freight Free			
Ordered By AMANDA COOK			Ordered Fo AMANDA				
Product Number		Description	Unit	Order Qty	Ship Qty	Price	Extended
5033-03	3/8X1-	BINDER PRINTED ID 5- 3/8 YELLOW 200 RL R PPMM372	QTY ROLL	4	4	12.69	50.76
	٠,				Subtotal		50.76
				Other	Charges	ST. 22	0.00
					ing and landling		0.00
					Tax		0.00
				Gra	and Total		50.76
				P	ayments	Territoria de la composición dela composición de la composición dela composición dela composición dela composición de la composición de la composición dela composici	0.00
				Adjı	ustments	100	0.00
				Bala	nce Due		50.76
		Products not shipped in full ha	ve been backordered			U	SD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4185332	29-MAY-18	24 - MAY - 18	1
Customer P.O		Order No.	Customer No.
00295		4006011	102569

Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER	debits wit	Please enclose paperwork for a debits with your payment. Freight Tems Freight Free		y short ship	p or pricing
Camier UPS-Parcel-Gr	ound	Tracking Number 1ZX8576A0346610886	Freight				
Ordered By AMANDA COOK			Ordered Fo AMANDA	COOK			
Froduct Number	10 1 10 10 10 10 10 10 10 10 10 10 10 10	Description	Unit	Order Qty	Ship Qty	Price	Extended
59713162	LABEL "I 1/4X7/8 Contract# D	EXPIRATION DATE "2- FL YELLOW 1000 RL P PMM372	QTY ROLL	2	2	15.89	31.78
59704842		INDER "ROOM NO." 5- /8 WHITE 500 RL R DMM372	QTY ROLL	2	2	10.87	21.74
	1-01			1	Subtotal		53.52
-				Other	Charges		0.00
1	2.5				ing and landling		0.00
	li li			1 P.B.	Tax	of Sycamore and the	0.00
N.	1			, , Gra	and Total		53.52
	1	T.		\$ P	ayments		0.00
		X**	i i	Adju	ustments		0.00
				Bala	ince Due		53.52
	100000000000000000000000000000000000000	Products not shipped in full have	been backordered			U	SD

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4164291	07-MAY-18	04 - MAY - 18	1
Customer P.O		Order No.	Customer No.
00178		3984376	102569

Remit To: Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606 SHIP TO: PANOLA MEDICAL CENTER ATTN: PO#00178 303 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DA	YS	Account Manager MORSE, HEATHER	Please enclose paperwork for any sho debits with your payment.			y short shi	short ship or pricing	
Carrier UPS-Parcel-Gr	ound	Tracking Number 1ZX8576A0346421652	Freight Tems Preight Free					
Ordered By AMANDA COOK			Ordered Fo AMANDA	500 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
Product Number		Description	Unit	Order Qty	Ship Qty	Price	Extended	
WRSHDA-10	ADULT !	FIDENT SHIELD POLY SNAP 500 CS KELLY GREEN PPMM372	CASE	1	1	38.54	38.54	
59704842	3/8X1-	BINDER "ROOM NO." 5- 3/8 WHITE 500 RL R PPMM372	QTY ROLL	2	2	10.87	21.74	
		**************************************			Subtotal		60.28	
				Other	Charges		0.00	
					ing and		0.00	
	1				Tax		0.00	
				Gra	and Total		60.28	
				P	ayments		0.00	
				Adji	ustments		0.00	
				Bala	nce Due		60.28	
		Products not shipped in full have	e been backordered			t	SD	

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#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4139381	12-APR-18	11 - APR - 18	1
Customer P.O	9	Order No.	Customer No.
701-671055		3959025	102569

Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606 SHIP TO: PANOLA MEDICAL CENTER 203 MEDICAL CENTER DR BATESVILLE MS 38606

Terms NET DUE 45 DAY	s	Account Manager MORSE, HEATHER	Please enclose paperwork for a debits with your payment.		any short ship or pricing		
Camer FEDEX-Parcel-G	round	Tracking Number 1ZX8576A0346212495	Third I	Freight Terms Third Party Billing			
Ordered By			Ordered Fo	r			
Product Number	CASSES	Description	Unit	Order Qty	Ship Qty	Price	Extended
59746005			ROLL	3	3	3.40	10.20
	4				Subtotal		10.20
				Other	Charges	4	0.00
					and and		0.00
	1 2 2				Tax	Anne Color	0.00
No.	- 4			Gra	and Total		10.20
2				P	ayments	17/1 - 11/1/1/	0.00
				Adju	stments		0.00
H-				Bala	nce Due		10.20
	-despera	Products not shipped in full have	a heen backordered	V V V		T.	ISD

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4.



#### Invoice

Invoice No.	Invoice Date	Order Date	Page
4082883	20-FEB-18	19-FEB-18	1
Customer P.O	19	Order No.	Customer No.
701-667169		3902608	102569

Precision Dynamics Corporation PO Box 71549 Chicago, IL 60694-1995 FED ID # 95-1929495

BILL TO: PANOLA MEDICAL CENTER 303 MEDICAL CENTER DR BATESVILLE MS 38606

Tems NET DUE 30 DA	Ys	Account Manager MORSE, HEATHER	Please enclose paperwork for any sidebits with your payment.			ny short ship or pricing		
Camer FEDEX-Parcel-	Ground	Tracking Number 424135671120	Freight Terms Third Party Billing					
Ordered By			Ordered Fo	or				
Product Number		Description	Unit	Order Qty	Ship Qty	Price	Extended	
DPMS42	3-1/2X1 2RL/CS Contract#:	NIR THERM MCKESSON HBOC WHT/NOTCH 5M/RL 597 art: 321510	CASE	3	3	31.84	95.52	
	12-12-12-12	Hart and the state of the state	T. T. C.		Subtotal		95.52	
					Charges			
					and landling	0.0		
	F				Tax			
				Gra	and Total		95.52	
				P	ayments	-1.1.11	0.00	
	1			Adj	ustments		0.00	
	1			Bala	ince Due		95.52	
		Products not shipped in full have	been backordered			U	SD	

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# 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):

Creditor:(6792691)Claim No: 127Status:PRECISION DYNAMICSOriginal FiledFiled by: CRCORPORATIONDate: 11/27/2018Entered by: Intake127770 N ENTERTAINMENTOriginal EnteredModified:

DRIVE SUITE Date: 11/27/2018

200 VALENCIA CA

91455

Amount claimed: \$1601.58

History:

<u>Details</u> 11/27/2018 Claim #127 filed by PRECISION DYNAMICS CORPORATION, Amount claimed:

\$1601.58 (Intake1)

Description: (127-1) Goods Purchased

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

<b>Total Amount Claimed*</b>	\$1601.58
<b>Total Amount Allowed*</b>	

<sup>\*</sup>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		