Fill in this in	formation to identify the case:
Debtor 1	Curae Health, Inc., et. al.
Debtor 2 (Spouse, if filing)	
United States I	Bankruptcy Court for the: Middle District of Tennessee
Case number	18-05665-CW3-11

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?	Name of the curr	ry, Mississippi ent creditor (the person or entil creditor used with the debtor	ty to be paid for this cla Amory Water	,		
2.	Has this claim been acquired from someone else?	☑ No □ Yes. From	1 whom?				
3.	Where should notices and payments to the	Where should	notices to the creditor b	e sent?	Where should different)	payments to the credit	tor be sent? (if
	creditor be sent? Federal Rule of	Ms. Linda V	V. Knight		Mr. Mike Ki _{Name}	ng/City of Amory Uti	ilities
	Bankruptcy Procedure (FRBP) 2002(g)		150 Third Ave South		PO Box 266	6 Street	
		Nashville	TN	37201	Amory	MS	38821
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone	615-244-4994		Contact phone	662-256-5633	
		Contact email	lknight@gsrm.com		Contact email		
		Uniform claim ide	entifier for electronic payments	in chapter 13 (if you u 	se one): 		
4.	Does this claim amend one already filed?	☑ No ❑ Yes. Clain	n number on court claims re	egistry (if known)		Filed on	/ DD / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☐ No ☑ Yes. Who	made the earlier filing? I	know no one el	se has filed o	out a proof of clair	n

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: *There are 21 separate accounts*
7. How much is the claim?	\$177,771.55 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).
3. What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
claim?	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.
	Utility services to Gilmore Medical Center
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 <i>Mortgage Proof of Claim</i>
	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?	M No
lease ?	□ 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?	Yes. Identify the property:
Case 3:18-bk- Official Form 410	05665 Claim 132-1 Filed 12/10/18 Desc Main Document Page 2 of Proof of 25 jun page 2

12. Is all or part of the claim	Mo No	
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).	\$
	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 after	er the date of adjustment.
Part 3: Sign Below		
The person completing this proof of claim must	Check the appropriate box:	
sign and date it.	□ I am the creditor.	
FRBP 9011(b).	I am the creditor's attorney or authorized agent.	
If you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.	
electronically, FRBP 5005(a)(2) authorizes courts	□ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.	
to establish local rules specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment amount of the claim, the creditor gave the debtor credit for any payments received toward the debtor.	
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information and correct.	

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

/s/ Linda W. Knight, Attorney-in-Fact

Signature

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

Name	Linda	W.		Knight
	First name	Middle name		Last name
Title	Attorney-in-Fact			
Company	Gullett, Sanford, F	Robinson & Martin, P	LLC	
	Identify the corporate serv	vicer as the company if the au	thorized agent	is a servicer.
	Identify the corporate serv	vicer as the company if the au	ithorized agent	is a servicer.
Address	Identify the corporate served Suite 1700, 150 T		ithorized agent	is a servicer.
			ithorized agent	is a servicer.
	Suite 1700, 150 T		thorized agent	is a servicer. 37201
	Suite 1700, 150 T Number Street			

years, or both.

3571.

18 U.S.C. §§ 152, 157, and

Amory Water & Electric

RE: Gilmore Memorial Hospital

Meter Reading as of Aug. 23, 2018 (meters read after Aug. 23 and amounts backed out to determine what was owed as of the petition date)

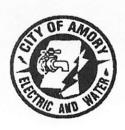
Account No.	Payments &	Net Amount Due
	Adjustments	
	(extrapolating	
	backward from	
	meter reading date	
	to petition date)	
200897-100849	1,785.33	2,879.69
200907-100859	259.63	462.64
200908-100860	435.34	625.24
200909-100861	459.49	666.28
200910-100862	576.12	1,083.99
200911-100863	810.21	1,353.52
200915-100864	122.96	239.96
200916-100865	415.20	699.26
200917-100866	531.78	840.85
200918-100867	36.32	57.71
200919-100868	492.38	807.31
205430-104911	0.00	362.35
205431-104912	0.00	778.40
205433-104913	0.00	142,256.58
205434-104914	0.00	5,873.76
205435-104915	0.00	630.21
205436-104916	0.00	55.00
205438-104917	0.00	17,621.64
205439-104918	0.00	187.44
205440-104919	0.00	203.05
205443-104920	0.00	86.67
	5,924.76	177,771.55

EXHIBIT A

25

ACCOUNT NUMBER CUSTOMER NAME SERVICE ADDRESS	GILMO	7-100849 RE MEMORIAL H 9TH FAMILY MED			N OF	A CONTRACTOR	129 M	ry Water ain Street N y, MS 388	North * P	tric .O. Box 266
METER READING DATE	404	23 2018	AVL O	E		È	Phone	e (662) 25	56-5633	
DAYS BILLED	: 21				RIC AN	O WE				
SERVICE		PRESENT R	EADING	PREVIOU	S READ	ING	AMO	JNT USE	D	AMOUNT
WATER (ONE UNIT = 100 GA SEWER (ONE UNIT = 100 GA CLASS 62 - 4 YARD CONTAIN	LLONS)	NITATION RATE	14778		146	594			84 84	29.40 29.40 43.40 26.04
OUTDOOR LIGHT (1) FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST										1150.12
FINAL BILL TOTAL CURRENT CHARGES	DUE)	PAYMENTS & ADJUSTMENTS	DEBIT/	HER CREDITS	BALAN	CE FORV	VARD	CURI	RENT	1150.12
FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST	DUE)	PAYMENTS & ADJUSTMENTS -1,785.33	OT DEBIT/	HER CREDITS	BALAN (F	CE FORV AST DUE) 1,695			RENT RGES 50.12	AMOUNT
FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST AMOUNT FROM PREVIOUS BILL ADD	DUE) ARGES		DEBIT/			1,695	.21		50.12	ANOUNT DUE 2,879.69
FINAL BILL FOTAL CURRENT CHARGES BALANCE FORWARD (PAST AMOUNT FROM PREVIOUS BILL 3,480.54	DUE) ARGES		DEBIT/	PERIOD		1,695	.21	1,15	50.12 SAGE	AMOUNT DUE 2,879.69

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



C:02 R:050

Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821 Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200897-100849
PAST DUE BALANCE:	1,695.21
CURRENT MONTHS CHARGE:	1,150.12
NET AMOUNT DUE:	2,879.69
PAST-DUE AFTER:	September 07, 2018
PENALTY AMOUNT:	\$0.00
AMOUNT DUE AFTER PAST DUE DATE:	\$2,879.69

This bill is now due and payable. Service may be discontinued without further notice.

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Filed 12/10/18 Desc Main Document Page 5 of

ACCOUNT NUM	MBER: 20090	07-100859			Y OF A	MO		ry Water		
	CUSTOMER NAME: GILMORE MEMORIAL HOSPITAL SERVICE ADDRESS: . OLD GI CLINIC STE 3			1 -	129 Main Street North * P.O. Box 2 Amory, MS 38821					
METER READING	DATE: Aug	23 2018		1		E	Phone	e (662) 2	56-5633	
DAYS BI	ILLED: 21				RIC AN					
SERVIC	CE	PRESENT R	EADING	PREVIOU	S READ	ING	AMO	UNT USE	D	AMOUNT
ELECTRIC (KILOWATT SANITATION FINAL BILL	HOURS)		12752		11404 1348			1348	161.3 21.0	
										182.37
AMOUNT FROM	PAST DUE)	PAYMENTS & ADJUSTMENTS		THER CREDITS	BALAN	CE FORV	VARD	CUR	RENT	182.37
BALANCE FORWARD (F		PAYMENTS & ADJUSTMENTS -259.63	OT DEBIT/	THER CREDITS	BALANO (P	CE FORV AST DUE) 266			RENT RGES 82.37	
AMOUNT FROM LA	PAST DUE) ATE CHARGES ADDED		OT DEBIT/			266	.92		82.37	AET AMOUNT DUE 462.64
AMOUNT FROM LA	PAST DUE) ATE CHARGES ADDED		DEBIT/	PERIOD	CO	266	.92	1	82.37 SAGE	AET AMOUNT DUE 462.64

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL

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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

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EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200907-100859
PAST DUE BALANCE:	266.92
CURRENT MONTHS CHARGE:	182.37
NET AMOUNT DUE:	462.64
PAST-DUE AFTER:	September 07, 2018
PENALTY AMOUNT:	\$0.00
AMOUNT DUE AFTER PAST DUE DATE:	\$462.64

This bill is now due and payable. Service may be discontinued without further notice.

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Filed 12/10/18 Desc Main Document Page 6 of

ACCOUNT NU						Y OF	MOS		y Water		
	USTOMER NAME: GILMORE MEMORIAL HOSPITAL RVICE ADDRESS: MAC LAB AND XRAY STE 4			129 Main Street North * P.O. Box 266 Amory, MS 38821							
METER READING	DATE:	Aug	23 2018		E		E	Phone	e (662) 25	56-5633	
DAYS BI	ILLED:	21				RIC AN	0 11				
SERVIO	CE		PRESENT F	READING	PREVIOUS	READ	ING	AMO	JNT USE	D	AMOUNT
ELECTRIC (KILOWATT HOURS) SANITATION FINAL BILL				67413		654	183			1930	225.16 21.00
TOTAL CURRENT CHA BALANCE FORWARD (I		UE)									246.16
AMOUNT FROM LA	ATE CHA	RGES	PAYMENTS & ADJUSTMENTS	DEBIT/	THER CREDITS	BALAN	CE FOR	WARD	CUR	RENT	AMOUNT
799.58	1	4.84	-435.34				364	.24	2	46.16	625.24
						CO	MPA	RE YO	OUR U	SAGE	:
					PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
					Current Last Month	21 31	1930 2872	92 93	0	0	
					Lactinonal			97			

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R:050 Amory Water & Electric

129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200908-100860
PAST DUE BALANCE:	364.24
CURRENT MONTHS CHARGE:	246.16
NET AMOUNT DUE:	625.24
PAST-DUE AFTER:	September 07, 2018
PENALTY AMOUNT:	\$0.00
AMOUNT DUE AFTER PAST DUE DATE:	\$625.24

This bill is now due and payable. Service may be discontinued without further notice.

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Filed 12/10/18 Pasc Main Document Page 7 of

				This b furthe	ill is nov r notice.	v due and	nd payable. Service may be discontinued witho					
			DSPITAL CLINIC	STE	T OF		129 M	ry Water ain Street 1 1, MS 388	North * P	tric .O. Box 266		
METER READING DATE: DAYS BILLED:		Aug 23 2018 21					Phone (662) 256-5633					
SERVICE	PRESENT RI	EADING	PREVIOUS	READ	ING	AMO	JNT USE	D	AMOUNT			
ELECTRIC (KILOWATT HOUR SANITATION FINAL BILL			70198	<u> </u>	673	332	2866			327.74 21.00		
TOTAL CURRENT CHARGES BALANCE FORWARD (PAST I	DUE)								348.74			
AMOUNT FROM LATE CHA PREVIOUS BILL ADDI	RGES	PAYMENTS & ADJUSTMENTS	DEBIT	HER CREDITS	BALAN	CE FOR	WARD	CUR CHA	RENT RGES	AMOUNT DUE		
762.80	14.23	-459.49				303	.31	3	48.74	666.28		
					CO	MPA	RE YO	OUR U	SAG			
				PERIOD	DAYS	ELECTI KWHI USED	DAILY AVG	WATER GAL USED	DAILY AVG GAL			
				Current Last Month Year Ago	21 31 31	2866 2316 3795	136 75 122	0 0 0	0 0 0			

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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

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EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

> Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200909-100861
PAST DUE BALANCE:	303.31
CURRENT MONTHS CHARGE:	348.74
NET AMOUNT DUE:	666.28
PAST-DUE AFTER:	September 07, 2018
PENALTY/AMOUNT:	\$0.00
AMOUNTIDUE AFTER PASTIDUE DATE:	\$666.28

This bill is now due and payable. Service may be discontinued without further notice.

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ACCOUNT I	NUMBER:	20091	0-100862			YOF	MO		ry Water		
CUSTOME SERVICE A			RE MEMORIAL H VD DR S EL# 701			۶.	1 E	a contra presso	ain Street y, MS 388		.O. Box 266
METER READIN	NG DATE:	Aug	23 2018		E		E	Phone	e (662) 2	56-5633	
DAYS	BILLED:	21				RIC AN	DH				
SERVICE			PRESENT R	EADING	PREVIOU	S READ	ING	AMO	UNT USE	D	AMOUNT
ELECTRIC (KILOWATT HOURS) SANITATION FINAL BILL			63953	60265		265	3688			417.8 21.0 438.82	
BALANCE FORWAR	D (PAST D	OUE)									
AMOUNT FROM PREVIOUS BILL	LATE CHA ADDE	RGES	PAYMENTS & ADJUSTMENTS	DEBIT/	CREDITS BALANCE FOR			DRWARD CURRENT JE) CHARGES			- DUE
1,203.81	1	7.48	-576.12				627	.69	4	38.82	1,083.9
						CO	MPA	RE YO	OUR U	SAGE	
					PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
					Current Last Month	21 31	3688 5276	176 170	0	0 0	
					Year Ago	31	4065	131	0	0	

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129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

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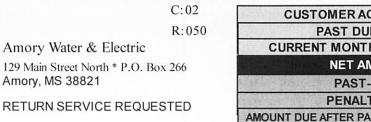
GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

> Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200910-100862
PAST DUE BALANCE:	627.69
CURRENT MONTHS CHARGE:	438.82
NET AMOUNT DUE:	1,083.99
PAST-DUE AFTER:	September 07, 2018
PENALTY AMOUNT:	\$0.00
AMOUNT DUE AFTER PAST DUE DATE:	\$1,083.99

This bill is now due and payable. Service may be discontinued without further notice.

Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266



Filed 12/10/18 Pesc Main Pocument Page Pof 25

CUSTOMER SERVICE ADI			RE MEMORIAL H			۶.	1 E		, MS 388		O. Box 266
METER READING	G DATE:	Aug	23 2018	2018				Phone	e (662) 25	56-5633	
DAYS E	BILLED:	21				RIC AN					
SERVICE PRESENT READING PREV				PREVIOUS	READ	ING	AMOL	JNT USE	D	AMOUNT	
ELECTRIC (KILOWATT HOURS) SANITATION FINAL BILL FOTAL CURRENT CHARGES			20101	15518		518			4583	515.90 21.00	
	A STATE OF THE OWNER OF				11 - C						536.90
BALANCE FORWARD	(PAST D								0110		AMOUNT
BALANCE FORWARD	A STATE OF THE OWNER OF		PAYMENTS & ADJUSTMENTS	DEBIT/	HER CREDITS	BALAN(F	CE FORV AST DUE)	WARD	CUR CHA	RENT	NET
BALANCE FORWARD	(PAST D		PAYMENTS & ADJUSTMENTS -810.21	DEBIT/	HER CREDITS	BALAN(F	CE FORV AST DUE) 797			RENT RGES 36.90	AMOUNT
AMOUNT FROM L	(PAST D	RGES D		DEBIT/	HER CREDITS		797	.45		36.90	1,353.52
AMOUNT FROM PREVIOUS BILL	(PAST D	RGES D		DEBIT/	PERIOD		797 MPAI	.45	5	36.90 SAGE	1,353.52
AMOUNT FROM PREVIOUS BILL	(PAST D	RGES D		DEBIT/		CO	797 MPA	RE YC	5 DUR U WATER GAL.	36.90 SAGE DAILY AVG.	1,353.52

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C:02 R:050

Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

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EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

> Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200911-100863
PAST DUE BALANCE:	797.45
CURRENT MONTHS CHARGE:	536.90
NET AMOUNT DUE:	1,353.52
PAST-DUE AFTER:	September 07, 2018
PENALTY AMOUNT:	\$0.00
AMOUNT DUE AFTER PAST DUE DATE:	\$1,353.52

This bill is now due and payable. Service may be discontinued without further notice.

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Filed 12/10/18 Desc Main Document Page 10 of

				This t furthe	bill is now du er notice.	e and payable	e. Service ma	ay be disc	continued without		
ACCOUNT	NUMBER: 200915-	100864			I OF AM	Amo	ory Water	& Elect	tric		
		MEMORIAL HO				129 Main Street North * P.O. Box 260 Amory, MS 38821					
METER READ	ING DATE: Aug 23	2018				Phor	ne (662) 25	6-5633			
DAY	'S BILLED: 21				AIC AND	· · · · · · · · · · · · · · · · · · ·					
SE	RVICE	PRESENT RE	EADING	PREVIOUS		G AMC	UNT USEI	D	AMOUNT		
FINAL BILL OTAL CURRENT BALANCE FORWA									76.44 /Et		
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OT DEBIT/C	HER CREDITS	BALANCE (PAS	E FORWARD CURRENT ST DUE) CHARGES		RENT	AMOUNT DUE		
278.69	7.79	-122.96				155.73	7	76.44	239.96		
DEMAND 4.087					COM	PARE Y	OUR U	SAGE			
				PERIOD Current Last Month	DAYS R 10 21	ECT DAILY WHL AVG SED USE 573 27 243 40	WATER GAL USED 0 0	DAILY AVG GAL 0 0			
				Year Ago	31 2	2867 92	0	0			

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



C:02 R:050

Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821 Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200915-100864
PAST DUE BALANCE:	155.73
CURRENT MONTHS CHARGE:	76.44
NET AMOUNT DUE:	239.96
PASTEDUE/AFTER	September 07, 2018
PENALTY AMOUNT	\$0.00
AMOUNTIDUE/AGTER PASTIDUE/DATE:	\$239.96

PIN0519P

This bill is now due and payable. Service may be discontinued without further notice.

ulldahlah, ahladliha, ahladladla Ilaallaa Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Filed 12/10/18 Desc Main Document Page 11 of 12/10/18

					This b furthe	ill is nov r notice.	/ due and	l payable.	Service m	nay be dis	continued	without			
ACCOUNT NU	MBER: 200	916-1	00865							nory Water & Electric Main Street North * P.O. Box 266					
CUSTOMER SERVICE ADD			RE MEMORIAL HOSPITAL EARL FRYE BLVD WOUN			129 Main Street Amory, MS 38					.O. Box 2	66			
METER READING	DATE: Aug		2018		E	Ľ		Phone	e (662) 2	56-5633					
DAYS B	ILLED: 21					RIC AN									
SERVI	CE		PRESENT RI	EADING	PREVIOUS	READ	ING	AMOL	JNT USE	D	AMOU	INT			
FINAL BILL TOTAL CURRENT CHA BALANCE FORWARD (81.49			
AMOUNT FROM LI PREVIOUS BILL	ATE CHARGES ADDED	A	PAYMENTS & OTHER BALANCE FORWARD CUR ADJUSTMENTS DEBIT/CREDITS (PAST DUE) CHA		CUR CHA	RENT	- D	ÛÊ							
818.93	14.04		-415.20				403	3.73	2	81.49	6	99.26			
DEMAND 12.852						CO	MPA	RE YC	OUR U	SAGE					
					PERIOD	DAYS	EUECT KWUH USED	DAILY AVG IUSE	WATER GAL USED	DAILY AVG.		- 151 19 19			
					Current Last Month Year Ago	21 31 31	2444 3506 4020	116 113 130	0 0 0	0 0 0					

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL

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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

Claim 132-1

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

Case 3:18-bk-05665

CUSTOMER ACCOUNT NO:	200916-100865
PAST DUE BALANCE:	403.73
CURRENT MONTHS CHARGE:	281.49
NET AMOUNT DUE:	699.26
PASTEDUEAEITERE	September 07, 2018
PENALTYAMOUNT	\$0.00
AMOUNT DUE ABTER PASTIDUE PATET	\$699.26

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This bill is now due and payable. Service may be discontinued without further notice.

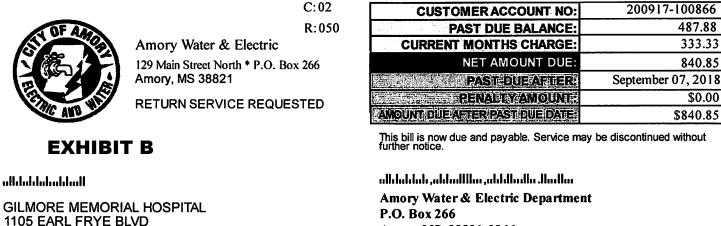
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Filed 12/10/18 Desc Main Decument Page 12 of 12

9110519P

ACCOUNT	NUMBER: 2009	17-100866			TOF A	MA	Amo	ry Water	& Elec	tric
	IER NAME: GILMO ADDRESS: 1127	DRE MEMORIAL H EARL FRYE BL			ریچ			ain Street y, MS 388		.O. Box 266
METER READ	ING DATE: Aug	23 2018		E.			Phone	e (662) 2	56-5633	:
DAY	S BILLED: 21				RIE AN					
SE	RVICE	PRESENT R	EADING	PREVIOUS	READ	ING	AMO	UNT USE	D	AMOUNT
WATER (ONE UNIT SEWER (ONE UNIT CLASS 66 - 6 YARE FINAL BILL TOTAL CURRENT BALANCE FORWA	= 100 GALLONS) CONTAINER 1x S CHARGES	ANITATION RATE	11010		109	986			24 24	12.60 8.40 62.30 333.33
AMOUNT FROM PREVIOUS BILL	LATE CHARGES	PAYMENTS & ADJUSTMENTS	DEBIT/	HER CREDITS	BALAN	CE FOR	WARD	CUR	RENT	AET AMOUNT DUE
1,019.66	19.64	-531.78				48	7.88	3	33.33	840.85
DEMAND 6.640					CO	MPA	RE YO	DUR U	SAG	Ξ
				PERIOD	DAYS	ELECT KWH USED	DAILY AVG USE	WATER GAL USED	DAILY AVG GAL	an a
				Current Last Month Year Ago	21 31 31	2157 3189 3805	103 103 123	2400 3400 7700	114 110 248	
				Tear Ago	31	3005	123	//00		

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Amory MS 38821-0266

AMORY, MS 38821 Case 3:18-bk-05665 Claim 132-1

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ACCOUNT NUMBI	R: 200918-	200918-100867				MO	Amory Water & Electric					
CUSTOMER NAM SERVICE ADDRES		ILMORE MEMORIAL HOSPITAL 1127 EARL FRYE BLVD SUPP						129 Main Street North * P.O. Box 20 Amory, MS 38821				
METER READING DAT	TE: Aug 23						Phone	e (662) 2	56-5633			
DAYS BILL	D: 21				RIC AN							
SERVICE		PRESENT REA	DING	PREVIOUS	READ	ING	AMOUNT USED			AMOUNT		
ELECTRIC (KILOWATT HO	13	3144		13058 8			86	23.08				
FINAL BILL TOTAL CURRENT CHARG BALANCE FORWARD (PAS										23.08		
AMOUNT FROM LATE	CHARGES	PAYMENTS & ADJUSTMENTS	OT DEBIT/	HER CREDITS	BALAN	CE FOR	NARD	CUR	RENT	AET AMOUNT DUE		
69.30	1.65	-36.32				32	.98		23.08	57.71		
					CO	MPA	RE YO	OUR U	ISAGI			
				PERIOD	DAYS		AVG.	WATER CAL	AVG.			
				Current Last Month	21 31	86 123	4 4 4	0	O O			

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Amory Water & Electric 129 Main Street North * P.O. Box 266

Amory, MS 38821

RETURN SERVICE REQUESTED

Claim 132-1

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

Case 3:18-bk-05665

200918-100867	CUSTOMER ACCOUNT NO:
32.98	PAST DUE BALANCE:
23.08	CURRENT MONTHS CHARGE:
57.71	NET AMOUNT DUE:
September 07, 2018	PASTEDUEARTER
\$0.00	PENALTY AMOUNTE
\$57.71	AMOUNT DUE AFTER PASTIDUE DATE:

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This bill is now due and payable. Service may be discontinued without further notice.

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CUSTON	NUMBER:		9-100868 RE MEMORIAL HO EARL FRYE BLV			N DF	ALC: N	129 M	ry Water ain Street 1 y, MS 388	North * P	tric .O. Box 266
METER READ	ING DATE:	Aug 2	23 2018		ELE		A.	Phone	e (662) 2	56-5633	
DAY	S BILLED:	21				RIC AN					
SE	RVICE		PRESENT RI	EADING	PREVIOUS	S READ	ING	AMO	UNT USE	D	AMOUNT
FINAL BILL FOTAL CURRENT BALANCE FORWA		UE)					•			332.99	
AMOUNT FROM PREVIOUS BILL	LATE CHA ADDE	RGES	PAYMENTS & ADJUSTMENTS	DEBIT/	CREDITS	BALAN	CE FORV	VARD	CUR CHA	RENT	AMOUNT
952.10	1	4.60	-492.38				459	.72	3	32.99	807.3
DEMAND 18.860						со	MPAI	RE YO	OUR U	SAGE	
					PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	

Current

Last Month

Year Ago

21

31

31

2914

4017

4660

139

130

150

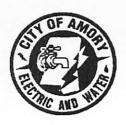
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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

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EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

Case 3:18-bk-05665 Claim 132-1

CUSTOMER ACCOUNT NO:	200919-100868
PAST DUE BALANCE:	459.72
CURRENT MONTHS CHARGE:	332.99
NET AMOUNT DUE:	807.31
PAST-DUE AFTER:	September 07, 2018
PENALTY AMOUNT:	\$0.00
DUNT DUE AFTER PAST DUE DATE:	\$807.31

This bill is now due and payable. Service may be discontinued without further notice.

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Filed 12/10/18 Desc Main Document Page 15 of

		This bill is now due and further notice.	payable. Service may be disco	ntinued without
205430-10	04911	N OF AND	Amory Water & Elec	tric
			129 Main Street North * F Amory, MS 38821	P.O. Box 266
Aug 31 2	018		Phone (662) 256-5633	
31		AND NO		
	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
				-42.07
				-42.07
	GILMORE I . BLVD I Aug 31 2	PRESENT READING	further notice. 205430-104911 GILMORE MEMORIAL HOSPITAL . BLVD HOSPITAL MAC DR S Aug 31 2018 31 PRESENT READING PREVIOUS READING	205430-104911 Amory Water & Elect GILMORE MEMORIAL HOSPITAL Aug 31 2018 Aug 31 2018 Phone (662) 256-5633 31 PRESENT READING AMOUNT USED

	AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	AMOUNT
ſ	404.42	0.00	0.00		404.42	-42.07	362.35

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	1	0	0	0	0	1.000	
Last Month	1	0	0	54800	1768		
Year Ago	1	0	0	26400	852	1	

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1105 EARL FRYE BLVD

AMORY, MS 38821

EXHIBIT B

GILMORE MEMORIAL HOSPITAL

Amory Water & Electric 129 Main Street North * P.O. Box 266

Amory, MS 38821

RETURN SERVICE REQUESTED

205430-104911 CUSTOMER ACCOUNT NO: 404.42 PAST DUE BALANCE: -42.07 CURRENT MONTHS CHARGE: NET AMOUNT DUE: 362.35 September 25, 2018 PAST-DUE AFTER: \$0.00 PENALTY AMOUNT: AMOUNT DUE AFTER PAST DUE DATE: \$362.35

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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			This bill is now due and further notice.	payable. Service may be disco	ntinued without
ACCOUNT NUMBER:	205431-10	4912	N OF AMO	Amory Water & Elec	tric
CUSTOMER NAME: SERVICE ADDRESS:		IEMORIAL HOSPITAL RL FRYE BLVD NEW		129 Main Street North * F Amory, MS 38821	P.O. Box 266
METER READING DATE:	Aug 31 20	018		Phone (662) 256-5633	
DAYS BILLED:	31		AND AND A		
SERVICE		PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31 FINAL BILL					-121.10
TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)					-121.10

AMOUNT FROM	LATE CHARGES	PAYMENTS &	OTHER	BALANCE FORWARD	CURRENT	AMOUNT
PREVIOUS BILL	ADDED	ADJUSTMENTS	DEBIT/CREDITS	(PAST DUE)	CHARGES	
899.50	0.00	0.00		899.50	-121.10	778.40

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
Current	1	0	0	0	0	
Last Month	1	0	0	61700	1990	
Year Ago	1	0	0	60500	1952	

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1105 EARL FRYE BLVD

AMORY, MS 38821

EXHIBIT B

GILMORE MEMORIAL HOSPITAL

Amory Water & Electric

129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

205431-104912 CUSTOMER ACCOUNT NO: 899.50 PAST DUE BALANCE: -121.10 CURRENT MONTHS CHARGE: NET AMOUNT DUE: 778.40 September 26, 2018 PAST-DUE AFTER: \$0.00 **PENALTY AMOUNT:** AMOUNT DUE AFTER PAST DUE DATE: \$778.40

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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This bill is now due and payable. Service may be discontinued without further notice. 205433-104913 Amory Water & Electric ACCOUNT NUMBER: 129 Main Street North * P.O. Box 266 **CUSTOMER NAME:** GILMORE MEMORIAL HOSPITAL Amory, MS 38821 SERVICE ADDRESS: 1005 BLVD DR S Aug 31 2018 Phone (662) 256-5633 METER READING DATE: DAYS BILLED: 31 PRESENT READING **PREVIOUS READING** AMOUNT USED AMOUNT SERVICE -19,431.46 Adjustment for 8 days - 8/23-8/31 FINAL BILL -19,431.46 TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	AMOUNT
161,688.04	0.00	0.00		161,688.04	-19,431.46	142,256.58

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
Current	1	0	0	0	0	
Last Month	31	1225	40	877800	28316	
Year Ago	31	1202	39	925900	29868	

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Amory Water & Electric

129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

205433-104913	CUSTOMER ACCOUNT NO:
161,688.04	PAST DUE BALANCE:
-19,431.46	CURRENT MONTHS CHARGE:
142,256.58	NET AMOUNT DUE:
September 26, 2018	PAST-DUE AFTER:
\$0.0	PENALTY AMOUNT:
\$142,256.58	AMOUNT DUE AFTER PAST DUE DATE:

This bill is now due and payable. Service may be discontinued without further notice.

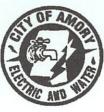
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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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ACCOUNT NUMBER:	205434-10	4914	N OF AMO	Amory Water & Elec	tric
CUSTOMER NAME: SERVICE ADDRESS:		IEMORIAL HOSPITAL /D MRI DR S		129 Main Street North * F Amory, MS 38821	.O. Box 266
METER READING DATE:	Aug 31 2	018		Phone (662) 256-5633	
DAYS BILLED:	31		AND NO		
SERVICE		PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31 FINAL BILL					-13.33
TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)					-13.33

AMOUNT FROM	LATE CHARGES	PAYMENTS &	OTHER	BALANCE FORWARD	CURRENT	AMOUNT
PREVIOUS BILL	ADDED	ADJUSTMENTS	DEBIT/CREDITS	(PAST DUE)	CHARGES	
5,887.09	0.00	0.00		5,887.09	-13.33	5,873.76

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

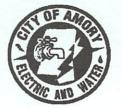
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PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	1	0	0	0	0		
Last Month	31	41680	1345	0	0		
Year Ago	31	38973	1257	0	0	0.50	

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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

	and the second
205434-104914	CUSTOMER ACCOUNT NO:
5,887.09	PAST DUE BALANCE:
-13.33	CURRENT MONTHS CHARGE:
5,873.76	NET AMOUNT DUE:
September 26, 2018	PAST-DUE AFTER:
\$0.00	PENALTY AMOUNT:
\$5,873.76	AMOUNT DUE AFTER PAST DUE DATE:

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18

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			This bill is now due and further notice.	payable. Service may be disco	ntinued without	
ACCOUNT NUMBER:	205435-10	4915	AN OF AMO	Amory Water & Elec	tric	
CUSTOMER NAME: SERVICE ADDRESS:		MEMORIAL HOSPITAL		129 Main Street North * F Amory, MS 38821	29 Main Street North * P.O. Box 266 mory, MS 38821	
METER READING DATE:	Aug 31 2	018		Phone (662) 256-5633		
DAYS BILLED:	31		AND THE			
SERVICE		PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT	
Adjustment for 8 days - 8/23-8/31 FINAL BILL TOTAL CURRENT CHARGES					-99.89 -99.89	
BALANCE FORWARD (PAST DUE)						

AMOUNT FROM	LATE CHARGES	PAYMENTS &	OTHER	BALANCE FORWARD	CURRENT	AMOUNT
PREVIOUS BILL	ADDED	ADJUSTMENTS	DEBIT/CREDITS	(PAST DUE)	CHARGES	
730.10	0.00	0.00		730.10	-99.89	630.21

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
Current	1	0	0	0	0	
Last Month	31	6202	200	0	0	1
Year Ago	31	8600	277	0	0	

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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

205435-104915	CUSTOMER ACCOUNT NO:
730.10	PAST DUE BALANCE:
-99.89	CURRENT MONTHS CHARGE:
630.21	NET AMOUNT DUE:
September 26, 2018	PAST-DUE AFTER:
\$0.00	PENALTY AMOUNT:
\$630.21	AMOUNT DUE AFTER PAST DUE DATE:

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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			This bill is now due and further notice.	payable. Service may be disco	ntinued without
ACCOUNT NUMBER:	205436-10)4916	AL OF AMO	Amory Water & Elec	tric
CUSTOMER NAME: SERVICE ADDRESS:		MEMORIAL HOSPITAL VD SPRINKLER DR S		129 Main Street North * F Amory, MS 38821	P.O. Box 266
METER READING DATE:			EL S	Phone (662) 256-5633	
DAYS BILLED:	31		AND THE		
SERVICE		PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31					-8.00
FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)					-8.00
BALANCE FORWARD (PAST DUE)					

AMOUNT FROM	LATE CHARGES	PAYMENTS &	OTHER	BALANCE FORWARD	CURRENT	AMOUNT
PREVIOUS BILL	ADDED	ADJUSTMENTS	DEBIT/CREDITS	(PAST DUE)	CHARGES	
63.00	0.00	0.00		63.00	-8.00	55.00

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
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Amory Water & Electric

129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

CUSTOMER ACCOUNT NO: 205436-104916 PAST DUE BALANCE: 63.00 CURRENT MONTHS CHARGE: -8.00 NET AMOUNT DUE: 55.00 PAST-DUE AFTER: September 26, 2018 PENALTY AMOUNT: \$0.00 AMOUNT DUE AFTER PAST DUE DATE: \$55.00

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

1105 EARL FRYE BLVD AMORY, MS 38821

GILMORE MEMORIAL HOSPITAL

EXHIBIT B

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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This bill is now due and payable. Service may be discontinued without further notice. Amory Water & Electric 205438-104917 ACCOUNT NUMBER: 129 Main Street North * P.O. Box 266 CUSTOMER NAME: GILMORE MEMORIAL HOSPITAL Amory, MS 38821 SERVICE ADDRESS: FITNESS CTR Aug 31 2018 Phone (662) 256-5633 **METER READING DATE:** DAYS BILLED: 31 **PREVIOUS READING** AMOUNT USED AMOUNT PRESENT READING SERVICE Adjustment for 8 days - 8/23-8/31 -2,315.90 FINAL BILL TOTAL CURRENT CHARGES -2,315.90 **BALANCE FORWARD (PAST DUE)**

AMOUNT FROM PREVIOUS BIL		PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	AMOUNT
19,937.54	0.00	0.00		19,937.54	-2,315.90	17,621.64

Final bill read date is 8-31-18. Account adjustments
reflect bill usage as of 8-23-18 to separate
pre and post-bankruptcy amounts due.

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PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	1	0	0	0	0	Contractor of	
Last Month	31	3435	111	427800	13800		
Year Ago	31	2589	84	410100	13229		

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Amory Water & Electric 129 Main Street North * P.O. Box 266

Amory, MS 38821

RETURN SERVICE REQUESTED

205438-104917 CUSTOMER ACCOUNT NO: 19,937.54 PAST DUE BALANCE: -2,315.90 CURRENT MONTHS CHARGE: NET AMOUNT DUE: 17,621.64 September 25, 2018 PAST-DUE AFTER: \$0.00 **PENALTY AMOUNT:** AMOUNT DUE AFTER PAST DUE DATE: \$17,621.64

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266



EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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This bill is now due and payable. Service may be discontinued without further notice. 205439-104918 Amory Water & Electric ACCOUNT NUMBER: 129 Main Street North * P.O. Box 266 CUSTOMER NAME: **GILMORE MEMORIAL HOSPITAL** Amory, MS 38821 SERVICE ADDRESS: 1005 BLVD DR S Aug 31 2018 Phone (662) 256-5633 METER READING DATE: DAYS BILLED: 31 PRESENT READING **PREVIOUS READING** AMOUNT USED AMOUNT SERVICE Adjustment for 8 days - 8/23-8/31 -33.04 FINAL BILL TOTAL CURRENT CHARGES -33.04 BALANCE FORWARD (PAST DUE)

AMOUNT FROM	LATE CHARGES	PAYMENTS &	OTHER	BALANCE FORWARD	CURRENT	AMOUNT
PREVIOUS BILL	ADDED	ADJUSTMENTS	DEBIT/CREDITS	(PAST DUE)	CHARGES	
220.48	0.00	0.00		220.48	-33.04	187.44

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
Current	1	0	0	0	0	
Last Month	31	1466	47	0	0	
Year Ago	31	1646	53	0	0	

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.

C: 49 R: 001



Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

EXHIBIT B

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

205439-104918	CUSTOMER ACCOUNT NO:		
220.48	PAST DUE BALANCE:		
-33.04	CURRENT MONTHS CHARGE:		
187.44	NET AMOUNT DUE:		
September 26, 2018	PAST-DUE AFTER:		
\$0.00	PENALTY AMOUNT:		
\$187.44	AMOUNT DUE AFTER PAST DUE DATE:		

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

112/1 25 Desc Main Document Page 23 of

a.				This bill is now due and further notice.	payable. Service may be disco	ntinued without
ACCOUNT NUMBER: CUSTOMER NAME: SERVICE ADDRESS:		04919 MEMORIAL HOSPITAL ARKING LOT LGTS		STATUF ACTOR	Amory Water & Elect 129 Main Street North * F Amory, MS 38821	and the second
METER READING DATE:					Phone (662) 256-5633	
DAYS BILLED:	31			AND ST		
SERVICE		PRESENT READING	PRI	EVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31 FINAL BILL						-31.24
TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)						-31.24

ſ	AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	AMOUNT
Γ	234.29	0.00	0.00		234.29	-31.24	203.05

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
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PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.

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Amory Water & Electric 129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

205440-104919	CUSTOMER ACCOUNT NO:		
234.29	PAST DUE BALANCE:		
-31.24	CURRENT MONTHS CHARGE:		
203.05	NET AMOUNT DUE:		
September 26, 2018	PAST-DUE AFTER:		
\$0.00	PENALTY AMOUNT:		
\$203.05	AMOUNT DUE AFTER PAST DUE DATE:		

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document

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This bill is now due and payable. Service may be discontinued without further notice. Amory Water & Electric ACCOUNT NUMBER: 205443-104920 129 Main Street North * P.O. Box 266 CUSTOMER NAME: GILMORE MEMORIAL HOSPITAL Amory, MS 38821 SERVICE ADDRESS: 801 EARL FRYE BLVD FIRE Phone (662) 256-5633 METER READING DATE: DAYS BILLED: 31 **PREVIOUS READING** AMOUNT USED AMOUNT SERVICE PRESENT READING Adjustment for 8 days - 8/23-8/31 -13.33 **FINAL BILL** TOTAL CURRENT CHARGES -13.33 BALANCE FORWARD (PAST DUE)

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	AMOUNT
100.00	0.00	0.00		100.00	-13.33	86.67

Final bill read date is 8-31-18. Account adjustments reflect bill usage as of 8-23-18 to separate pre and post-bankruptcy amounts due.

COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.	
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PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.

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Amory Water & Electric

129 Main Street North * P.O. Box 266 Amory, MS 38821

RETURN SERVICE REQUESTED

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GILMORE MEMORIAL HOSPITAL 1105 EARL FRYE BLVD AMORY, MS 38821

205443-104920 CUSTOMER ACCOUNT NO: 100.00 PAST DUE BALANCE: CURRENT MONTHS CHARGE: -13.33 NET AMOUNT DUE: 86.67 September 26, 2018 PAST-DUE AFTER: PENALTY AMOUNT: \$0.00 AMOUNT DUE AFTER PAST DUE DATE: \$86.67

This bill is now due and payable. Service may be discontinued without further notice.

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Amory Water & Electric Department P.O. Box 266 Amory MS 38821-0266

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Case 3:18-bk-05665 Claim 132-1 Filed 12/10/18 Desc Main Document Page 25 of



MIDDLE DISTRICT OF TENNESSEE Claims Register

3:18-bk-05665 Curae Health Inc.

Judge: Charles M Walker	Chapter: 11							
Office: Nashville	Last Date to fi	le claims: 01/21/2019						
Trustee:	Last Date to file (Govt):							
<i>Creditor:</i> (6801319)	Claim No: 132	Status:						
City of Amory, Mississippi	Original Filed	Filed by: CR						

City of Amory, Mississipp c/o Linda W. Knight Suite 1700 150 Third Ave South Nashville, TN 37201 *Original Filed Date*: 12/10/2018 *Original Entered Date*: 12/10/2018 Status: Filed by: CR Entered by: LINDA W. KNIGHT Modified:

Amount claimed: \$177771.55

History:

Details <u>132-</u> 12/10/2018 Claim #132 filed by City of Amory, Mississippi, Amount claimed: \$177771.55 <u>1</u> (KNIGHT, LINDA)

Description: (132-1) Utility services to Gilmore Medical Center *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* \$177771.55

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		