

**Fill in this information to identify the case:**

Debtor 1 Curae Health, Inc., et. al.

Debtor 2  
(Spouse, if filing) \_\_\_\_\_

United States 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?	<u>City of Amory, Mississippi</u> Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor <u>Amory Water &amp; Electric</u>		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>		<b>Where should payments to the creditor be sent? (if different)</b>
	<u>Ms. Linda W. Knight</u> Name <u>Suite 1700, 150 Third Ave South</u> Number Street <u>Nashville</u> <u>TN</u> <u>37201</u> City State ZIP Code Contact phone <u>615-244-4994</u> Contact email <u>lknight@gsrcm.com</u>		<u>Mr. Mike King/City of Amory Utilities</u> Name <u>PO Box 266</u> Number Street <u>Amory</u> <u>MS</u> <u>38821</u> City State ZIP Code Contact phone <u>662-256-5633</u> Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____			
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____		Filed on _____ MM / DD / YYYY
5. Do you know if anyone else has filed a proof of claim for this claim?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Who made the earlier filing? <u>I know no one else has</u> filed out a proof of claim		

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

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

\*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).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.

Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).

Limit disclosing information that is entitled to privacy, such as 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 *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
☐ Motor vehicle  
☐ Other. Describe: \_\_\_\_\_

**Basis for perfection:**

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ \_\_\_\_\_

Amount of the claim that is secured: \$ \_\_\_\_\_

Amount of the claim that is unsecured: \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ \_\_\_\_\_

Annual Interest Rate (when case was filed) \_\_\_\_\_ %

- ☐ Fixed  
☐ Variable

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

11. Is this claim subject to a right of setoff? ☒ No  
☐ Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

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 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 12/10/2018  
MM / DD / YYYY

/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, Robinson & Martin, PLLC		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	Suite 1700, 150 Third Ave South		
	Number	Street	
	Nashville	TN	37201
	City	State	ZIP Code
Contact phone	615-244-4994	Email	lknight@gsrcm.com

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 & Adjustments (extrapolating backward from meter reading date to petition date)	Net Amount Due
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**

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

<b>ACCOUNT NUMBER:</b>	200897-100849
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	404 9TH FAMILY MED AVE S
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
WATER (ONE UNIT = 100 GALLONS)	14778	14694	84	29.40
SEWER (ONE UNIT = 100 GALLONS)			84	29.40
CLASS 62 - 4 YARD CONTAINER 1x SANITATION RATE				43.40
OUTDOOR LIGHT (1)				26.04
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				1150.12
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
3,480.54	34.36	-1,785.33		1,695.21	1,150.12	2,879.69

DEMAND 1.148

## COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	21	230	11	8400	400		
Last Month	31	340	11	12300	397		
Year Ago	31	365	12	12000	387		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

## EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

|||||

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



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

<b>ACCOUNT NUMBER:</b>	200907-100859
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	OLD GI CLINIC STE 3
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
ELECTRIC (KILOWATT HOURS)	12752	11404	1348	161.37
SANITATION				21.00
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				182.37
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
526.55	13.35	-259.63		266.92	182.37	462.64

## COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	21	1348	64	0	0		
Last Month	31	1984	64	0	0		
Year Ago	31	1490	48	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02

R:050

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

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

## EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

|||||

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





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

<b>ACCOUNT NUMBER:</b>	200908-100860
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	MAC LAB AND XRAY STE 4
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
ELECTRIC (KILOWATT HOURS)	67413	65483	1930	225.16
SANITATION				21.00
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				246.16
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
799.58	14.84	-435.34		364.24	246.16	625.24

## COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	21	1930	92	0	0		
Last Month	31	2872	93	0	0		
Year Ago	31	3019	97	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02

R:050

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

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

## EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

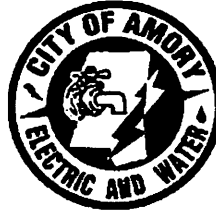
|||||

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



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

<b>ACCOUNT NUMBER:</b>	200909-100861
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	AMORY PEDIATRIC CLINIC STE
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

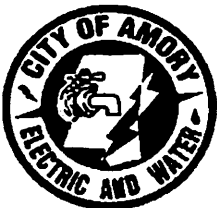
SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
ELECTRIC (KILOWATT HOURS)	70198	67332	2866	327.74
SANITATION				21.00
FINAL BILL				
TOTAL CURRENT CHARGES				348.74
BALANCE FORWARD (PAST DUE)				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
762.80	14.23	-459.49		303.31	348.74	666.28

## COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL USED	DAILY AVG. GAL		
Current	21	2866	136	0	0		
Last Month	31	2316	75	0	0		
Year Ago	31	3795	122	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

## EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

|||||

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



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

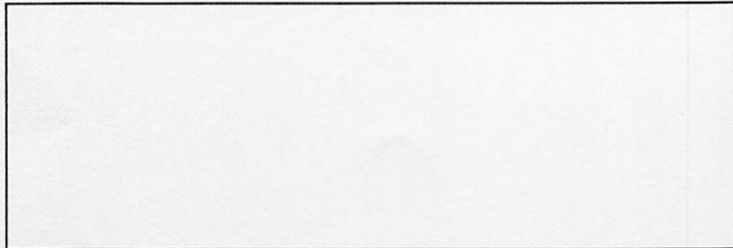
<b>ACCOUNT NUMBER:</b>	200910-100862
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	BLVD DR S EL# 701 HALL &
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
ELECTRIC (KILOWATT HOURS)	63953	60265	3688	417.82
SANITATION				21.00
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				438.82
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
1,203.81	17.48	-576.12		627.69	438.82	1,083.99



COMPARE YOUR USAGE							
PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	21	3688	176	0	0		
Last Month	31	5276	170	0	0		
Year Ago	31	4065	131	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

## EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

|||||

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



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

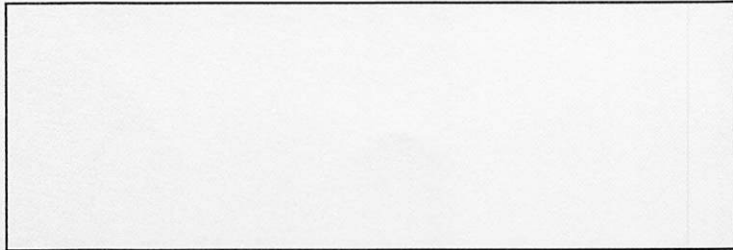
<b>ACCOUNT NUMBER:</b>	200911-100863
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	AMORY INTERNAL MEDICAL C
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
ELECTRIC (KILOWATT HOURS)	20101	15518	4583	515.90
SANITATION				21.00
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				536.90
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
1,607.66	19.17	-810.21		797.45	536.90	1,353.52



COMPARE YOUR USAGE							
PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	21	4583	218	0	0		
Last Month	31	6825	220	0	0		
Year Ago	31	5928	191	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

## EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

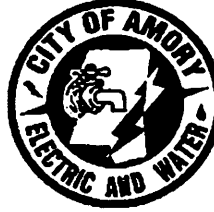
|||||

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



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

<b>ACCOUNT NUMBER:</b>	200915-100864
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	1127 EARL FRYE BLVD SYNC
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)				76.44

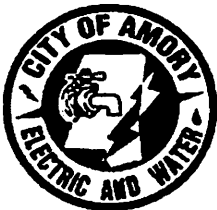
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
278.69	7.79	-122.96		155.73	76.44	239.96

DEMAND 4.087

### COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG USE	WATER GAL USED	DAILY AVG GAL		
Current	21	573	27	0	0		
Last Month	31	1243	40	0	0		
Year Ago	31	2867	92	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

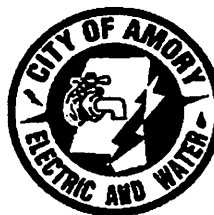


Amory Water & Electric Department  
P.O. Box 266  
Amory MS 38821-0266



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

<b>ACCOUNT NUMBER:</b>	200916-100865
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	1127 EARL FRYE BLVD WOUN
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)				281.49

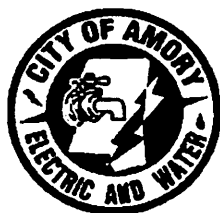
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
818.93	14.04	-415.20		403.73	281.49	699.26

DEMAND 12.852

### COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG USE	WATER GAL USED	DAILY AVG GAL		
Current	21	2444	116	0	0		
Last Month	31	3506	113	0	0		
Year Ago	31	4020	130	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

<b>CUSTOMER ACCOUNT NO:</b>	200916-100865
<b>PAST DUE BALANCE:</b>	403.73
<b>CURRENT MONTHS CHARGE:</b>	281.49
<b>NET AMOUNT DUE:</b>	699.26
<b>PAST DUE AFTER:</b>	September 07, 2018
<b>PENALTY AMOUNT:</b>	\$0.00
<b>AMOUNT DUE AFTER PAST DUE DATE:</b>	\$699.26

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

### EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

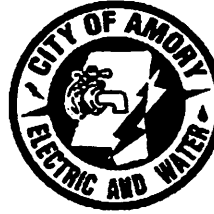
|||||

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



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

<b>ACCOUNT NUMBER:</b>	200917-100866
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	1127 EARL FRYE BLVD SUPP
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
WATER (ONE UNIT = 100 GALLONS)	11010	10986	24	12.60
SEWER (ONE UNIT = 100 GALLONS)			24	8.40
CLASS 66 - 6 YARD CONTAINER 1x SANITATION RATE				62.30
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				333.33
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
1,019.66	19.64	-531.78		487.88	333.33	840.85

DEMAND 6.640

## COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG USE	WATER GAL USED	DAILY AVG GAL		
Current	21	2157	103	2400	114		
Last Month	31	3189	103	3400	110		
Year Ago	31	3805	123	7700	248		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

<b>CUSTOMER ACCOUNT NO:</b>	200917-100866
<b>PAST DUE BALANCE:</b>	487.88
<b>CURRENT MONTHS CHARGE:</b>	333.33
<b>NET AMOUNT DUE:</b>	840.85
<b>PAST DUE AFTER:</b>	September 07, 2018
<b>PENALTY AMOUNT:</b>	\$0.00
<b>AMOUNT DUE AFTER PAST DUE DATE:</b>	\$840.85

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

## EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

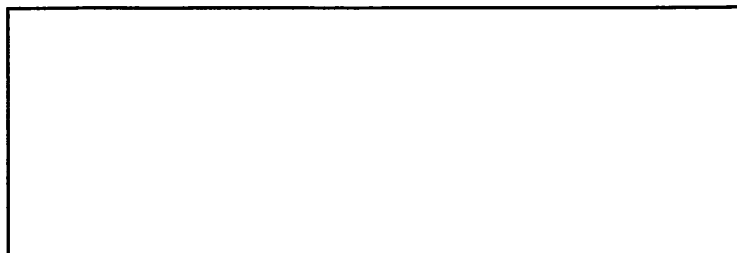
<b>ACCOUNT NUMBER:</b>	200918-100867
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	1127 EARL FRYE BLVD SUPP
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

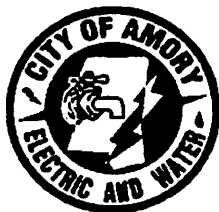
SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
ELECTRIC (KILOWATT HOURS)	13144	13058	86	23.08
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				23.08
<b>BALANCE FORWARD (PAST DUE)</b>				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
69.30	1.65	-36.32		32.98	23.08	57.71



COMPARE YOUR USAGE							
PERIOD	DAYS	ELECT KWH USED	DAILY AVG USE	WATER GAL USED	DAILY AVG GAL		
Current	21	86	4	0	0		
Last Month	31	123	4	0	0		
Year Ago	31	130	4	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

## EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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





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

<b>ACCOUNT NUMBER:</b>	200919-100868
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	1127 EARL FRYE BLVD ORTH
<b>METER READING DATE:</b>	Aug 23 2018
<b>DAYS BILLED:</b>	21



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
FINAL BILL TOTAL CURRENT CHARGES BALANCE FORWARD (PAST DUE)				332.99

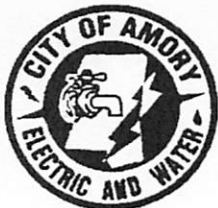
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
952.10	14.60	-492.38		459.72	332.99	807.31

DEMAND	18.860
--------	--------

### COMPARE YOUR USAGE

PERIOD	DAYS	ELECT KWH USED	DAILY AVG. USE	WATER GAL. USED	DAILY AVG. GAL.		
Current	21	2914	139	0	0		
Last Month	31	4017	130	0	0		
Year Ago	31	4660	150	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL



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

RETURN SERVICE REQUESTED

C:02  
R:050

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

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

### EXHIBIT B

|||||

GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

|||||

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



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

ACCOUNT NUMBER:	205430-104911
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	BLVD HOSPITAL MAC DR S
METER READING DATE:	Aug 31 2018
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-42.07
FINAL BILL				
TOTAL CURRENT CHARGES				-42.07
BALANCE FORWARD (PAST DUE)				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
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		
Last Month	1	0	0	54800	1768		
Year Ago	1	0	0	26400	852		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

ACCOUNT NUMBER:	205431-104912
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	1127 EARL FRYE BLVD NEW
METER READING DATE:	Aug 31 2018
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-121.10
FINAL BILL				
TOTAL CURRENT CHARGES				-121.10
BALANCE FORWARD (PAST DUE)				

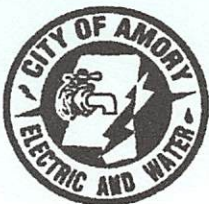
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
899.50	0.00	0.00		899.50	-121.10	778.40

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		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

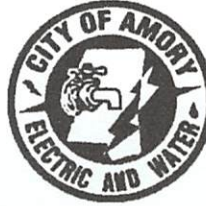


Amory Water & Electric Department  
P.O. Box 266  
Amory MS 38821-0266



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

ACCOUNT NUMBER:	205433-104913
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	1005 BLVD DR S
METER READING DATE:	Aug 31 2018
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-19,431.46
FINAL BILL				
TOTAL CURRENT CHARGES				-19,431.46
BALANCE FORWARD (PAST DUE)				

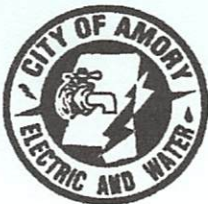
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
161,688.04	0.00	0.00		161,688.04	-19,431.46	142,256.58

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		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

CUSTOMER ACCOUNT NO:	205433-104913
PAST DUE BALANCE:	161,688.04
CURRENT MONTHS CHARGE:	-19,431.46
NET AMOUNT DUE:	142,256.58
PAST-DUE AFTER:	September 26, 2018
PENALTY AMOUNT:	\$0.00
AMOUNT DUE AFTER PAST DUE DATE:	\$142,256.58

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821

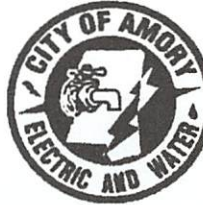


Amory Water & Electric Department  
P.O. Box 266  
Amory MS 38821-0266



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

ACCOUNT NUMBER:	205434-104914
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	1005 BLVD MRI DR S
METER READING DATE:	Aug 31 2018
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-13.33
FINAL BILL				
TOTAL CURRENT CHARGES				-13.33
BALANCE FORWARD (PAST DUE)				

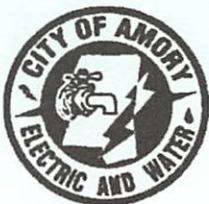
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
5,887.09	0.00	0.00		5,887.09	-13.33	5,873.76

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

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		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

ACCOUNT NUMBER:	205435-104915
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	1005 BLVD TRUCK SHE DR S
METER READING DATE:	Aug 31 2018
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-99.89
FINAL BILL				
TOTAL CURRENT CHARGES				-99.89
BALANCE FORWARD (PAST DUE)				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
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		
Year Ago	31	8600	277	0	0		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

ACCOUNT NUMBER:	205436-104916
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	1005 BLVD SPRINKLER DR S
METER READING DATE:	
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-8.00
FINAL BILL				
TOTAL CURRENT CHARGES				-8.00
BALANCE FORWARD (PAST DUE)				

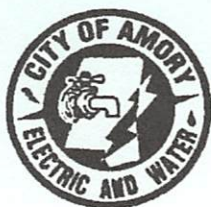
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
63.00	0.00	0.00		63.00	-8.00	55.00

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.		
	0						

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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.

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

ACCOUNT NUMBER:	205438-104917
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	FITNESS CTR
METER READING DATE:	Aug 31 2018
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-2,315.90
FINAL BILL				
TOTAL CURRENT CHARGES				-2,315.90
BALANCE FORWARD (PAST DUE)				

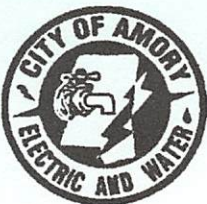
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
19,937.54	0.00	0.00		19,937.54	-2,315.90	17,621.64

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.

### 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	3435	111	427800	13800		
Year Ago	31	2589	84	410100	13229		

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

<b>ACCOUNT NUMBER:</b>	205439-104918
<b>CUSTOMER NAME:</b>	GILMORE MEMORIAL HOSPITAL
<b>SERVICE ADDRESS:</b>	1005 BLVD DR S
<b>METER READING DATE:</b>	Aug 31 2018
<b>DAYS BILLED:</b>	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-33.04
<b>FINAL BILL</b>				
<b>TOTAL CURRENT CHARGES</b>				-33.04
<b>BALANCE FORWARD (PAST DUE)</b>				

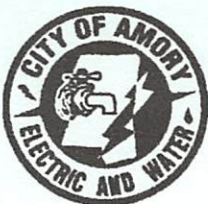
AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
220.48	0.00	0.00		220.48	-33.04	187.44

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.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

ACCOUNT NUMBER:	205440-104919
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	NEW PARKING LOT LGTS
METER READING DATE:	
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
Adjustment for 8 days - 8/23-8/31				-31.24
FINAL BILL				
TOTAL CURRENT CHARGES				-31.24
BALANCE FORWARD (PAST DUE)				

AMOUNT FROM PREVIOUS BILL	LATE CHARGES ADDED	PAYMENTS & ADJUSTMENTS	OTHER DEBIT/CREDITS	BALANCE FORWARD (PAST DUE)	CURRENT CHARGES	NET AMOUNT DUE
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.		
	0						

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

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

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

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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



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

ACCOUNT NUMBER:	205443-104920
CUSTOMER NAME:	GILMORE MEMORIAL HOSPITAL
SERVICE ADDRESS:	801 EARL FRYE BLVD FIRE
METER READING DATE:	
DAYS BILLED:	31



Amory Water & Electric  
129 Main Street North \* P.O. Box 266  
Amory, MS 38821  
Phone (662) 256-5633

SERVICE	PRESENT READING	PREVIOUS READING	AMOUNT USED	AMOUNT
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	NET AMOUNT DUE
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.		
	0						

PLEASE DETACH AND RETURN LOWER PORTION IF PAYING BY MAIL.



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

C: 49  
R: 001

CUSTOMER ACCOUNT NO:	205443-104920
PAST DUE BALANCE:	100.00
CURRENT MONTHS CHARGE:	-13.33
NET AMOUNT DUE:	86.67
PAST-DUE AFTER:	September 26, 2018
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.

### EXHIBIT B



GILMORE MEMORIAL HOSPITAL  
1105 EARL FRYE BLVD  
AMORY, MS 38821



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

# 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:** 01/21/2019  
**Trustee:**      **Last Date to file (Govt):**

<i>Creditor:</i> (6801319)	<b>Claim No:</b> 132	<i>Status:</i>
City of Amory, Mississippi	<i>Original Filed</i>	<i>Filed by:</i> CR
c/o Linda W. Knight	<i>Date:</i> 12/10/2018	<i>Entered by:</i> LINDA W.
Suite 1700	<i>Original Entered</i>	KNIGHT
150 Third Ave South	<i>Date:</i> 12/10/2018	<i>Modified:</i>
Nashville, TN 37201		

Amount claimed: \$177771.55

*History:*

[Details](#)    [132-](#) 12/10/2018 Claim #132 filed by City of Amory, Mississippi, Amount claimed: \$177771.55  
                   [1](#) (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

<b>Total Amount Claimed*</b>	\$177771.55
<b>Total Amount Allowed*</b>	

\*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		