

Fill in this information to identify the case:

Debtor 1 CURAE HEALTH, INC.. AMORY REGIONAL MEDICAL C
 Debtor 2 AMORY REGIONAL PHYSICIANS LLC
 (Spouse, if filing)
 United States Bankruptcy Court for the: Middle District of Tennessee
 Case number 18-05665 18-05675 18-05680

FILED

OCT 19 2018

**U.S. BANKRUPTCY COURT
MIDDLE DISTRICT OF TN**

Official Form 410

Proof of Claim

04/16

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

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

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

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

Part 1: Identify the Claim

1. Who is the current creditor?	<u>MONROE COUNTY TAX COLLECTOR</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>MONROE COUNTY TAX COLLECTOR</u> Name <u>PO BOX 684</u> Number Street <u>ABERDEEN MS 39730</u> City State ZIP Code Contact phone <u>662-369-6484</u> Contact email <u>sclark@monroems.com</u>	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone Contact email
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

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

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

7. How much is the claim? \$ 168,520.66 Does this amount include interest or other charges?
☐ No
☒ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

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.

PERSONAL PROPERTY TAXES

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).

☐ 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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ 168,520.66

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

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

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

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

Check the appropriate box:

☐ I am the creditor.

☒ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

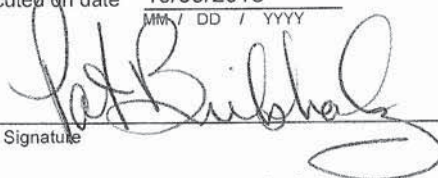
I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

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

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

Executed on date 10/09/2018

MM / DD / YYYY



Signature

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

Name PAT BIRKHOLZ

First name

Middle name

Last name

Title TAX COLLECTOR

Company MONROE COUNTY TAX COLLECTOR

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

Address PO BOX 684

Number

Street

ABERDEEN

City

MS

39730

State

ZIP Code

Contact phone 662-369-6484

Email pbirkholz@monroems.com

PPMCOL1 COLLECTOR COLLECT PERSONAL PROPERTY - PAYOFF PPWCOL11/M6
Drawer 7 Total Due Prior Paid Balance Due
User ID SMC Taxes.... 3949.18 3949.18
Mail Flag N Interest.. 276.45
Posting 10 8 2018 Postage ..
Interest 8 1 2018 Sheriff ..
Agency ...
Print Fee.
Justice Ct
Circuit Ct
TOTAL... 3949.18
Check No _____ Cash <F5> _____
CrCard No _____ Check <F6> _____
Paid By 1 MAC X-RAY/LAB #6454-781 Credit<F7> _____
2 _____ Change Due 4225.63-
3 _____ Total Paid
Op: 2-View Rect 3-Change Rect 4-Remove 9-View Prior Payments
Op Name Year PPIN Year Entry Amount Due En
MAC X-RAY/LAB #6454-781 2017 4645 2017 4225.63
1 Receipts Selected for Collection Interest Override N
F1-COLLECT & PRINT F2-COLLECT F4-DEFAULTS F11-ALT VIEW F24-EXIT
YOU CANNOT COLLECT LESS THAN IS DUE

total due
as of 8/1/18
4225.63

PPIN - 4645 10/ 8/2018 BUSINESS PERSONAL PROPERTY CARD: 1 OF 1

DBA: MAC X-RAY/LAB #6454-781, 14400 METCALF AVENUE, OVERLAND PARK, KS 66223- BUSINESS PHONE:

LOCATION: 1107 EARL FRYE BOULEVARD, AMORY OLD PARCEL: MAP/PARCEL NUMBER: 4645

COUNTY: MONROE BUSINESS TYPE: 0000 TAX DISTRICT: 2220 OFFICIAL: Rendrcv: 3/31/2017

BUILDING AREA: 000000 OLD/NEW BUSINESS: 00/00/2014 BUSINESS OPEN/CLOSED: 00/00/0000 APPR DATE: / /

TRANSACTION - COST BOOK - MANUFACTURER - MODEL - DESCRIPTION YEAR QUANTITY PURCH. # TYP G L A DEP - INDUSTRY - VALUE C O LEASED L CO. ID

1)	0135943,INVENTO,INVENTORY	1	EA	A	35754	4	100	220	1.026	35754	4
2)	0146283,ASSET--2013-HOSPITAL EQUIPMENT	1	EA	A	6267	4	67	220	1.089	4307	1
3)	0146284,ASSET--2011-HOSPITAL EQUIPMENT	1	EA	A	16188	6	49	220	1.088	8638	1
4)	0146285,ASSET--2010-HOSPITAL EQUIPMENT	1	EA	A	11184	7	39	220	1.088	4746	1
5)	0146286,ASSET--2007-HOSPITAL EQUIPMENT	1	EA	A	6331	10	20	220	1.200	1519	1
6)	0146287,ASSET--2006-HOSPITAL EQUIPMENT	1	EA	A	879	11	20	220	1.269	223	1
7)	0146288,ASSET--2013-F&F	1	EA	A	29313	4	67	300	1.027	20170	1
8)	0146289,ASSET--2011-F&F	1	EA	A	1313	6	49	300	1.078	693	1
9)	0146290,ASSET--2010-F&F	1	EA	A	250	7	39	300	1.075	105	1
10)	0146291,ASSET--2008-F&F	1	EA	A	22623	9	24	300	1.142	6200	1
11)	0146292,ASSET--2007-F&F	1	EA	A	13384	10	20	300	1.179	3156	1
12)	0146293,ASSET--2016-COMPUTER EQUIPMENT	1	EA	A	315	1	87	301	.999	273	1
13)	0146294,ASSET--2015-COMPUTER EQUIPMENT	1	EA	A	1725	2	73	301	1.012	1274	1
14)	0146295,ASSET--2013-COMPUTER EQUIPMENT	1	EA	A	143537	4	41	301	1.027	60439	1
15)	0146296,ASSET--2011-COMPUTER EQUIPMENT	1	EA	A	28317	6	20	301	1.078	6105	1
16)	0146297,ASSET--2010-COMPUTER EQUIPMENT	1	EA	A	46081	7	20	301	1.075	9907	1
17)	0146298,ASSET--2009-COMPUTER EQUIPMENT	1	EA	A	3745	8	20	301	1.105	828	1
18)	0146299,ASSET--2008-COMPUTER EQUIPMENT	1	EA	A	34093	9	20	301	1.142	7787	1
19)	0146300,ASSET--2007-COMPUTER EQUIPMENT	1	EA	A	25699	10	20	301	1.179	6060	1
20)	0146301,ASSET--2006-COMPUTER EQUIPMENT	1	EA	A	3624	11	20	301	1.228	890	1
21)	0146302,ASSET--2014-COMPUTER EQUIPMENT	1	EA	A	1345	3	57	301	1.024	785	1

YEAR	FURNITURE	MACHINERY	LEASED INVENTORIES	BANKS	MONEY/DEBT	MISC.	TOTAL
Appraised Values	144105		35754				179859
YEAR 1	2017		35754				179859

PPMCOL1 COLLECTOR COLLECT PERSONAL PROPERTY - PAYOFF PPWCOL11/M6
Drawer 7 Total Due Prior Paid Balance Due
User ID SMC 153546.76 153546.76
Mail Flag N Taxes.... 10748.27
Posting 10 8 2018 Interest..
Interest 8 1 2018 Postage..
Sheriff..
Agency..
Print Fee..
Justice Ct
Circuit Ct

total due as
of 8/1/18

Check No _____ TOTAL... 153546.76 164295.03
CrCard No _____ Cash <F5> _____
Check <F6> _____
Credit <F7> _____
Change Due 164295.03-
Total Paid

Paid By 1 MERIT HEALTH GILMORE MEMORIAL- #1454
2
3

Op: 2-View Rect 3-Change Rect 4-Remove 9-View Prior Payments
Op Name Year PPIN Year Entry Amount Due En
MERIT HEALTH GILMORE MEMORIAL- 2017 2958 2017 164295.03

1 Receipts Selected for Collection Interest Override N
F1-COLLECT & PRINT F2-COLLECT F4-DEFAULTS F11-ALT VIEW F24-EXIT
YOU CANNOT COLLECT LESS THAN IS DUE

DEA: MERIT HEALTH GILMORE MEMORIAL- #1454, 14400 METCALF, OVERLAND PARK, KS 66223- BUSINESS PHONE:

LOCATION: 1105 EARL FRYE BOULEVARD, AMORY OLD PARCEL: MAP/PARCEL NUMBER: 2958

COUNTY: Monroe BUSINESS TYPE: 0742 TAX DISTRICT: 220 OFFICIAL: MRS UPTON Rendrv: 4/1/2017

BUILDING AREA: 000000 OLD/NEW BUSINESS: 00/00/0000 BUSINESS OPEN/CLOSED: 00/00/0000 APPR DATE: 5/25/2016 MH

TRANSACTION - COST BOOK - MANUFACTURER - MODEL - DESCRIPTION YEAR QUANTITY L A G DEP - INDUSTRY - VALUE C

TRANSACTION	COST BOOK	MANUFACTURER	MODEL	DESCRIPTION	YEAR	QUANTITY	L	A	G	DEP	INDUSTRY	VALUE	C
					PRCH.	#	TYP	Costs	E	ID	MULT.	L CO.	ID
1) 0099264, INVENTO, INVENTORY					2009	1	EA A	1187395	100			1187395	4
2) 0106235, ASSET-, 1105 EARL FRYE BLVD MEDICAL DEVICES					2009	3	EA A	Leased: MEDELA, INC				3271	
3) 0123343, ASSET-, (1105 EARL FRYE BLVD) COMPUTERS					2011	1	EA A	Leased: WINTHROP RESOURCES CORP				4031	
4) 0123617, ASSET-, OBSERVA					2010	1	EA A	Leased: BIOMERIEUX INC				2879	
5) 0123635, ASSET-, HP TS 9100 23" TOUCH SCREEN PC - VS663UT					2010	4	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
6) 0123636, ASSET-, CISCO FIREWALL - ASA5505					2010	1	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
7) 0123637, ASSET-, CISCO SWITCH SF300-24					2011	1	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
8) 0123638, ASSET-, MOTOROLA BSR200 CMTS					2011	1	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
9) 0123639, ASSET-, IBM SERVER 7945AC1					2011	2	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
10) 0123640, ASSET-, IBM DPS 1500VA					2011	1	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
11) 0123641, ASSET-, CISCO FIREWALL-ASA5505					2010	1	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
12) 0123642, ASSET-, ROOM CONTROL PLATFORM REV. 2.5					2010	19	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
13) 0123643, ASSET-, ROOM CONTROL PLATFORM REV 2.6					2010	8	EA A	Leased: CAREVIEW COMMUNICATIONS INC				4054	
14) 0127110, ASSET-, (1105 EARL FRYE BLVD) COMPUTERS					2012	1	EA A	Leased: WINTHROP RESOURCES CORP				4031	
15) 0128248, ASSET-, 2012-MEDICAL EQ					2012	1	EA A	44696	5	58	220	1.054	27323
16) 0128251, ASSET-, 2010-F/F					2010	1	EA A	169199	7	39	220	1.088	71794
17) 0128252, ASSET-, 2009-F/F					2009	1	EA A	635588	8	30	220	1.116	212795
18) 0128253, ASSET-, 2008-F/F					2008	1	EA A	89459	9	24	220	1.157	24841
19) 0128254, ASSET-, 2007-F/F					2007	1	EA A	166452	10	20	220	1.200	39944
20) 0128255, ASSET-, 2006-F/F					2006	1	EA A	304921	11	20	220	1.269	77389
21) 0128256, ASSET-, 2005-F/F					2005	1	EA A	204667	12	20	220	1.329	54400
22) 0128257, ASSET-, 2004-F/F					2004	1	EA A	609	13	20	220	1.417	1721
23) 0128258, ASSET-, 2002-F/F					2002	1	EA A	58564	15	20	220	1.485	17393
24) 0128259, ASSET-, 2012-COMPUTERS					2012	1	EA A	300977	5	30	301	1.051	94898
25) 0128260, ASSET-, 2011-COMPUTERS					2011	1	EA A	370601	6	20	301	1.075	74120
26) 0128261, ASSET-, 2010-COMPUTERS					2010	1	EA A	698517	7	20	301	1.105	150181
27) 0128262, ASSET-, 2009-COMPUTERS					2009	1	EA A	639697	8	20	301	1.142	141373
28) 0128263, ASSET-, 2008-COMPUTERS					2008	1	EA A	327498	9	20	301	1.142	74800
29) 0128264, ASSET-, 2004-COMPUTERS					2004	1	EA A	11063	13	20	301	1.350	2987

YEAR	FURNITURE	MACHINERY	LEASED INVENTORIES	BANKS	MONEY/DEBT	MISC.	TOTAL
Appraised Values	5805672		1187395				6993067
YEAR 1	2017		1187395				6993067

YEAR	FURNITURE	MACHINERY	LEASED INVENTORIES	BANKS	MONEY/DEBT	MISC.	TOTAL
YEAR 2							
YEAR 3							
YEAR 4							
YEAR 5							
YEAR 6							
YEAR 7							
YEAR 8							
YEAR 9							

DBA: MERIT HEALTH GILMORE MEMORIAL- #1454, 14400 METCALF, OVERLAND PARK, KS 66223- BUSINESS PHONE:

LOCATION: 1105 EARL FRYE BOULEVARD, AMORY OLD PARCEL: MAP/PARCEL NUMBER: 2958

COUNTY: MOJORE BUSINESS TYPE: 0742 TAX DISTRICT: 2220 OFFICIAL: MRS UFTON RENDREV: 4/ 1/2017
BUILDING AREA: 000000 OLD/NEW BUSINESS: 00/00/0000 BUSINESS OPEN/CLOSED: 00/00/0000 APPR DATE: 5/25/2016 MH

TRANSACTION - COST BOOK - MANUFACTURER - MODEL - DESCRIPTION YEAR QUANTITY PURCH. # TYP G L A

1	0128266,ASSET--	2011-MEDICAL EQ	2011	1	EA	A	69618	6	49	220	1.089	37149	1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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DBA: MERIT HEALTH GILMORE MEMORIAL- #1454, 14400 METCALF OVERLAND PARK, KS 66223- BUSINESS PHONE:

LOCATION: 1105 EARL FRYE BOULEVARD, AMORY OLD PARCEL: MAP/PARCEL NUMBER: 2958

COUNTY: Monroe BUSINESS TYPE: 0742 TAX DISTRICT: 2220 OFFICIAL: MRS UPTON APPR DATE: 5/25/2016 MH Rendrv: 4/ 1/2017
BUILDING AREA: 000000 OLD/NEW BUSINESS: 00/00/0000 BUSINESS OPEN/CLOSED: 00/00/0000

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YEAR	FURNITURE	MACHINERY	LEASED INVENTORIES	BANKS	MONEY/DEBT	MISC.	TOTAL
Appraised Values	---	---	---	---	---	---	---
YEAR 1	5805672		1187395				6993067
YEAR 2	5805672		1187395				6993067
YEAR 3							
YEAR 4							
YEAR 5							
YEAR 6							
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YEAR 8							
YEAR 9							

DBA: MERIT HEALTH GILMORE MEMORIAL -#1454, 14400 METCALF, OVERLAND PARK, KS 66223- BUSINESS PHONE:

LOCATION: 1105 EARL FRYE BOULEVARD, AMORY OLD PARCEL: MAP/PARCEL NUMBER: 2958

COUNTY: Monroe BUSINESS TYPE: 0742 TAX DISTRICT: 2220 OFFICIAL: MRS UPTON Rendrev: 4/ 1/2017
BUILDING AREA: 000000 OLD/NEW BUSINESS: 00/00/0000 BUSINESS OPEN/CLOSED: 00/00/0000 APPR DATE: 5/25/2016 MH

TRANSACTION - COST BOOK - MANUFACTURER - MODEL - DESCRIPTION YEAR QUANTITY PURCH. # TYP G A

1	0143016,ASSET--,(1105 EARL FRYE BLVD)MAILING SYSTEM-AMORY HMA 2015	EA A	Leased:PIITNEY BOWES GLOBAL FINANCIAL	22235
2	0143356,ASSET--2015-F/F	1 EA A	503056 2 84 220 1,.005 424680 1	
3	0143357,ASSET--2015-MEDICAL EQ	1 EA A	477391 2 84 220 1,.005 403013 1	
4	0143357,ASSET--2015-COMPUTERS	1 EA A	879141 2 73 301 1,.012 649474 1	
5	0143777,ASSET--,(1105 EARL FRYE BLVD)COOLERS/MERIT HEALTH GILM2014	1 EA A		22233
6	0145827,ASSET--SERVER BUNN 1.5 GAL TF	1 EA A	Leased:GRAYHAWK LEASING LLC	48333
7	0145828,ASSET--SERVER BUNN 1.5 GAL TF	1 EA A	Leased:COMMUNITY COFFEE COMPANY LLC	48333
8	0145829,ASSET--SERVER BUNN 1.5 GAL TF	1 EA A	Leased:COMMUNITY COFFEE COMPANY LLC	48333
9	0145830,ASSET--BRWN BUNN VP17-2 POUROVER 2 WARNERS	1 EA A	Leased:COMMUNITY COFFEE COMPANY LLC	48333
10	0145831,ASSET--BRWN BUNN VP17-1 POUROVER 1 WARNERS	1 EA A	Leased:COMMUNITY COFFEE COMPANY LLC	48333
11	0145833,ASSET--BRWN BUNN VP17-2 POUROVER 2 WARNERS	1 EA A	Leased:COMMUNITY COFFEE COMPANY LLC	48333
12	0146099,ASSET--ROOM CONTROL PLATFORM REV 2.5	1 EA A	Leased:COMMUNITY COFFEE COMPANY LLC	48333
13	0146107,ASSET--WATER COOLER-INTERNAL, MEDICINE-GILMORE	1 EA A	Leased:CAREVIEW COMMUNICATIONS INC	40505
14	0146108,ASSET--WATER COOLER-LAB & X-RAY -GILMORE	1 EA A	Leased:CRYSTAL SPRINGS WATER OF MS	11333
15	0146109,ASSET--WATER COOLER-GILMORE TRUCK SHED	1 EA A	Leased:CRYSTAL SPRINGS WATER OF MS	11333
16	0146169,ASSET--ABBOT PLUM A-INUSION PUMP	1 EA A	Leased:HILL-ROM COMPANY INC	46004
17	0146236,ASSET--HC LOCKING DRAWER (X8) CENT	1 EA A	Leased:CHS PSC LEASING INC	46004
18	0146237,ASSET--12 LOCK LIDDED DRAWER (X1) HC LOCKING DRAWER	1 EA A	Leased:CHS PSC LEASING INC	46004
19	0146238,ASSET--HC LOCKING DRAWER (X6) ED	1 EA A	Leased:CHS PSC LEASING INC	46004
20	0146239,ASSET--HC LOCKING DRAWER (X6) ICU	1 EA A	Leased:CHS PSC LEASING INC	46004
21	0146240,ASSET--HC LOCKING DRAWER (X6) LDR	1 EA A	Leased:CHS PSC LEASING INC	46004
22	0146241,ASSET--HC LOCKING DRAWER (X6) WEST	1 EA A	Leased:CHS PSC LEASING INC	46004
23	0146242,ASSET--HC LOCKING DRAWER (X4) NIC	1 EA A	Leased:CHS PSC LEASING INC	46004
24	0146243,ASSET--HC LOCKING DRAWER (X4) OPS	1 EA A	Leased:CHS PSC LEASING INC	46004
25	0146244,ASSET--HC LOCKING DRAWER (X4) RESP	1 EA A	Leased:CHS PSC LEASING INC	46004
26	0146245,ASSET--HC LOCKING DRAWER (X8) CEKT	1 EA A	Leased:CHS PSC LEASING INC	46004
27	0146470,ASSET--(1105 EARL FRYE BLVD)HBO CHAMBER/ MERIT HEALTH2007	1 EA A	Leased:DIVERSIFIED CLINICAL SERVICES	40505
28	0146471,ASSET--(1105 EARL FRYE BLVD)HBO CHAMBER/ MERIT HEALTH2007	1 EA A	Leased:DIVERSIFIED CLINICAL SERVICES	40505
29	0146472,ASSET--(1105 EARL FRYE BLVD)527 MTI CHAIR W/S FOOT CO2011	1 EA A	Leased:DIVERSIFIED CLINICAL SERVICES	40505

DBA: MERIT HEALTH GILMORE MEMORIAL- #1454, 14400 METCALF, OVERLAND PARK, KS 66223- BUSINESS PHONE:

LOCATION: 1105 EARL FRYE BOULEVARD, AMORY OLD PARCEL: MAP/PARCEL NUMBER: 2958

COUNTY: Monroe BUSINESS TYPE: 0742 TAX DISTRICT: 2220 OFFICIAL: MRS UPTON APRR DATE: 5/25/2016 MH Rendrev: 4/ 1/2017
BUILDING AREA: 000000 OLD/NEW BUSINESS: 00/00/0000 BUSINESS OPEN/CLOSED: 00/00/0000

TRANSACTION	COST BOOK	MANUFACTURER	MODEL	DESCRIPTION	YEAR	QUANTITY	L	A	DEP	INDUSTRY	VALUE	C
						#	TYP	G	E	ID	MULT.	LEASED
1	0146473,ASSET--	(1105 EARL FRYE BLVD)	527 MTI CHAIR W/S FOOT	C02011	2016	1	EA	A	Leased:DIVERSIFIED CLINICAL SERVICES			4052
2	0146474,ASSET--	(1105 EARL FRYE BLVD)	527W MTI CHAIR W/S FOOT	C2011	2016	1	EA	A	Leased:DIVERSIFIED CLINICAL SERVICES			4052
3	0146475,ASSET--	(1105 EARL FRYE BLVD)	527W MTI CHAIR W/S FOOT	C2011	2016	1	EA	A	Leased:DIVERSIFIED CLINICAL SERVICES			4052
4	0146476,ASSET--	(1105 EARL FRYE BLVD)	BLITEBOOK 840 GL:T, MAZUL2015		2016	1	EA	A	Leased:DIVERSIFIED CLINICAL SERVICES			4052
5	0146477,ASSET--	(1105 EARL FRYE BLVD)	HP BLITEBOOK 840 G3 DCG612016		2016	1	EA	A	Leased:DIVERSIFIED CLINICAL SERVICES			4052
6	0146542,ASSET--	DRINK DISPENSER-MERIT HEALTH GILMORE			2016	1	EA	A	Leased:THE COCA-COLA COMPANY			2930
7	0146543,ASSET--	DRINK DISPENSER-MERIT HEALTH GILMORE			2016	1	EA	A	Leased:THE COCA-COLA COMPANY			2930
8	0146547,ASSET--	2016-F/F			2016	1	EA	A	184943	1	92	169126
9	0146548,ASSET--	2016-MEDICAL EQ			2016	1	EA	A	159656	1	92	146002
10	0146549,ASSET--	2016-COMPUTERS			2016	1	EA	A	708570	1	87	615839

YEAR	FURNITURE	MACHINERY	LEASED INVENTORIES	BANKS	MONEY/DEBT	MISC.	TOTAL
Appraised Values	5805672		1187395				6993067
YEAR 1	2017	5805672	1187395				6993067
YEAR 2							
YEAR 3							
YEAR 4							
YEAR 5							
YEAR 6							
YEAR 7							
YEAR 8							
YEAR 9							

MIDDLE DISTRICT OF TENNESSEE

Claims Register

[3:18-bk-05675 Amory Regional Medical Center, Inc.](#)

Judge: Charles M Walker

Chapter: 11

Office: Nashville

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (6742318)
MONROE COUNTY TAX
COLLECTOR
PO BOX 684
ABERDEEN MS 39730

Claim No: 7
Original Filed
Date: 10/19/2018
Original Entered
Date: 10/19/2018

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

Amount claimed: \$168520.66

Priority claimed: \$168520.66

History:

[Details](#) [7-1](#) 10/19/2018 Claim #7 filed by MONROE COUNTY TAX COLLECTOR, Amount claimed: \$168520.66 (Intake1)

Description: (7-1) PERSONAL PROPERTY TAXES

Remarks:

Claims Register Summary

Case Name: Amory Regional Medical Center, Inc.

Case Number: 3:18-bk-05675

Chapter: 11

Date Filed: 08/24/2018

Total Number Of Claims: 1

Total Amount Claimed*	\$168520.66
Total Amount Allowed*	

*Includes general unsecured claims

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

	Claimed	Allowed
Secured		
Priority	\$168520.66	
Administrative		