

# ADMINISTRATIVE CLAIM

Pursuant to 11 U.S.C. §§503(b)(9)

**FILED**

OCT 10 2018

U.S. BANKRUPTCY COURT  
MIDDLE DISTRICT OF TN

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

Debtor 1 Clarksdale Regional Medical Center

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

United States Bankruptcy Court for the: Middle District of Tennessee

Case number 3:18-bk-05678

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>American Red Cross</u><br>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<br><input type="checkbox"/> Yes. From whom? _____   |  |
| 3. Where should notices and payments to the creditor be sent?<br><small>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</small> | <b>Where should notices to the creditor be sent?</b><br><u>Lori Polacheck, Esq., American Red Cross</u><br>Name<br><u>431 18th St. NW</u><br>Number Street<br><u>Washington DC 20006</u><br>City State ZIP Code<br>Contact phone <u>202-303-5466</u><br>Contact email <u>Lori.Polacheck@redcross.org</u> | <b>Where should payments to the creditor be sent? (if different)</b><br>Name _____<br>Number Street _____<br>City State ZIP Code _____<br>Contact phone _____<br>Contact email _____ |
|   | Uniform claim identifier for electronic payments in chapter 13 (if you use one):<br>-----  |  |
| 4. Does this claim amend one already filed?   | <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____   | Filed on _____<br>MM / DD / YYYY   |
| 5. Do you know if anyone else has filed a proof of claim for this claim?  | <input checked="" type="checkbox"/> No<br><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: 0 0 0 1

7. How much is the claim? \$ 11,660.00. 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.  
Blood products sold to debtor

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)(2) that applies.

Amount entitled to priority

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ 11,660.00

\* 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 10/5/2018  
MM / DD / YYYY

  
Signature

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

Name Lori Polacheck  
First name Middle name Last name

Title Deputy General Counsel

Company American Red Cross  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 431 18th St. NW  
Number Street  
Washington DC 20006  
City State ZIP Code

Contact phone 202-303-5466 Email Lori.Polacheck@redcross.org

503(b)(9) Claim

Northwest Mississippi Regional Medical Center  
American Red Cross Customer Number: N055B8NWMR-100001

| Invoice Number | Invoice Date | Due Date  | Invoice Total      | Balance Due        |
|----------------|--------------|-----------|--------------------|--------------------|
| 42210582       | 8/21/2018    | 9/20/2018 | \$5,612.00         | \$5,612.00         |
| 42208612       | 8/14/2018    | 9/13/2018 | \$6,048.00         | \$6,048.00         |
|                |              |           | <b>TOTAL CLAIM</b> | <b>\$11,660.00</b> |

# AMERICAN RED CROSS

REMIT TO:  
AMERICAN RED CROSS  
PO BOX 730040  
DALLAS, TX 75373-0040

| INVOICE SUMMARY ACTIVITY BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                         | 42210582              |
| CUSTOMER NUMBER:                        | N055B8NWMMR-100001    |
| PAYMENT TERMS:                          | NET 30                |
| ARC FEDERAL TAX ID:                     | 53-0196605            |
| A/R PHONE NUMBER:                       | 888-316-4695          |
| SELLING UNIT:                           | BD08-055-Arkansas Rgn |
| PURCHASE ORDER NUMBER:                  |                       |
| INVOICE DATE:                           | 21-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER  
1970 HOSPITAL DRIVE  
CLARKSDALE, MS 38614

MESSAGE:

## SUMMARY OF ACTIVITY BY PRODUCT FOR CURRENT BILLING PERIOD

| SEQ NO   | PRODUCT      | DESCRIPTION                                      | QUANTITY |          | DEBIT    | CREDIT | TOTAL             |
|--|--------------|--|----------|----------|----------|--------|-------------------|
|  |              |  | SHIPPED  | RETURNED |          |        |                   |
| 00001  | N05587100    | ZIKA NEG   | 23       | 0        | 0.00     | 0.00   | 0.00              |
| 00002  | N05588801    | Anti-CMV negative                                | 1        | 0        | 0.00     | 0.00   | 0.00              |
| 00003  | N055A8B      | SHP-Scheduled                                    | 5        | 0        | 0.00     | 0.00   | 0.00              |
| 00004  | N055E0336V00 | Red Cells AS-1 500mL LeuRed                      | 13       | 0        | 2,743.00 | 0.00   | 2,743.00          |
| 00005  | N055E0685V00 | Red Cells Aph AS-3 LeuRed Cnt1                   | 5        | 0        | 1,055.00 | 0.00   | 1,055.00          |
| 00006  | N055E0686V00 | Red Cells Aph AS-3 LeuRed Cnt2                   | 3        | 0        | 633.00   | 0.00   | 633.00            |
| 00007  | N055E3087V00 | Platelets Aph ACD-A LeuRed Cnt1                  | 1        | 0        | 510.00   | 0.00   | 510.00            |
| 00008  | N055E3088V00 | Platelets Aph ACD-A LeuRed Cnt2                  | 1        | 0        | 510.00   | 0.00   | 510.00            |
| 00009  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell                | 21       | 0        | 147.00   | 0.00   | 147.00            |
| 00010  | N055ZIKASDP  | ZIKA Cost Recovery-Single Donor Platelet         | 2        | 0        | 14.00    | 0.00   | 14.00             |
| 00011  |              | Accepted forms of payment are check, wire or ACH |          |          |          |        |                   |
| <b>BALANCE DUE ON THIS INVOICE:</b>  |              |  |          |          |          |        | <b>\$5,612.00</b> |
| QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org |              |  |          |          |          |        |                   |

# AMERICAN RED CROSS

| DETAILED INVOICE BY SHIPMENT BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                             | 42210582              |
| CUSTOMER NUMBER:                            | N055B8NWMR-100001     |
| SELLING UNIT:                               | BD08-055-Arkansas Rgn |
| INVOICE DATE:                               | 21-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER

| SEQ NO | PRODUCT      | DESCRIPTION                              | WBN/DIN          | QUANTITY<br>SHP/RTN | UNIT PRICE | TOTAL    |
|--------|--------------|--|------------------|---------------------|------------|----------|
| 00012  | Order/PO No: | S0935007023846 Shipment Date: 08-13-2018 |                  |                     | Total:     | 517.00   |
| 00013  | N055A8B      | SHP-Scheduled                            | SF0935007023846  | 1                   | 0.00       | 0.00     |
| 00014  | N05587100    | ZIKA NEG                                 | W202418878707004 | 1                   | 0.00       | 0.00     |
| 00015  | N055ZIKASDP  | ZIKA Cost Recovery-Single Donor Platelet | W202418878707004 | 1                   | 7.00       | 7.00     |
| 00016  | N055E3088V00 | Platelets Aph ACD-A LeuRed Cnt2          | W202418878707004 | 1                   | 510.00     | 510.00   |
| 00017  |              |  |                  |                     |            |          |
| 00018  | Order/PO No: | S0935007024682 Shipment Date: 08-13-2018 |                  |                     | Total:     | 1,308.00 |
| 00019  | N055A8B      | SHP-Scheduled                            | SF0935007024682  | 1                   | 0.00       | 0.00     |
| 00020  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111867944100W | 1                   | 7.00       | 7.00     |
| 00021  | N05587100    | ZIKA NEG                                 | W20111867944100W | 1                   | 0.00       | 0.00     |
| 00022  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111867944100W | 1                   | 211.00     | 211.00   |
| 00023  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111869843700D | 1                   | 211.00     | 211.00   |
| 00024  | N05587100    | ZIKA NEG                                 | W20111869843700D | 1                   | 0.00       | 0.00     |
| 00025  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111869843700D | 1                   | 7.00       | 7.00     |
| 00026  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111870626000S | 1                   | 7.00       | 7.00     |
| 00027  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111870626000S | 1                   | 211.00     | 211.00   |
| 00028  | N05587100    | ZIKA NEG                                 | W20111870626000S | 1                   | 0.00       | 0.00     |
| 00029  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111870626300M | 1                   | 7.00       | 7.00     |
| 00030  | N05587100    | ZIKA NEG                                 | W20111870626300M | 1                   | 0.00       | 0.00     |
| 00031  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111870626300M | 1                   | 211.00     | 211.00   |
| 00032  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111870681200X | 1                   | 7.00       | 7.00     |
| 00033  | N05587100    | ZIKA NEG                                 | W20111870681200X | 1                   | 0.00       | 0.00     |
| 00034  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111870681200X | 1                   | 211.00     | 211.00   |
| 00035  | N05587100    | ZIKA NEG                                 | W20111871622700Z | 1                   | 0.00       | 0.00     |
| 00036  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111871622700Z | 1                   | 211.00     | 211.00   |
| 00037  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111871622700Z | 1                   | 7.00       | 7.00     |
| 00038  |              |  |                  |                     |            |          |
| 00039  | Order/PO No: | S0935007040363 Shipment Date: 08-16-2018 |                  |                     | Total:     | 1,090.00 |
| 00040  | N055A8B      | SHP-Scheduled                            | SF0935007040363  | 1                   | 0.00       | 0.00     |
| 00041  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111871819400Q | 1                   | 211.00     | 211.00   |
| 00042  | N05587100    | ZIKA NEG                                 | W20111871819400Q | 1                   | 0.00       | 0.00     |
| 00043  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111871819400Q | 1                   | 7.00       | 7.00     |
| 00044  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20201844552000W | 1                   | 211.00     | 211.00   |
| 00045  | N05587100    | ZIKA NEG                                 | W20201844552000W | 1                   | 0.00       | 0.00     |

BALANCE DUE ON THIS INVOICE: CONTINUED...

QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org

# AMERICAN RED CROSS

| DETAILED INVOICE BY SHIPMENT BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                             | 42210582              |
| CUSTOMER NUMBER:                            | N055B8NWMR-100001     |
| SELLING UNIT:                               | BD08-055-Arkansas Rgn |
| INVOICE DATE:                               | 21-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER

| SEQ NO | PRODUCT      | DESCRIPTION                              | WBN/DIN          | QUANTITY SHP/RTN | UNIT PRICE | TOTAL    |
|--------|--------------|--|------------------|------------------|------------|----------|
| 00046  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20201844552000W | 1                | 7.00       | 7.00     |
| 00047  | N05587100    | ZIKA NEG                                 | W202418695660003 | 1                | 0.00       | 0.00     |
| 00048  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W202418695660003 | 1                | 7.00       | 7.00     |
| 00049  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W202418695660003 | 1                | 211.00     | 211.00   |
| 00050  | N05587100    | ZIKA NEG                                 | W20241869566400W | 1                | 0.00       | 0.00     |
| 00051  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241869566400W | 1                | 211.00     | 211.00   |
| 00052  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241869566400W | 1                | 7.00       | 7.00     |
| 00053  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20551830607300T | 1                | 7.00       | 7.00     |
| 00054  | N05587100    | ZIKA NEG                                 | W20551830607300T | 1                | 0.00       | 0.00     |
| 00055  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20551830607300T | 1                | 211.00     | 211.00   |
| 00056  |              |  |                  |                  |            |          |
| 00057  | Order/PO No: | S0935007041433 Shipment Date: 08-17-2018 |                  |                  | Total:     | 517.00   |
| 00058  | N055A8B      | SHP-Scheduled                            | SF0935007041433  | 1                | 0.00       | 0.00     |
| 00059  | N055ZIKASDP  | ZIKA Cost Recovery-Single Donor Platelet | W20111886421900S | 1                | 7.00       | 7.00     |
| 00060  | N05588801    | Anti-CMV negative                        | W20111886421900S | 1                | 0.00       | 0.00     |
| 00061  | N055E3087V00 | Platelets Aph ACD-A LeuRed Cnt1          | W20111886421900S | 1                | 510.00     | 510.00   |
| 00062  | N05587100    | ZIKA NEG                                 | W20111886421900S | 1                | 0.00       | 0.00     |
| 00063  |              |  |                  |                  |            |          |
| 00064  | Order/PO No: | S0935007041593 Shipment Date: 08-17-2018 |                  |                  | Total:     | 2,180.00 |
| 00065  | N055A8B      | SHP-Scheduled                            | SF0935007041593  | 1                | 0.00       | 0.00     |
| 00066  | N05587100    | ZIKA NEG                                 | W201118704364007 | 1                | 0.00       | 0.00     |
| 00067  | N055E0685V00 | Red Cells Aph AS-3 LeuRed Cnt1           | W201118704364007 | 1                | 211.00     | 211.00   |
| 00068  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W201118704364007 | 1                | 7.00       | 7.00     |
| 00069  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111870437900U | 1                | 7.00       | 7.00     |
| 00070  | N055E0685V00 | Red Cells Aph AS-3 LeuRed Cnt1           | W20111870437900U | 1                | 211.00     | 211.00   |
| 00071  | N05587100    | ZIKA NEG                                 | W20111870437900U | 1                | 0.00       | 0.00     |
| 00072  | N055E0685V00 | Red Cells Aph AS-3 LeuRed Cnt1           | W20111870438600W | 1                | 211.00     | 211.00   |
| 00073  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111870438600W | 1                | 7.00       | 7.00     |
| 00074  | N05587100    | ZIKA NEG                                 | W20111870438600W | 1                | 0.00       | 0.00     |
| 00075  | N055E0686V00 | Red Cells Aph AS-3 LeuRed Cnt2           | W20241865270700X | 1                | 211.00     | 211.00   |
| 00076  | N05587100    | ZIKA NEG                                 | W20241865270700X | 1                | 0.00       | 0.00     |
| 00077  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241865270700X | 1                | 7.00       | 7.00     |
| 00078  | N05587100    | ZIKA NEG                                 | W202418652711004 | 1                | 0.00       | 0.00     |
| 00079  | N055E0686V00 | Red Cells Aph AS-3 LeuRed Cnt2           | W202418652711004 | 1                | 211.00     | 211.00   |

BALANCE DUE ON THIS INVOICE: CONTINUED...

QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org

# AMERICAN RED CROSS

| DETAILED INVOICE BY SHIPMENT BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                             | 42210582              |
| CUSTOMER NUMBER:                            | N055B8NWMR-100001     |
| SELLING UNIT:                               | BD08-055-Arkansas Rgn |
| INVOICE DATE:                               | 21-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER

| SEQ NO   | PRODUCT      | DESCRIPTION                       | WBN/DIN          | QUANTITY SHP/RTN | UNIT PRICE | TOTAL      |
|--|--------------|-----------------------------------|------------------|------------------|------------|------------|
| 00080  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell | W202418652711004 | 1                | 7.00       | 7.00       |
| 00081  | N05587100    | ZIKA NEG                          | W20241869437800N | 1                | 0.00       | 0.00       |
| 00082  | N055E0685V00 | Red Cells Aph AS-3 LeuRed Cnt1    | W20241869437800N | 1                | 211.00     | 211.00     |
| 00083  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell | W20241869437800N | 1                | 7.00       | 7.00       |
| 00084  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell | W20241869438200V | 1                | 7.00       | 7.00       |
| 00085  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell | W20241869438200V | 1                | 7.00       | 7.00       |
| 00086  | N05587100    | ZIKA NEG                          | W20241869438200V | 1                | 0.00       | 0.00       |
| 00087  | N055E0686V00 | Red Cells Aph AS-3 LeuRed Cnt2    | W20241869438200V | 1                | 211.00     | 211.00     |
| 00088  | N055E0685V00 | Red Cells Aph AS-3 LeuRed Cnt1    | W20241869438200V | 1                | 211.00     | 211.00     |
| 00089  | N05587100    | ZIKA NEG                          | W20241869438200V | 1                | 0.00       | 0.00       |
| 00090  | N055E0336V00 | Red Cells AS-1 500mL LeuRed       | W20241870071100L | 1                | 211.00     | 211.00     |
| 00091  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell | W20241870071100L | 1                | 7.00       | 7.00       |
| 00092  | N05587100    | ZIKA NEG                          | W20241870071100L | 1                | 0.00       | 0.00       |
| 00093  | N055E0336V00 | Red Cells AS-1 500mL LeuRed       | W20241870212600N | 1                | 211.00     | 211.00     |
| 00094  | N05587100    | ZIKA NEG                          | W20241870212600N | 1                | 0.00       | 0.00       |
| 00095  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell | W20241870212600N | 1                | 7.00       | 7.00       |
| BALANCE DUE ON THIS INVOICE:   |              |                                   |                  |                  |            | \$5,612.00 |
| QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org |              |                                   |                  |                  |            |            |

# AMERICAN RED CROSS

REMIT TO:  
AMERICAN RED CROSS  
PO BOX 730040  
DALLAS, TX 75373-0040

| INVOICE SUMMARY ACTIVITY BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                         | 42208612              |
| CUSTOMER NUMBER:                        | N055B8NWMR-100001     |
| PAYMENT TERMS:                          | NET 30                |
| ARC FEDERAL TAX ID:                     | 53-0196605            |
| A/R PHONE NUMBER:                       | 888-316-4695          |
| SELLING UNIT:                           | BD08-055-Arkansas Rgn |
| PURCHASE ORDER NUMBER:                  |                       |
| INVOICE DATE:                           | 14-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER  
1970 HOSPITAL DRIVE  
CLARKSDALE, MS 38614

MESSAGE:

## SUMMARY OF ACTIVITY BY PRODUCT FOR CURRENT BILLING PERIOD

| SEQ NO   | PRODUCT      | DESCRIPTION                                      | QUANTITY |          | DEBIT    | CREDIT | TOTAL             |
|--|--------------|--|----------|----------|----------|--------|-------------------|
|  |              |  | SHIPPED  | RETURNED |          |        |                   |
| 00001  | N05587100    | ZIKA NEG   | 25       | 0        | 0.00     | 0.00   | 0.00              |
| 00002  | N05588801    | Anti-CMV negative                                | 1        | 0        | 0.00     | 0.00   | 0.00              |
| 00003  | N055A8B      | SHP-Scheduled                                    | 4        | 0        | 0.00     | 0.00   | 0.00              |
| 00004  | N055E0336V00 | Red Cells AS-1 500mL LeuRed                      | 23       | 0        | 4,853.00 | 0.00   | 4,853.00          |
| 00005  | N055E3088V00 | Platelets Aph ACD-A LeuRed Cnt2                  | 2        | 0        | 1,020.00 | 0.00   | 1,020.00          |
| 00006  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell                | 23       | 0        | 161.00   | 0.00   | 161.00            |
| 00007  | N055ZIKASDP  | ZIKA Cost Recovery-Single Donor Platelet         | 2        | 0        | 14.00    | 0.00   | 14.00             |
| 00008  |              | Accepted forms of payment are check, wire or ACH |          |          |          |        |                   |
| <b>BALANCE DUE ON THIS INVOICE:</b>  |              |  |          |          |          |        | <b>\$6,048.00</b> |
| QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org |              |  |          |          |          |        |                   |

# AMERICAN RED CROSS

| DETAILED INVOICE BY SHIPMENT BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                             | 42208612              |
| CUSTOMER NUMBER:                            | N055B8NWMR-100001     |
| SELLING UNIT:                               | BD08-055-Arkansas Rgn |
| INVOICE DATE:                               | 14-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER

| SEQ NO | PRODUCT      | DESCRIPTION                              | WBN/DIN          | QUANTITY SHP/RTN | UNIT PRICE | TOTAL    |
|--------|--------------|--|------------------|------------------|------------|----------|
| 00009  | Order/PO No: | S0935006997498 Shipment Date: 08-06-2018 |                  |                  | Total:     | 517.00   |
| 00010  | N055A8B      | SHP-Scheduled                            | SF0935006997498  | 1                | 0.00       | 0.00     |
| 00011  | N05587100    | ZIKA NEG                                 | W20111885198800Q | 1                | 0.00       | 0.00     |
| 00012  | N055ZIKASDP  | ZIKA Cost Recovery-Single Donor Platelet | W20111885198800Q | 1                | 7.00       | 7.00     |
| 00013  | N055E3088V00 | Platelets Aph ACD-A LeuRed Cnt2          | W20111885198800Q | 1                | 510.00     | 510.00   |
| 00014  |              |  |                  |                  |            |          |
| 00015  | Order/PO No: | S0935006997554 Shipment Date: 08-06-2018 |                  |                  | Total:     | 2,180.00 |
| 00016  | N055A8B      | SHP-Scheduled                            | SF0935006997554  | 1                | 0.00       | 0.00     |
| 00017  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111869054600K | 1                | 211.00     | 211.00   |
| 00018  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111869054600K | 1                | 7.00       | 7.00     |
| 00019  | N05587100    | ZIKA NEG                                 | W20111869054600K | 1                | 0.00       | 0.00     |
| 00020  | N05587100    | ZIKA NEG                                 | W20111871033400E | 1                | 0.00       | 0.00     |
| 00021  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20111871033400E | 1                | 211.00     | 211.00   |
| 00022  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20111871033400E | 1                | 7.00       | 7.00     |
| 00023  | N05587100    | ZIKA NEG                                 | W202418652545000 | 1                | 0.00       | 0.00     |
| 00024  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W202418652545000 | 1                | 7.00       | 7.00     |
| 00025  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W202418652545000 | 1                | 211.00     | 211.00   |
| 00026  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241869197800N | 1                | 211.00     | 211.00   |
| 00027  | N05587100    | ZIKA NEG                                 | W20241869197800N | 1                | 0.00       | 0.00     |
| 00028  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241869197800N | 1                | 7.00       | 7.00     |
| 00029  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241869198300T | 1                | 211.00     | 211.00   |
| 00030  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241869198300T | 1                | 7.00       | 7.00     |
| 00031  | N05587100    | ZIKA NEG                                 | W20241869198300T | 1                | 0.00       | 0.00     |
| 00032  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241869517300X | 1                | 211.00     | 211.00   |
| 00033  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241869517300X | 1                | 7.00       | 7.00     |
| 00034  | N05587100    | ZIKA NEG                                 | W20241869517300X | 1                | 0.00       | 0.00     |
| 00035  | N05587100    | ZIKA NEG                                 | W20241869652800W | 1                | 0.00       | 0.00     |
| 00036  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241869652800W | 1                | 7.00       | 7.00     |
| 00037  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241869652800W | 1                | 211.00     | 211.00   |
| 00038  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W202418696531005 | 1                | 7.00       | 7.00     |
| 00039  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W202418696531005 | 1                | 211.00     | 211.00   |
| 00040  | N05587100    | ZIKA NEG                                 | W202418696531005 | 1                | 0.00       | 0.00     |
| 00041  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241870052500P | 1                | 7.00       | 7.00     |
| 00042  | N05587100    | ZIKA NEG                                 | W20241870052500P | 1                | 0.00       | 0.00     |

BALANCE DUE ON THIS INVOICE: CONTINUED...

QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org

# AMERICAN RED CROSS

| DETAILED INVOICE BY SHIPMENT BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                             | 42208612              |
| CUSTOMER NUMBER:                            | N055B8NWMR-100001     |
| SELLING UNIT:                               | BD08-055-Arkansas Rgn |
| INVOICE DATE:                               | 14-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER

| SEQ NO | PRODUCT      | DESCRIPTION                              | WBN/DIN          | QUANTITY SHP/RTN | UNIT PRICE | TOTAL    |
|--------|--------------|--|------------------|------------------|------------|----------|
| 00043  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241870052500P | 1                | 211.00     | 211.00   |
| 00044  | N05587100    | ZIKA NEG                                 | W20241870053100T | 1                | 0.00       | 0.00     |
| 00045  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241870053100T | 1                | 211.00     | 211.00   |
| 00046  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241870053100T | 1                | 7.00       | 7.00     |
| 00047  |              |  |                  |                  |            |          |
| 00048  | Order/PO No: | S0935007010236 Shipment Date: 08-08-2018 |                  |                  | Total:     | 2,834.00 |
| 00049  | N055A8B      | SHP-Scheduled                            | SF0935007010236  | 1                | 0.00       | 0.00     |
| 00050  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W201118700423007 | 1                | 7.00       | 7.00     |
| 00051  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W201118700423007 | 1                | 211.00     | 211.00   |
| 00052  | N05587100    | ZIKA NEG                                 | W201118700423007 | 1                | 0.00       | 0.00     |
| 00053  | N05587100    | ZIKA NEG                                 | W201118704189005 | 1                | 0.00       | 0.00     |
| 00054  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W201118704189005 | 1                | 211.00     | 211.00   |
| 00055  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W201118704189005 | 1                | 7.00       | 7.00     |
| 00056  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W201118706553002 | 1                | 7.00       | 7.00     |
| 00057  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W201118706553002 | 1                | 211.00     | 211.00   |
| 00058  | N05587100    | ZIKA NEG                                 | W201118706553002 | 1                | 0.00       | 0.00     |
| 00059  | N05587100    | ZIKA NEG                                 | W201118710217000 | 1                | 0.00       | 0.00     |
| 00060  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W201118710217000 | 1                | 7.00       | 7.00     |
| 00061  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W201118710217000 | 1                | 211.00     | 211.00   |
| 00062  | N05587100    | ZIKA NEG                                 | W20241868295200M | 1                | 0.00       | 0.00     |
| 00063  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241868295200M | 1                | 211.00     | 211.00   |
| 00064  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241868295200M | 1                | 7.00       | 7.00     |
| 00065  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241868495400N | 1                | 7.00       | 7.00     |
| 00066  | N05587100    | ZIKA NEG                                 | W20241868495400N | 1                | 0.00       | 0.00     |
| 00067  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241868495400N | 1                | 211.00     | 211.00   |
| 00068  | N05587100    | ZIKA NEG                                 | W20241869528600F | 1                | 0.00       | 0.00     |
| 00069  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20241869528600F | 1                | 211.00     | 211.00   |
| 00070  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20241869528600F | 1                | 7.00       | 7.00     |
| 00071  | N05587100    | ZIKA NEG                                 | W202418695305004 | 1                | 0.00       | 0.00     |
| 00072  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W202418695305004 | 1                | 211.00     | 211.00   |
| 00073  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W202418695305004 | 1                | 7.00       | 7.00     |
| 00074  | N05587100    | ZIKA NEG                                 | W202418695379005 | 1                | 0.00       | 0.00     |
| 00075  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W202418695379005 | 1                | 211.00     | 211.00   |
| 00076  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W202418695379005 | 1                | 7.00       | 7.00     |

BALANCE DUE ON THIS INVOICE: CONTINUED...

QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org

# AMERICAN RED CROSS

| DETAILED INVOICE BY SHIPMENT BLOOD SERVICES |                       |
|---|-----------------------|
| INVOICE NUMBER:                             | 42208612              |
| CUSTOMER NUMBER:                            | N055B8NWMR-100001     |
| SELLING UNIT:                               | BD08-055-Arkansas Rgn |
| INVOICE DATE:                               | 14-Aug-2018           |

NORTHWEST MISSISSIPPI REG MED CENTER

| SEQ NO   | PRODUCT      | DESCRIPTION                              | WBN/DIN          | QUANTITY<br>SHP/RTN | UNIT PRICE | TOTAL             |
|--|--------------|--|------------------|---------------------|------------|-------------------|
| 00077  | N05587100    | ZIKA NEG                                 | W202418697716008 | 1                   | 0.00       | 0.00              |
| 00078  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W202418697716008 | 1                   | 211.00     | 211.00            |
| 00079  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W202418697716008 | 1                   | 7.00       | 7.00              |
| 00080  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20321801819100T | 1                   | 7.00       | 7.00              |
| 00081  | N05587100    | ZIKA NEG                                 | W20321801819100T | 1                   | 0.00       | 0.00              |
| 00082  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20321801819100T | 1                   | 211.00     | 211.00            |
| 00083  | N05587100    | ZIKA NEG                                 | W20321805451700R | 1                   | 0.00       | 0.00              |
| 00084  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20321805451700R | 1                   | 211.00     | 211.00            |
| 00085  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20321805451700R | 1                   | 7.00       | 7.00              |
| 00086  | N055ZIKARBC  | ZIKA Cost Recovery-Red Blood Cell        | W20321805662600M | 1                   | 7.00       | 7.00              |
| 00087  | N055E0336V00 | Red Cells AS-1 500mL LeuRed              | W20321805662600M | 1                   | 211.00     | 211.00            |
| 00088  | N05587100    | ZIKA NEG                                 | W20321805662600M | 1                   | 0.00       | 0.00              |
| 00089  |              |  |                  |                     |            |                   |
| 00090  | Order/PO No: | S0935007015911 Shipment Date: 08-10-2018 |                  |                     | Total:     | 517.00            |
| 00091  | N055A8B      | SHP-Scheduled                            | SF0935007015911  | 1                   | 0.00       | 0.00              |
| 00092  | N055ZIKASDP  | ZIKA Cost Recovery-Single Donor Platelet | W20241887867900H | 1                   | 7.00       | 7.00              |
| 00093  | N05588801    | Anti-CMV negative                        | W20241887867900H | 1                   | 0.00       | 0.00              |
| 00094  | N055E3088V00 | Platelets Aph ACD-A LeuRed Cnt2          | W20241887867900H | 1                   | 510.00     | 510.00            |
| 00095  | N05587100    | ZIKA NEG                                 | W20241887867900H | 1                   | 0.00       | 0.00              |
| <b>BALANCE DUE ON THIS INVOICE:</b>  |              |  |                  |                     |            | <b>\$6,048.00</b> |
| QUESTIONS REGARDING YOUR ORDER CALL: 314-658-2082 or email BSR055@redcross.org |              |  |                  |                     |            |                   |

# MIDDLE DISTRICT OF TENNESSEE Claims Register

[3:18-bk-05678 Clarksdale Regional Medical Center Inc.](#)

**Judge:** Charles M Walker

**Chapter:** 11

**Office:** Nashville

**Last Date to file claims:**

**Trustee:**

**Last Date to file (Govt):**

*Creditor:* (6759953)  
AMERICAN RED CROSS  
**(ADMINISTRATIVE)**  
LORI POLACHEK ESQ  
431 18TH ST NW  
WASHINGTON DC  
20006

**Claim No: 8**  
*Original Filed*  
*Date:* 10/10/2018  
*Original Entered*  
*Date:* 10/10/2018

*Status:*  
*Filed by:* CR  
*Entered by:* Intake3  
*Modified:*

Admin claimed: \$11660.00

*History:*

[Details](#) [8-1](#) 10/10/2018 Claim #8 filed by AMERICAN RED CROSS, Admin claimed: \$11660.00 (Intake3)

*Description:* (8-1) Blood products sold to debtor

*Remarks:*

## Claims Register Summary

**Case Name:** Clarksdale Regional Medical Center Inc.

**Case Number:** 3:18-bk-05678

**Chapter:** 11

**Date Filed:** 08/24/2018

**Total Number Of Claims:** 1

|                              |  |
|------------------------------|--|
| <b>Total Amount Claimed*</b> |  |
| <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 |
|-----------------------|------------|---------|
| <b>Secured</b>        |            |         |
| <b>Priority</b>       |            |         |
| <b>Administrative</b> | \$11660.00 |         |