

Fill in this information to identify the case:

Debtor 1 Fayette Memorial Hospital Association, Inc.

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: Souther District of Indiana

Case number 18-07762-JJG-11

RECEIVED

FEB 12 2019

BMC GROUP

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?	Fisher Scientific Co., LLC Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Thermo Fisher Scientific / Fisher Healthcare</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)	Where should notices to the creditor be sent? <u>Thermo Fisher Scientific Attn: Gary R. Barnes</u> Name <u>300 Industry Drive</u> Number Street <u>Pittsburgh PA 15275</u> City State ZIP Code Contact phone <u>724-517-2372</u> Contact email <u>gary.barnes@thermofisher.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: 8 9 1 0

7. How much is the claim? \$ 100,149.76. 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.
Good and/or Services Sold

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: \$ 100,149.76 (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 02/11/2019
MM / DD / YYYY

 2/11/2019
Signature

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

Name Gary Richard Barnes
First name Middle name Last name

Title AR Mgr

Company Thermo Fisher Scientific Co
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 300 Industry Drive
Number Street
Pittsburgh PA 15275
City State ZIP Code

Contact phone 724-517-2372 Email gary.barnes@thermofisher.com

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Fisher Sci Co-US1B
 ACCOUNTS RECEIVABLE SYSTEM
 CUSTOMER ITEM REPORT

DATE: 11-FEB-2019 10:51
 PAGE: 1

CUSTOMER ID : 258910 NAME: FAYETTE REGIONAL HEALTH
 ITEMS REPORTED: ALL ITEMS OPEN CONTACT:
 DATE RANGE : 2000/01/01 THRU 2018/12/31 REQUESTOR: BARNES, GARY

PHONE:
 PHONE: FAX:
 FAX:

INV NBR	RS	ST	INV DATE	TYPE	GRO	BALANCE	PO NUMBER	DEST R	CC	REAS	ORDER NO.
2988052	O		06-DEC-17			1,260.64	272206	001			D73391202
7741283	O		19-MAR-18			7,560.00	272704	001			E80787350
9707522	O		05-APR-18			539.34	272884	001			H80955799
0974688	O		16-APR-18			172.62	272945	001			D81020368
1242561	O		18-APR-18			1,373.11	272964	001			D81078968
1735495	O		23-APR-18			1,792.10	272976	001			D81094578
1735496	O		23-APR-18			75.24	272980	001			D81095340
2693018	O		25-APR-18			716.65	273003	001			D81144453
4228048	O		27-APR-18			207.76	273003	001			D81144453
4580416	O		30-APR-18			359.56	273024	001			D81205675
5124157	O		02-MAY-18			473.13	180502E7KF	001			D81221476
6323920	O		09-MAY-18			280.08	180508EC62	001			D81283470
6762598	O		14-MAY-18			630.93	180514EG3K	001			D81344141
6879958	O		15-MAY-18			1,279.15	180510EDYJ	001			D81308773
6879960	O		15-MAY-18			67.65	180511EF65	001			D81311900
6988098	O		16-MAY-18			2,734.17	180515EHG9	001			D81357661
7826396	O		22-MAY-18			795.00	180522EMA0	001			D81420744
7826397	O		22-MAY-18			280.08	180522EMK7	001			D81420875
8298348	O		23-MAY-18			75.24	180522EN57	001			D81422347
9049744	O		25-MAY-18			470.97	180524EP27	001			C81447503
9049745	O		25-MAY-18			101.35	180524EOVJ	001			D81447369
9253373	O		29-MAY-18			678.28	180524EOVJ	001			D81447369
9451180	O		30-MAY-18			1,612.00	180522EMK7	001			D81420875
9451181	O		30-MAY-18			110.32	180529ERGB	001			D81493116
9451188	O		30-MAY-18			4,332.00	180529ERFA	001			D81493215

PAGE TOTAL: \$27,977.37

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Fisher Sci Co-US1B
 ACCOUNTS RECEIVABLE SYSTEM
 CUSTOMER ITEM REPORT

DATE: 11-FEB-2019 10:51
 PAGE: 2

CUSTOMER ID : 258910 NAME: FAYETTE REGIONAL HEALTH
 ITEMS REPORTED: ALL ITEMS OPEN CONTACT:
 DATE RANGE : 2000/01/01 THRU 2018/12/31 REQUESTOR: BARNES, GARY

PHONE:
 PHONE: FAX:
 FAX:

INV NBR	RS	ST	INV DATE	TYPE	GRO	BALANCE	PO NUMBER	DEST R	CC	REAS	ORDER NO.
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9451192	O	30-MAY-18	719.12	180529ERFC	001	D81493223
9451193	O	30-MAY-18	3,200.00	180529ERQV	001	D81505084
9633859	O	31-MAY-18	233.30	180529ERQV	001	D81505084
9803107	O	01-JUN-18	1,356.60	180529ERQV	001	D81505084
9944663	O	04-JUN-18	116.75	180531ETBE	001	D81518894
0453596	O	08-JUN-18	1,489.60	180605EX63	001	D81568366
0544882	O	11-JUN-18	70.98	180605EX63	001	D81568366
0544883	O	11-JUN-18	75.69	180606EYIO	001	D81571716
0639112	O	12-JUN-18	295.51	180605EX63	001	D81568366
0639113	O	12-JUN-18	765.36	180612F2PP	001	U81631907
0739183	O	13-JUN-18	453.91	180612F354	001	D81633765
0739184	O	13-JUN-18	150.48	180613F3NO	001	D81645108
1119500	O	18-JUN-18	500.00	180611F1G6	001	D81632583
1119501	O	18-JUN-18	1,612.00	180612F354	001	D81633765
1246837	O	19-JUN-18	280.08	180619F91P	001	D81707322
1370692	O	20-JUN-18	369.23	180619F91P	001	D81707322
1482816	O	21-JUN-18	240.94	180620FA76	001	D81710345
1966686	O	27-JUN-18	413.75	180626FESQ	001	D81771473
1966687	O	27-JUN-18	2,925.56	180626FEUG	001	D81771771
2130634	O	28-JUN-18	3,655.99	180626FEUG	001	D81771771
2529374	O	02-JUL-18	441.32	180629FI8L	001	D81800140
3169412	O	10-JUL-18	280.08	180710FPJF	001	D81916562
3231657	O	11-JUL-18	150.48	180709FOFC	001	D81903664
3231658	O	11-JUL-18	1,612.00	180710FPJF	001	D81916562
3567565	O	18-JUL-18	537.62	180717FW04	001	D81981876

PAGE TOTAL: \$21,946.35

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Fisher Sci Co-US1B
ACCOUNTS RECEIVABLE SYSTEM
CUSTOMER ITEM REPORT

DATE: 11-FEB-2019 10:51
PAGE: 3

CUSTOMER ID : 258910 NAME: FAYETTE REGIONAL HEALTH
ITEMS REPORTED: ALL ITEMS OPEN CONTACT:
DATE RANGE : 2000/01/01 THRU 2018/12/31 REQUESTOR: BARNES, GARY

PHONE: FAX:
PHONE: FAX:

INV NBR	RS	ST	INV DATE	TYPE	GRO	BALANCE	PO NUMBER	DEST	R	CC	REAS	ORDER NO.
3642120	O		19-JUL-18			1,024.55	180717FW04	001				D81981876
3642129	O		19-JUL-18			63.78	180718FWZW	001				D81994290
4019662	O		25-JUL-18			3,469.59	180724G2D5	001				D82055941
4162226	O		26-JUL-18			241.70	180724G2D5	001				D82055941
4334093	O		30-JUL-18			89.89	180726G3VC	001				D82079778
4520747	O		01-AUG-18			3,475.92	180731G8M6	001				D82129648
4520750	O		01-AUG-18			140.85	180801G9FN	001				D82131320
4846369	O		06-AUG-18			547.26	180731G8M6	001				D82129648
4846370	O		06-AUG-18			413.75	180801G9UM	001				D82132324
5148525	O		08-AUG-18			75.69	180807GEGK	001				D82193678
5436278	O		10-AUG-18			552.77	180808GFZP	001				D82206821

5574494	O	13-AUG-18	2,382.24	180731G8M6	001	D82129648
5574497	O	13-AUG-18	164.57	180808GFZP	001	D82206821
5574498	O	13-AUG-18	2,134.00	180809GH6H	001	D82219464
5574506	O	13-AUG-18	118.76	180810GIDF	001	D82222229
6010889	O	14-AUG-18	175.18	180717FW04	001	H81986822
6780941	O	15-AUG-18	1,193.66	180814GL7F	001	D82267919
7192839	O	16-AUG-18	1,393.01	PO0044	001	A82196570
7192841	O	16-AUG-18	1,562.96	180814GL7F	001	D82267919
7964884	O	17-AUG-18	90.45	180814GL7F	001	D82267919
8609005	O	20-AUG-18	392.39	180815GMD3	001	D82270914
8609013	O	20-AUG-18	1,280.40	180816GNWI	001	D82284162
9536975	O	22-AUG-18	413.75	180821GR7F	001	D82331104
9536988	O	22-AUG-18	1,716.75	18021GRTA	001	D82332564
0412654	O	27-AUG-18	166.26	180801G9FN	001	C82348399

PAGE TOTAL: \$23,280.13

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Fisher Sci Co-US1B
ACCOUNTS RECEIVABLE SYSTEM
CUSTOMER ITEM REPORT

DATE: 11-FEB-2019 10:51

PAGE: 4

CUSTOMER ID : 258910 NAME: FAYETTE REGIONAL HEALTH
ITEMS REPORTED: ALL ITEMS OPEN CONTACT:
DATE RANGE : 2000/01/01 THRU 2018/12/31 REQUESTOR: BARNES, GARY

PHONE: FAX:
PHONE: FAX:

INV NBR	RS	ST	INV DATE	TYPE	GRO	BALANCE	PO NUMBER	DEST	R	CC	REAS	ORDER NO.
0412658	O		27-AUG-18			77.16	180823GU3Z	001				S82352556
1105529	O		29-AUG-18			280.08	180828GY8V	001				D82406619
144117	O		29-AUG-18			-42.96				Y		
144119	O		29-AUG-18			-14.01				Y		
1757723	O		04-SEP-18			337.00	180830H0EZ	001				D82421416
1909677	O		05-SEP-18			1,681.56	180904H3R8	001				D82477509
2058676	O		06-SEP-18			678.28	180904H3R8	001				D82477509
2341460	O		10-SEP-18			581.14	180905H584	001				D82481127
2341461	O		10-SEP-18			719.12	180906H5ZP	001				D82492835
2620590	O		12-SEP-18			290.57	180904H3R8	001				D82477509
2620593	O		12-SEP-18			3,275.69	180911H9XX	001				D82542120
2738312	O		13-SEP-18			380.00	180911H9XX	001				D82542120
3457757	O		18-SEP-18			765.36	180917HFV8	001				D82604966
3768070	O		19-SEP-18			7,562.50	180914HEBM	001				A82605358
3768072	O		19-SEP-18			268.31	180917HFV8	001				D82604966
3768074	O		19-SEP-18			2,910.27	180918HGUT	001				D82618258
4186660	O		20-SEP-18			3,098.75	180918HGUT	001				D82618258
4672394	O		21-SEP-18			344.02	180914HEA8	001				D82572101
4672398	O		21-SEP-18			70.98	180918HGUT	001				D82618258
5573747	O		25-SEP-18			382.68	180924HLXL	001				D82670276
7481892	O		26-SEP-18			413.75	180924HLXL	001				D82670276
7481935	O		26-SEP-18			2,598.80	180925H018	001				D82683768

8892122	O	27-SEP-18	8.22	180925HO18	001	D82683768
9911651	O	01-OCT-18	278.64	180925HO18	001	D82683768

PAGE TOTAL: \$26,945.91

FINAL TOTAL: \$ 100,149.76

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