AMENDED

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			CLAIM FORM , Inc., Case No. 18-07762-JJG-11
NOTE: This form should only be used to make a claim for through and including April 30, 2019. IT SHOULD NO	or an Administ	rative	Expense arising or accruing from October 10, 2018
Name of Creditor (The person or other entity to whom the debtor or property): Renovo Solutions, LLC	WCS money or		Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
Name and address where notices should be sent: Proud Usahacharoenporn, Rutan & Tucker LLP, 611 Ant	on Blvd.,		Check box if you have never received any notices from the bankruptcy court in this case.
Suite 1400, Costa Mesa, CA 92626 Name and address where payment should be sent (if different): Proud Usahacharoenporn, Rutan & Tucker LLP, 611 Anton 1400, Costa Mesa, CA 92626	n Blvd., Suite		Check box if the address differs from the address on the envelope sent to you by the court.
Telephone number: (714) 338-1885 Last four digits of account or other number by which creditor identifies FRH	HS-IN-01	-	
debtor: Thi 1. Basis for Administrative Claim Goods sold Money loaned Personal injury/wrongful death	R. Dw Lost f	ages, sal our digi id compo	enefits as defined in 11 U S C. § 1114(a) RECEIVEI Itaries, and compensation (fill out below) its of your SS #: ensation for services performed AUG 22201
Taxes Other		from	to (date) BMC GROU
 2. Date(s) debt was incurred: 1/31/19-5/30/19 4. TOTAL AMOUNT OF ADMINISTRATIVE CLAIM: \$ \$68,825.67 If all or part of your claim is secured, also complete Item 5 below. Check this box if claim includes interest or other charges in additional secured. 	on to the principal	amount	of the claim. Attach itemized statement of all interest or
additional charges. 5. Please identify the property of the Debtor that secures the claim.	6. Offsets, Credi	is and Se	etoffs:
Description of Property:	All Payments deducted from th		n this claim by the Debtor have been credited and nt claimed herein
Basis for Perfection: Value of Property:			ect to any setoff or counterclaim. to setoff or counterclaim as follows:
7. This Administrative Proof of Claim: is the first filed proof of claim evidencing the claim asserted herein.	8. Assignment	it has ob	stained this claim by Assignment, a copy is attached hereto.
amends/supplements a proof of claim <u>Renov</u> filed on <u>6/11/19</u> or			
replaces/suspends a proof of claim filed on 9. Supporting Documentation:			
Filers must leave out or redact information that is entitled to pr documents that support the claim, such as promissory notes, judgments, mortgages, and security agreements. Do not send ori	purchase orders	, invoie s; they	ces, itemized statements of running accounts, contracts, may be destroyed after scanning. If the documents are not
Date: 9/12/10 power of attorney, if any):	le, if any, of the c	reditor	r or other person authorized to file this claim (attach copy of
Proud Usahacharoenporn		F	

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.

ADDENDUM TO ADMINISTRATIVE EXPENSE CLAIM

SUBMITTED BY RENOVO SOLUTIONS, LLC

Renovo Solutions, LLC ("Creditor") submits its Administrative Expense Claim in this bankruptcy case and asserts the claims described below against Fayette Memorial Hospital Association, Inc. d/b/a Fayette Regional Health System ("Debtor"). The bankruptcy estate is obligated to Creditor as set forth below:

On about February 11, 2015, Creditor and Debtor entered into an Asset Management Agreement (the "Agreement") pursuant to which Creditor provided management and coordination of equipment maintenance services for Debtor's equipment and assets in exchange for Debtor's agreement to pay for such services in the amount of \$235,000 per year plus certain costs. (Ex. 1.) Debtor agreed to make monthly payments to Creditor by the first of each month and agreed that any payments not timely made were subject to a late fee charge of 1.5%. (*Id.*) On about November 13, 2018, Creditor and Debtor entered into an Asset Management Agreement - Addendum #1 ("Addendum"), effective as of November 1, 2018, in which Creditor agreed to give Debtor 30 days from the date each monthly payment was due (the first of each month) to make the payment due that month. (Ex. 2.)

Creditor performed all obligations required of it under the Agreement and Addendum, including by providing services during the administrative claim period from 01/31/19 to 5/30/19 (except insfoar as excused by Debtor's nonperformance). To date, Debtor has failed and refused to pay for the goods and services provided from the administrative claim period that are reflected on Creditor's Invoices Nos. 056050 SVC, 056321 CNT, 056493 SVC, 056718 CNT, 057456 SVC, 057258 CNT, 057652 SVC and 057823 CNT to Debtor that are collectively attached hereto as Exhibit 3. The total principal amount currently owed by Debtor to Creditor pursuant to these Invoices from the administrative claims period totals \$68,825.67 (not including interest and late fees).

RESERVATION OF RIGHTS

Creditor reserves all legal, equitable, and contractual rights against all parties. Nothing contained herein is intended, nor should it be construed, to be (i) an admission or waiver by Creditor of any matter or thing, (1) a waiver of a right to a jury trial on any matter or thing to which such a right exists, (iii) consent to the entry of a final order or a final judgment by the Bankruptcy Court, (iv) a release, waiver, or modification of any rights of Creditor against any person, entity, or property, or any property in which Creditor may have a security interest or lien, (v) a release, waiver, or modification of, or obligation under, any contract, agreement, or understanding between Creditor and any other party, or (vi) an election of remedies by Creditor.

Creditor reserves the right to amend, modify, or supplement this Administrative Expense Claim for any reason, at any time and from time to time, and in any respect, including, without limitation, for purposes of recharacterizing in any manner the claims set forth herein, reflecting any additional amounts owing from the Debtor, and including herein further relevant evidence and information.

EXHIBIT 1

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Agreement No. FRHS-IN-01

Asset Management Agreement

This Asset Management Agreement is made and entered between **RENOVO SOLUTIONS LLC** (herein referred to as "**RENOVO**"), and **FAYETTE REGIONAL HEALTH SYSTEM** (herein referred to as "**CLIENT**"). **RENOVO** agrees to provide comprehensive asset management services to **CLIENT** under the following terms and conditions.

1. Definitions

For purposes of this Agreement, terms used herein shall have meanings as follows:

- (a) The term "Agreement" shall mean this Asset Management Agreement, as may from lime to time be amended, modified and supplemented in accordance with the provisions hereof.
- (b) The term "Annual Asset Management Program Cost" shall mean the annual cost, which CLIENT is obligated to pay to RBNOVO under Section 7 of this Agreement.
- (c) The term "Asset Management Inventory" shall mean the equipment and other assets listed on Attachment "A" to this Agreement, which is incorporated herein by this reference as if fully set forth.
- (d) The term "Equipment Coverage Summary Report" shall mean the periodic report prepared by RENOVO Quarterly, which shall set forth the current Asset Management Inventory.
- (e) The term "Asset Management Services" shall mean the services to be provided by RENOVO as set forth in Section 2 of this Agreement.
- (f) The term "Active Contract Report" shall mean the periodic report prepared by RENOVO, which shall set forth the labor and material expenditures, which have accrued in providing the Asset Management Services.
- (g) The term "Preventive Maintenance Completion Report" shall mean the periodic report prepared by RENOVO, which shall detail the preventive maintenance provided by RENOVO as part of the Asset Management Services.
- (h) The term "Quality improvement Report" shall mean the Quarteriy report prepared by RENOVO, which shall describe the actions and activities of RENOVO and CLIENT in making qualitative improvements to the Asset Management Program.
- (i) The term "Total Program Expenditures" shall mean the total cost of RENOVO in providing the Asset Management Services, including, without limitation, the wages and benefits paid to the Asset Management Technical Staff and other employees or agente of RENOVO providing Asset Management Services, as well as the costs incurred by RENOVO for materials and supplies utilized in providing the Asset Management Services.

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Agreement No. FRHS-IN-01

Asset Management Agreement

2. Scope of RENOVO Services and Coverage

During the term of this Agreement, RENOVO will provide CLIENT with the Asset Management Services as follows:

- (a) RENOVO will assign an Account Manager to provide management and coordination of equipment maintenance services for the Asset Management Inventory (see Attachment A for specific details). Equipment maintenance services will be provided by <u>1 (one)</u> site based Biomedical Technician, Monday thru Friday from 8:00em thru 4:30pm, Renovo will provide support from regional Biomedical and Rediciogical Service Specialists (Herein referred to as the "Asset Management Technical Staff) on an as needed basis. When appropriate, technical staff from an approved Independent Service Organization or the Original Equipment Manufacturers may be utilized. Asset Management Technical Staff are available 24 hours a day, 7 days par week by calling the Renovo Sciutions Service Center at 888-738-8881.
- (b) RENOVO will be financially responsible for all labor and material costs associated with routine repairs and maintenance (excluding consumable supplies) for the Asset Management Inventory (see Attachments A & C for specific inclusions and exclusions) up to a maximum expanse of \$150,000.00 on an annual basis. Any costs exceeding \$160,000.00 on an annual basis will be shared between RENOVO and CLIENT on a 50/50 basis.
- (c) Uptime Guarantee: RBNOVO guarantees a 97% uptime for all imaging equipment items as measured on an annual basis. Uptime percentage for each item of equipment is calculated as follows: Total covered annual hours, minue total annual downtime hours, divided by total covered annual hours. A unit is considered down when it cannot produce a scan, image or film. It is also down when restricted to the point that it cannot be used for its intended purpose. Downtime starts at first call for covered service and ends at the production of a disgnostically acceptable scan, image or film and release of the unit to the customer for patient use. At the end of each Agreement year, CLIENT shall receive a reduction in each item's annual coverage amount for the following one (1) year Agreement period, equal to one percent (1%) of the annual coverage amount for that item, for each percentage point below the guaranteed uptime percentage for the current year (with a maximum discount amount of 15%).

Furthermore, all hours associated with the following activities would not be included in the Uplime calculation: preventive (schedulad) maintenance hours, service hours not covered by the contract coverage, failures caused by acts of God, and replacement part shipping delays as the result of weather and are beyond our control.

RENOVO SD CLIENT

Page 2 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

3. Reports and Compliance

During the term of this Agreement, RENOVO will meintain records and prepare reports, as follows:

- (a) All preventive maintenance and repair documentation will be kept on file at the premises of CLIENT, as well as at the offices of RENOVO.
- (b) RENOVO will ensure that all Asset Management Services are in compliance with current joint Commission and DNV accreditation standards, as well as any applicable requirements promulgeted by the State Department of Health Services and other regulatory agencies with jurisdiction over CLIENT. The Asset Management Technical Staff will be in attendance at the time of all regulatory surveys/inspections.
- (c) RENOVO will provide CLIENT with Quarterly reports detailing various aspects of the asset management program to include, but not be limited to, the following: Equipment Coverage Summary Report (quarterly), Preventive Maintenance Completion Report (monthly), Quality Improvement Report (quarterly), Service History Report (quarterly), Special Case Service History report (quarterly) and Program Evaluation Report (annually).

4. CLIENT Responsibilities

During the term of this Agreement, CLIENT will provide RENOVO with the following:

- (a) CLIENT shall provide the Asset Management Technical Staff and other employees and agents of RENOVO with full and complete access to the Asset Management Inventory to permit RENOVO to provide the Asset Management Services in a timely manner.
- (b) CLIENT will provide the Asset Management Technical Staff and employees and agents of RENOVO with all service records and reports, equipment manuals and warranty information of the Asset Management Inventory which will permit RENOVO to provide the Asset Management Services and secure warranty services on the Asset Management Inventory, as applicable.
- (c) CLIENT will provide the Asset Management Technical Staff with reasonable temporary (a deak, chair in the Biomed Office) office space during the normal working hours as specified in Section 2(a) of this Agreement, sufficient facilities to maintain the records pertaining to the Asset Management inventory, as well as unrestricted high-spaced internet access for our computerized information management system to function property.
- 5. Agreement Term

The commencement of the term of this Agreement shall be the later of 12:01 a.m. on <u>February 15, 2015</u>, or the date that the initial installment payment required by Section 7 of this Agreement is received by **RENOVO**, and shall continue for a term of sixty (60) months, unless earlier terminated in accordance with the provisions described in Section 6 of this Agreement.

RENOVO_S CLIENT

Page 3 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

6. Termination

Either RENOVO or CLIENT may terminate the term of this Agreement at any time during the term, with cause, by providing the other with at least ninely (90) days prior written notice to such termination. Termination with cause, for purposes of this Agreement, shall mean a material breach of this Agreement which is not cured within thirty (30) days of delivery of written notice by the non-defaulting party, which notice shall reasonably describe the alleged default or defaults.

7. Cost of Asset Management Program

The Year 1 annual cost of the Asset Management Services described in this Agreement is <u>\$235,000.00</u>. Provided the equipment inventory and scope of coverage remain the same, **RENOVO** may adjust the annual cost for Years 4 & 5 for inflationary reasons, but any increase will not exceed the then current Consumers Price index (CPI). Installment payments of the Annual Asset Management Program Cost shall be made by **CLIENT** to **RENOVO** via check according to the attached payment schedule (Attachment D). The first monthly installment payment of the annual Asset Management Program Cost will be due on the effective date of the agreement and the balance of the annual cost will be divided into eleven monthly installments, based on the number of days in each month.

Excluding the initial installment payment, all installment payments are to be paid by *CLIENT* and received by RENOVO no later than the first day of each month in which payment is due. All payments not made in a timely manner, shall be subject to a late fae charge of one and one-half percent (1½%) of the installment payment amount, which shall be paid with the delinquent installment payment without notice or demand. In addition to the late payment fee, RENOVO also reserves the right to suspend or withhold equipment maintenance services from *CLIENT*, in the event *CLIENT* does not adhere to the agreed upon payment terms stated above. The withholding of services by RENOVO may include the removal of the Asset Management Technical Staff from *CLIENT*'s premises until such payments have been brought upto-date. The cost of any services provided by RENOVO, which are not included in the Asset Management Service shall be charged at hourly rates established by RENOVO, plus expanses, and shall be separately involced by RENOVO.

8. Asset Management Inventory Changes

Modifications (e.g. equipment additions/deletions and scope of services) to the Asset Management inventory can be made at any time during the period of the Agreement provided however, all changes, including, without limitation, adjustments to the cost of Asset Management Services, must be muluelly agreed upon in writing by both RBNOVO and CLIENT. The Asset Management inventory Change Form (Attachment B) is provided for this purpose.

> RENOVO SDM CLIENTIN

Page 4 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

9. Liability Limitations

CLIENT hereby acknowledges and agrees that the maximum cumulative liability RENOVO shall have during each successive twelve (12) month period of this Agreement for the maintenance and repair expenditures with respect to each piace of equipment shall be limited to the fair market value of a like model, age and condition as the applicable piace of equipment is at the applicable time, and for any single repair an amount equal to fifty percent (60%) of such value. Once such maximum with respect to any piace of equipment is reached, such piace shall be removed from the Asset Management inventory with no reduction in the amounts due hareunder for the duration of such 12-month period. In the event any such equipment requires repair after being removed from the Asset Management inventory, all such repairs will be performed by RENOVO on a Time and Material (T&M) basis at RENOVO's then prevailing rates. In no event shall RENOVO be liable to CLIENT under this Agreement, by reason of any tort, breach of contract, or warranty, indemnification or other legal liabilities, for prospective, consequential, incidental, exemplary, punitive, indirect or special damages, economic loss, loss of profits or similar damages suffered by CLIENT rising out of a breach or default in the performance. of RENOVO's obligations under this Agreement. RENOVO will not pay for any maintenance-related expenditure which are incurred after the expiration of this Agreement. RENOVO covenants that the Asset Management inventory will be fully operational as of the expiration of the term of this Agreement, reasonable wear and tear excepted.

10. Insurance Coverage

This Agreement shall not be deemed to create a legal partnership, association, joint venture or eiher similar arrangement between RENOVO and CLIENT, the intent of this Agreement being that both RENOVO and CLIENT shall be and shall remain independent contractors for the performance of their respective obligations under this Agreement. Each party covenants and agrees that they shall maintain itability insurance coverages for their respective businesses in a commercially reasonable amount, and shall maintain workers' compensation insurance in required amounts on their own employees. CLIENT agrees that it shall maintain property damage and casually insurance, at its expanse, on the Asset Management inventory, and that RENOVO shall have no liability to CLIENT for any loss, damage, or injury to, or caused by, the Asset Management inventory which does not arise from the negligent acts or omissions to acts of RENOVO.

11. Environmental Systems & Acts of God

RENOVO is not responsible for paying the cost of repair services to the Asset Management inventory which are attributable to the failure of *CLIENT*'s environmental systems, including but not limited to: electrical distribution system, heating, ventilation and air conditioning systems, water supply and disposal systems, and any other facility support system; as well as failures due to acts of God.

RENOVO Q CLIENT

Page 5 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

12. Indemnification

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RBNOVO and **CLIENT** shall defend, indemnify and hold each other harmless from and against all claims, liability, loss and expanses, including reasonable costs, collection expanses and attorney's fees, which may arise because of the negligence, misconduct, or other fault of the indemnifying party, its representatives or employees.

13. Force Maleure

The dulies and obligations of each party to this Agreement are limited in the event of circumstances beyond their control, such as major disaster, spidemic, war, complete or partial destruction of facilities, and disability of a significant number of parsonnel, significant labor disputes, and acts of God. In such an event, the parties hereto agree to use their best efforts under the circumstances to fulfil their dulies and obligations under this Agreement by whatever means are available.

14. Confidentiality

Except as otherwise specifically provided in this Agreement, the parties to this Agreement each covenant that they shall keep the terms and conditions of this Agreement atricity confidential and shall not distribute copies of this Agreement or disclose the terms and conditions of this Agreement to any person or entity. As a limited exception to the foregoing, either party may distribute copies of this Agreement or disclose the terms and conditions as follows:

- (a) This Agreement and the terms and conditions of this Agreement may be disclosed to the parties' legal, GPO and tax advisors.
- (b) This Agreement and the terms and conditions of this Agreement may be disclosed as may be necessary and appropriate to enforce the terms of this Agreement or as may be directed by binding court orders or subpoenas.
- (c) This Agreement and the terms of this Agreement may be disclosed as may be required to prevent them from violating any applicable laws, statutes or regulations which govern the respective business activities of the parties.

15. Arbitration

Any controversy or claim arising out of or relating to this Agreement or the respective rights under this Agreement shall be settled by arbitration in Fayette County, Indiana. Such arbitration shall be in accordance with the rules of the American Arbitration Association, and judgment upon the sward may be entered in any court of competent jurisdiction. The prevailing party in such arbitration and any ensuing legal action shall be reimbursed by the party who does not prevail, for the reasonable attorneys, accountant, and expert fees, and the cost of such actions.

RENOVO SU CLIENT

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Agreement No. FRHS-IN-01

Asset Management Agreement

18. Notices

Any notice, designation, consent or approval required or permitted hereunder shall be made in writing and delivered personally or mailed by certified mail, return receipt requested, addressed to the parties as hereinafter specified. Any notice forwarded by mail in accordance with the terms of this section shall be deemed to have been received, delivered or given to the other party three (3) business days following the date of mailing. Addresses for purposes of this Agreement, must be otherwise designated in a subsequent written notice or as follows:

RENOVO SOLUTIONS LLC 1801 E. Parkcourt Place Building D, Suite # 208 Santa Ana, CA 92701 Attention: President

FAYETTE REGIONAL HEALTH SYSTEM 1941 Virginia Avenue Connersville, IN 47331 Atlention:

17. Omnibus Reconciliation Act of 1980

Upon written request and envitme within four years after the termination of this Agreement, **RENOVO** will make available to the Secretary of Health and Human Services or to the Comptroller General, or to any of their authorized representatives access to any and all records or other documentation needed to verify the nature, extent, and cost of the services provided to *CLIENT*. If any of these services are provided through a subcontractor, this right of access shall be extended to the relevant records of the subcontractor. This right is provided in order to comply with the requirements of Section 952 of the Omnibus Reconciliation Act of 1980, Public Law 98-499, as contained in Section 1861 (V) (1) of the Social Security Act, and the Implementing regulations at 42 CFR Part 420.

18. Entire Agreement

This Agreement contains the entire agreement between the parties, and may only be amended or modified by written instrument signed by the parties. The partial invalidity of any provision of this Agreement shall not invalidate or affect the validity of the remaining provisions of this Agreement. If any provision of this Agreement is deemed invalid or unenforceable, this Agreement shall remain in full force and effect as if such invalid or unenforceable provision were omitted.

19. Walver

No failure by either party to require the performance by the other party of any of the terms of this Agreement shall in any way affect such party's rights to enforce such terms, nor shall any waiver on any one occasion be deemed a waiver of any other term hereof, or subsequent breach thereof. No right under this Agreement may be waived and no modification or amendment to this Agreement may be made except by whilen agreement executed by the parties.

RENOVO SQA CLIENT

Page 7 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

20. Jurisdiction

This Agreement shall be construed, interpreted, and governed by the laws of the State of Indiana. Time is of the essence for the purposes of this Agreement.

RENOVO SOLUTIONS LLC

n O By: (Signature CEO Tille: 2-16-15 Date: _

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FAYETTE REGIONAL HEALTH SYSTEM

February 11, 2016

11.60 Hisasile By: (Signalure W.C.FO Tílie:

A15/15 Date:

Purchase Order Number:

Attachments;

- Asset Management Inventory Asset Management Inventory Change Form Special Provisions Payment Schedule
- A. B. C. D.

RENOVO CLIENT

Page 8 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED

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EXHIBIT 2

November 7, 2018



Agreement No. FRHS-IN-001

Asset Management Agreement – Addendum #1

The Asset Management Agreement between RENOVO SOLUTIONS LLC (herein referred to as "RENOVO"), and FAYETTE REGIONAL HEALTH SYSTEM (herein referred to as "CLIENT"), is hereby amended according to the following terms and conditions.

1. Termination

Either RENOVO or CLIENT may terminate the term of this Agreement at any time during the term, without cause, by providing the other with at least sixty (60) days prior written notice to such termination.

2. Cost of Asset Management Program

RENOVO and CLIENT have agreed to new payment terms. All installment payments are to be paid by CLIENT and received by RENOVO no later than thirty (30) days from the first day of each month in which payment is due. RENOVO still reserves the right to suspend or withhold equipment maintenance services from CLIENT, in the event CLIENT does not adhere to the agreed upon payment terms stated. The withholding of services by RENOVO may include the removal of the Asset Management Technical Staff from CLIENT's premises until such payments have been brought up-to-date.

The Effective Date for the Implementation of this Addendum is November 1, 2018.

All other sections of Agreement No. FRHS-IN-001 will remain in full force and effect as previously agreed to by both parties.

RENOVO SOLUTIONS LLC Bv: (Sigpature) Name: Title: 11-13-1 Date:

FAYETTE REGIONAL HEALTH SYSEM (Signature 2822211128221 Name: Title: 7 Date:

RENOVO_____

Page 1 of 1 Copyright 2018 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED

EXHIBIT 3

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

 Date
 Invoice #

 1/31/2019
 056050 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

				1	P.O. No.		Terms
							Net 30
Quantity	Description	Serviced	Service	Event	Rate		Amount
1	EMERGENCY ROOM Parts Shipping Shipping SURGICAL SERVICES	12/31/2018 12/31/2018 12/17/2018 12/17/2018 01/23/2019 01/04/2019 01/31/2019	1980107 1980107 1973144 1973144 2009472 1986634 1987537		62 62 27 10 60	5.50 7.00 9.66 7.00 9.86 5.55 9.00 9%	175.50T 27.00T 62.66T 27.00T 10.86T 66.55T 75.00T 0.00
				Subtota	al		\$444.57
				Sales T	ax (0.0%)		\$0.00
	ices are subject to a service charge of 1.5% per mont e allowed by law.	h, not to exceed the	e .	Total			\$444.57

Phone # 844-473-6686



XPrinted: 02/01/2019 02:05 PM UTC

Billing - Time & Materials

Fayette Regional Health System for February 1, 2019 Billing

FINAL REPORT

SE #	Completed	Client PO #	Symptom	CE Tag #	Device			t	Зу	
1980107	12/31/2018			16427	ScottCare - I	nnovo - Telemetry S	ystem, Transmitter			
	Contract Coverage	: Par	ts: <none></none>			Lat	oor: <none></none>			
	Prc: 'em	: Leads need to b	e replaced.							
	Code / Resolution	Replaced Acces	ssory / Replaced lead wi	res						
						Туре	Description	Qty	Rate	Cha
						PARTS STD	100233B 3 LEAD CABLE	1	\$175.50	\$175
						PARTS STD	Shipping Shipping	1	\$27.00	\$2
							Total for	Service Ev	ent #1980107:	\$20
							Totals for Cardiac Pu	Imonary Rel	habilitation - :	\$20
SE #		Client PO #	Symptom	CE Tag # 14977 ance & Demand Mainten		are - 8300 - Aspirato			By Maintenance	
gency R SE # 1973144	Completed 12/17/2018 Contract Coverage Problem	:: Par a; Charger has be	ts: Scheduled Maintena en misplaced.	14977 ance & Demand Mainten	3M Health C		r por: Scheduled Maintenance			
SE #	Completed 12/17/2018 Contract Coverage Problem	:: Par a; Charger has be	ts: Scheduled Maintena	14977 ance & Demand Mainten	3M Health C					Cha
SE #	Completed 12/17/2018 Contract Coverage Problem	:: Par a; Charger has be	ts: Scheduled Maintena en misplaced.	14977 ance & Demand Mainten	3M Health C	Lat	oor: Scheduled Maintenanco	e & Demand Oty 1	Maintenance	
SE #	Completed 12/17/2018 Contract Coverage Problem	:: Par a; Charger has be	ts: Scheduled Maintena en misplaced.	14977 ance & Demand Mainten	3M Health C	Lat	Description EA-035UM-S2 AC TO	e & Demand Oty 1	Maintenance Rate	\$62
SE #	Completed 12/17/2018 Contract Coverage Problem	:: Par a; Charger has be	ts: Scheduled Maintena en misplaced.	14977 ance & Demand Mainten	3M Health C	Lat Type PARTS STD	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping	2 & Demand Qty 1 1	Maintenance Rate \$62.66	Cha \$62 \$27 \$89
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019	t: Par t; Charger has be t; Replaced Comp	ts: Scheduled Maintena en misplaced, ponent / Replaced charg	14977 ance & Demand Mainten ger 14826	3M Health C ance Sylvan - Ped	Lat Type PARTS STD PARTS STD ascan 100 - Transill	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for uminator	2 & Demand Oty 1 Service Eve	Maintenance Rate \$62.66 \$27.00 ent #1973144:	\$62 \$27
SE #	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019 Contract Coverage Problem	:: Par ;: Charger has be ;: Replaced Comp ;: Par ;: Par ;: Shipping charge	ts: Scheduled Maintena en misplaced. ponent / Replaced charg ts: Scheduled Maintena es for battery replaceme	14977 ance & Demand Mainten er 14826 ance & Demand Mainten ent on SE# 969692	3M Health C ance Sylvan - Ped ance	Lat Type PARTS STD PARTS STD ascan 100 - Transill	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for	2 & Demand Oty 1 Service Eve	Maintenance Rate \$62.66 \$27.00 ent #1973144:	\$62 \$21
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019 Contract Coverage Problem	:: Par ;: Charger has be ;: Replaced Comp ;: Par ;: Par ;: Shipping charge	ts: Scheduled Maintena en misplaced. ponent / Replaced charg ts: Scheduled Maintena es for battery replaceme	14977 ance & Demand Mainten rer 14826 ance & Demand Mainten	3M Health C ance Sylvan - Ped ance	Lat Type PARTS STD PARTS STD ascan 100 - Transill	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for uminator	2 & Demand Oty 1 Service Eve	Maintenance Rate \$62.66 \$27.00 ent #1973144:	\$62 \$27 \$89
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019 Contract Coverage Problem	:: Par ;: Charger has be ;: Replaced Comp ;: Par ;: Par ;: Shipping charge	ts: Scheduled Maintena en misplaced. ponent / Replaced charg ts: Scheduled Maintena es for battery replaceme	14977 ance & Demand Mainten er 14826 ance & Demand Mainten ent on SE# 969692	3M Health C ance Sylvan - Ped ance	Lat Type PARTS STD PARTS STD ascan 100 - Transill Lat	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for uminator for: Scheduled Maintenance	2 & Demand Qty 1 Service Eve 2 & Demand	Maintenance Rate \$62.66 \$27.00 ent #1973144: Maintenance	\$62 \$27



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							Totals	s for Emerge	ency Room - :	\$100.
alservi	Ce5 -									
E #	Completed	Client PO #	Symptom	CE Tag #	Device			B	у	
0000004	01/04/2019			10622	Zoll Medical	M Series - Defibrills	itor/Pacemakers, External			
986634	Contract Coverage	Dad	s: Scheduled Maintena				or: Scheduled Maintenance	& Demand M	Asintenance	
			CRASH CART SAYS IT I					a boniana n		
			onent / Replaced battery							
	Code / Resolution	i. ropioced comp			<u>5</u>	Туре	Description	Qty	Rate	Cha
		5				PARTS STD	8000-0299-01 1400/2000/1600/1700/ M SERIES/ AED PRO BATTERY (NOT	1	\$66.55	\$66
							UPGRADEABLE TO SMART BATTERY) FORMERLY 8004-000			
							Total for	Service Eve	ent #1986634:	\$6
987537	01/31/2019		Scheduled Maintena	nce 16381	NAI Tech Pr		CA+ - Radiographic, PACS, 0	Computer Lo	ogan Head	
	Contract Coverage		is: <none></none>			Lat	or: <none></none>			
		n: Scheduled Mair								
	Code / Resolution	1: SW Complete /	Sivi Complete			Туре	Description	Qty	Rate	Cha
						LABOR	B - Regular	0.5	\$150.00	\$75
							Total for	Service Eve	ent #1987537:	\$75
							Totals	for Surgica	I Services - :	\$14
								Billing	Grand-Total:	\$44

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Contract Invoice

 Date
 Invoice #

 2/28/2019
 056321 CNT

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

	Contract	No. P.C). No.	Terms
	FRHS-IN	-01		Due on receipt
Description	Invoid	e Coverage Peri	bd	Amount
Asset Management Service Contract Total sales tax calculated by AvaTax		19 to 03/14/2019		16,132.20 0.00
		Subtotal		\$ 16,132.20
		Sales Tax	(0.0%)	\$0.00
Past due invoices are subject to a service charge of 1.5% per month, not to e maximum rate allowed by law.	xceed the	Total		\$16,132.20
		Payments	s/Credits	\$0.00
		Balance I	Due	\$16,132.20

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Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

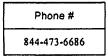
 Date
 Invoice #

 2/28/2019
 056493 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

				F	P.O. No.		Terms
							Net 30
Quantity	Description	Serviced	Service I	Event	Rate		Amount
]]]	Shipping INTENSIVE CARE CENTER	02/06/2019 02/06/2019 02/07/2019	2024323 2024323 2023384		10	1.86 9.92 1.50 1%	10.86T 10.92T 62.50T 0.00
			S	ubtota	1		\$84.28
			S	ales T	ax (0.0%)		\$ 0.00
Past due invo maximum rate	ices are subject to a service charge of 1.5% per e allowed by law.	month, not to exceed the	Т	otal			\$84.28





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Billing - Time & Materials

Fayette Regional Health System for March 1, 2019 Billing

FINAL REPORT

SE #	Completed	Client PO #	Symptom	CE Tag #	Device			B	У	
2024323	02/06/2019				CC: Biomed					
	Contract Coverage	: Parts	s: <none></none>			Lat	oor: <none></none>			
	Problem	EFedEx Shipping (October 2018 and Novem	ber 2018.						
	Code / Resolution	: No Action Neede	ed / Completed SE for Fed	Ex Shipping.						
						Туре	Description	Qty	Rate	Charg
						SHIPPING	FedEx Shipping - Oct 2018 FedEx Shipping	1	\$10.86	\$10.8
						SHIPPING	FedEx Shipping - Nov 2019 FedEx Shipping	1	\$10.92	\$10.5
							Total for	Service Eve	ent #2024323:	\$21.
								Totals f	for Biomed - :	\$21.
sive Care	Center-					100- <u></u>				
SE #	Completed	Client PO #	Symptom	CE Tag #	Device			By	у	NATIONAL DIST.
2023384	02/07/2019			10822	Zoll Medical - I	M Series - Defibrilla	ator/Pacemakers, External			
	Contract Coverage	e: Part:	s: Scheduled Maintenanc	e & Demand Mainten	ance	Lat	oor: Scheduled Maintenance	& Demand N	Maintenance	
	D 11									
	Problem	: Low battery								
		100	onent / Replaced battery a	nd verified proper ope	eration.					
		100	onent / Replaced battery a	nd verified proper ope	eration.	Туре	Description	Qty	Rate	Char
		100	onent / Replaced battery a	nd verified proper ope	eration.	Type PARTS STD	Description AS10720-1 Battery 10V 2 5AH	Qty 1	Rate \$62.50	Char \$62
		100	onent / Replaced battery a	nd verified proper ope	ration.		AS10720-1 Battery 10V 2 5AH	1		\$62
		100	onent / Replaced battery a	nd verified proper ope	ration.		AS10720-1 Battery 10V 2 5AH Total for	1 Service Eve	\$62,50	

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Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Contract Invoice

 Date
 Invoice #

 3/1/2019
 056718 CNT

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

	Contract	No. P.C	. No.	Terms
	FRHS-IN			Net 30
Description	Invoi	ce Coverage Peric	bd b	Amount
Asset Management Service Contract Total sales tax calculated by AvaTax		019 to 04/14/2019		17,860.65 0.00
		Subtotal		\$17,860.65
Past due invoices are subject to a service charge of 1.5% per month, n	ot to exceed the	Sales Tax	(0.0%)	\$0.00
naximum rate allowed by law.	5. 10 VAVON HIV	Total		\$17,860.65
		Payments	/Credits	\$0.00
		Balance [Due	\$17,860.65

Phone # 844-473-6686

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Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

 Date
 Invoice #

 3/31/2019
 057456 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

				F	P.O. No.	Terms
						Net 30
Quantity	Description	Serviced	Service	e Event	Rate	Amount
	BIOMEDICAL ENGINEERING Shipping NORTH STAR REHAB Parts PATIENT CARE SERVICES Parts Total sales tax calculated by AvaTax	03/11/2019 03/19/2019 03/05/2019	2060135 2061662 2041358		10. 152. 74. 0.	10 152.107
				Subtota	I	\$237.61
	<u> (</u>			Sales T	ax (0.0%)	\$0.00
	ices are subject to a service charge of 1.5% per e allowed by law.	month, not to exceed th	ie ,	Total		\$237.61

Phone #
844-473-6686



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Billing - Time & Materials

Fayette Regional Health System for April 1, 2019 Billing

FINAL REPORT

	Y	B			Device	CE Tag #		Symptom	Client PO #	Completed	SE #
		rbor	strative, Biomedical, Misc. ' a	ns - N/A - Adminis	Renovo Solutio	FRHS Contract	*			03/11/2019	2060135
			oor: <none></none>	Lab				rts: <none></none>	: Part	Contract Coverage	
							975 for \$10.92	es for SE#18769	: Shipping charge	Problem	
					ayette Regional	FedEx Shipping Fa	76975 \$10.92	ded / 104332-187	: No Action Neede	Code / Resolution	
Cha	Rate	Qty	Description	Туре							
\$11	\$10.92	1	FedEx Shipping Charges SE#1876975 Shipping Charges \$10.92	SHIPPING							
\$1	nt #2060135:	Service Eve	Total for								
			Total for Totals for Bi								
	ngineering - :				Device	CE Tag #		Symptom	Client PO #	nalts Completed	ī S tar Rel SE #
\$10 \$10	ngineering - :	iomedical E	Totals for Bi	aquet - Accutorr - N		CE Tag # 12367		Symptom	Client PO #	- Frank - Andrews	STAR 2 See
	ngineering - : /	iomedical E B	Totals for Bi		Datascope / Ma		Maintenance & [a kara a		Completed	SE # 2061662
	ngineering - : /	iomedical E B	Totals for Bi		Datascope / Ma	12367 Demand Maintenar		rts: Scheduled M		Completed 03/19/2019 Contract Coverage	SE # 2061662
	ngineering - : /	iomedical E B	Totals for Bi		Datascope / Ma nce	12367 Demand Maintenar Probe.	np probe, no O2	rts: Scheduled M B/P cuff. No tem	: Part Will not inflate B	Completed 03/19/2019 Contract Coverage	SE # 2061662
	ngineering - : /	iomedical E B	Totals for Bi		Datascope / Ma nce	12367 Demand Maintenar Probe.	np probe, no O2	rts: Scheduled M B/P cuff. No tem	: Part Will not inflate B	Completed 03/19/2019 Contract Coverage Problem	SE # 2061662
S10	ngineering - : /	iomedical E B	Totals for Bi Monitor, NIBP wor: Scheduled Maintenance	Lab	Datascope / Ma nce	12367 Demand Maintenar Probe.	np probe, no O2	rts: Scheduled M B/P cuff. No tem	: Part Will not inflate B	Completed 03/19/2019 Contract Coverage Problem	SE # 2061662



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							10	tals for North S	Star Rehab - :	\$152.1
ni sane si Se #	Completed	Client PO #	Symptom	CE Tag #	Device			By	y	
2041358	03/05/2019			11936	Baxter Healt	hcare Corp Fenwal -	Sigma Spectrum - Pump,	Infusion		
C	Contract Coverage:			ince & Demand Maintenan		Lab	oor: Scheduled Maintenar	ice & Demand N	Naintenance	
		terre a succession and the second second		t working. EQUIP DESCR						
	Code / Resolution:	Replaced Comp	onent / Replaced batter	y and verified proper opera	uon.	Туре	Description	Qty	Rate	Char
						PARTS STD	35724 SIGMA SPECTRUM STANDARD BATTER	1	\$74.59	\$74.
							Total f	or Service Eve	nt #2041358;	\$74.
18							Totals f	or Patient Care	e Services - :	\$74.
								Billing	Grand-Total:	\$237.

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Contract Invoice

 Date
 Invoice #

 4/1/2019
 057258 CNT

Bill To Ship To Fayette Regional Health System 1941 Virginia Ave 1941 Virginia Ave 1941 Virginia Ave. Connersville, IN 47331-2833 . US .

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	Contract N	o. P.O. No.	Terms
	FRHS-IN-0	1	Due on receipt
Description	Invoice	Coverage Period	Amount
Asset Management Service Contract Asset Management Service Contract - Billing Adjustment Asset Management Service Contract - Changes prior to 02/15/2019 Total sales tax calculated by AvaTax	02/15/20	19 to 05/14/2019 19 to 04/14/2019 19 to 02/14/2019	16,829.7(-894.44 -5.3: 0.0(
		Subtotal	\$15,929.9
		Sales Tax (0	.0%) \$0.0
Past due invoices are subject to a service charge of 1.5% per month, not to a naximum rate allowed by law.	exceed the	Total	\$15,929.9
		Payments/Cr	edits \$0.0
		Balance Due	\$15,929.9

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Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

 Date
 Invoice #

 4/30/2019
 057652 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

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				F	P.O. No.		Terms
							Net 30
Quantity	Description	Serviced	Service E	vent	Rate		Amount
1	PATIENT CARE SERVICES Paris Shipping SURGICAL SERVICES	04/22/2019 04/01/2019 04/01/2019 03/29/2019	2091903 2066988 2066988 2044768		27	.59 .00 .66	108.31T 74.59T 27.00T 237.66T 0.00
			Su	ubtota	.[\$447.56
			Sa	ales T	ax (0.0%)		\$0.00
	ices are subject to a service charge of 1.5% per e allowed by law.	month, not to exceed the	Т	otal			\$447,56

Phone #	
844-473-6686	



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Billing - Time & Materials

Fayette Regional Health System for May 1, 2019 Billing

FINAL REPORT

Psych- SE #	Completed	Client PO #	Symptom	CE Tag #	Device			E	Зу	
2091903	04/22/2019			12368	Mindray - Acc	cutorr V - Monitor, Vi	tal Signs			
1	Contract Coverage	: Par	ts: Scheduled Maintena	ince & Demand Maintana	nce	Lab	or: Scheduled Maintenance	& Demand	Mainten mce	
	Problem	: Battery needs r	eplaced.							
	Code / Resolution	: Replaced Acces	ssory / Replaced battery							
						Туре	Description	Qty	Rate	Char
						PARTS STD	115-018011-00 11.1V 4.4A LI-ION BATTERY	1	\$108.31	\$108.
							Total for	Service Ev	ent #2091903:	\$108.
								Totals for	Geri Psych - :	\$108.
THE REAL PROPERTY.	CONTRACTOR OF THE OWNER									
	Services - Completed	Client PO #	Symptom	CE Tag #	Device			E	By	
SE #	Completed	Client PO #	Symptom	CE Tag # 11932		care Corp Fenwal - :			3y	
SE # 2066988	Completed 04/01/2019 Contract Coverage: Problem	: Par	ts: <none> o be replaced.</none>	11932			Sigma Spectrum - Pump, Inf or: <none></none>		3y	
SE # 2066988	Completed 04/01/2019 Contract Coverage: Problem	: Par	ts: <none></none>	11932					ay Rate	Char
SE # 2066988	Completed 04/01/2019 Contract Coverage: Problem	: Par	ts: <none> o be replaced.</none>	11932		Lab	or: <none></none>	usion	·	Char \$74.



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Total for Service Event #2066988: \$101.59

Totals for Patient Care Services -: \$101.59

SE #	Completed	Client PO #	Symptom	CE Tag #	Device			E	By	
2044768	03/29/2019		Scheduled Maintenance	13929	Custom Ultras	onics - System 83 I	Plus - Sterilizing System, Wa	asher,		
C	ontract Coverage:	Parts	Scheduled Maintenance &	Demand Maintena	nce	Lab	or: Scheduled Maintenance	& Demand	Maintenance	
	Problem:	Scheduled Mainte	nance due.							
	Code / Resolution:	SM Complete / SM	A Complete							
						Туре	Description	Qty	Rate	Charge
						PARTS STD	13017 .1 micron filter	1	\$237.66	\$237.6
							Total for	Service Eve	ent #2044768:	\$237.6
							Totala	for Surviv	al Services - :	\$237,6

Billing Grand-Total: \$447.56

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Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Contract Invoice

Date	Invoice #
5/1/2019	057823 CNT

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

	Contract No	. P.O. No	. Terms
	FRHS-IN-01		Due on receipt
Description	Invoice	Coverage Period	Amount
Asset Management Service Contract Asset Management Service Contract - Billing Adjustment Total sales tax calculated by AvaTax		9 to 06/14/2019 9 to 05/14/2019	17,594.67 94.22 0.00
Past due invoices are subject to a service charge of 1.5% per month, not	t to exceed the	Subtotal Sales Tax (0	
maximum rate allowed by law.	-	Total	\$17,688.89
	Ļ	Payments/Ci	redits \$0.00
		Balance Due	\$17,688.89

Phone # 844-473-6686



Rutan & Tucker, LLP 611 Anton Blvd., Suite 1400 PO Box 1950 Costa Mesa, CA 92628-1950 (714) 641-5100 Fax (714) 546-9035 www.ruten.com

ORANGE COUNTY

PALO ALTO (650) 320-1500

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

VIA FEDEX

DATE:	August 21, 2019	CLIENT-MATTER NO.:	027426-0008
то:	BMC Group, Inc. Attn: FMHA Claims Process 3732 West 120 th Street Hawthorne, CA 90250	ing	
FROM:	Cecilia Solórzano		
SUBJECT:	In Re: Fayette Memorial Hos Health Systems USBC Case No. 18-07762-JJ	•	Fayette Regional
ATTACHED:	Amended Administrative Exp Solutions, LLC	pense Claim Form filed by	Renovo

	Your immediate	response is required	Please comment
	For your inform	ation	Please complete
	For your files		Please review
	Please acknowled	dge receipt	Please sign
	Please handle		Please sign and return originals
	Please telephone	me	In accordance with your request
\boxtimes	Other:	-	LLC's Amended Administrative Expense ith a copy of the face page of said claim. Ple

Claim Form for filing along with a copy of the face page of said claim. Please conform the face page and return to me in the enclosed self-addressed stamped envelope.

				200117120.77	CLAIM FORM	
Debtor: F	Fayette Memorial Ho	spital A	ssocia	tion	, Inc., Case No. 18-07762-JJG-11	
NOTE: This form should on through and including Ap	only be used to make a claim ril 30, 2019. IT SHOULD N	1 for an Ad SOT BE US	ministr SED FO	ative R CL	Expense arising or accruing from October 10, 2018 AIMS ARISING PRIOR TO OCTOBER 10, 2018.	
Name of Creditor (The person or or property) ² Renovo Solutions, L	323	r owes money	or		Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where notices s Proud Usahacharoenporn, F		nton Blvd.	,		Check box if you have never received any notices from the bankruptcy court in this case	
Suite 1400, Costa Mesa, CA Name and address where payment Proud Usahacharoenporn, Re 1400, Costa Mesa, CA 92626	t should be sent (if different) utan & Tucker LLP, 611 An	iton Blvd.,	Suite		Check box if the address differs from the address on the envelo sent to you by the court.	pe
Telephone number (714) 338-18	385					
Last four digits of account or other nur debtor:	nber by which creditor identifies FI	RHS-IN-01	1		1	
1. Basis for Administrative Claim Goods sold Services performed			Ret	iree be	nefits as defined in 11 U S C. § 1114(a)	EIVE
Money loaned Personal injury/wrongfu	ul death	Wages, salaries, and compensation (fill out below) Last four digits of your SS #: Unpaid compensation for services performed			s of your SS #:	
Taxes			1	rom	(date) - to (date) CMC	GRO
2. Date(s) debt was incurred 01/31/1		3. If cour	judgmen	t, date	obtained:	
 Check this box if claim inclusted, and the constraint of your claim inclusted additional charges. Please identify the property of the Dopenty of	udes interest or other charges in add		rincipal au		of the claim. Attach itemized statement of all interest or	
Description of Property:			iyments n	nade on	this claim by the Debtor have been credited and t claimed herein	
Basis for Perfection:		This (laim is no	st subie	et to any setoff or counterclaim.	
Value of Property:		_				
		This o	laim is su	bject to	o setoff or counterclaim as follows:	
7. This Administrative Proof of Claim is the first filed proof of clai herein	n m evidencing the claim asserted	8. Assignment				
amends/supplements a proo						
9. Supporting Documentation	f claim filed on					
Filers must leave out or redact documents that support the el	laim, such as promissory note rity agreements. Do not send o	s, purchase	orders, uments:	invoic they	n any attached documents. Attach redacted copies of an es, itemized statements of running accounts, contracts, may be destroyed after scanning. If the documents are r ent.	
Date	Sign and print the name and power of attorney, if any):	title, if any,	of the cr	editor	or other person authorized to file this claim (attach copy o	r
Date: 6/10/19		Ste				
	-	V				10

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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.



ADDENDUM TO ADMINISTRATIVE EXPENSE CLAIM

SUBMITTED BY RENOVO SOLUTIONS, LLC

Renovo Solutions, LLC ("Creditor") submits its Administrative Expense Claim in this bankruptcy case and asserts the claims described below against Fayette Memorial Hospital Association, Inc. d/b/a Fayette Regional Health System ("Debtor"). The bankruptcy estate is obligated to Creditor as set forth below:

On about February 11, 2015, Creditor and Debtor entered into an Asset Management Agreement (the "Agreement") pursuant to which Creditor provided management and coordination of equipment maintenance services for Debtor's equipment and assets in exchange for Debtor's agreement to pay for such services in the amount of \$235,000 per year plus certain costs. (Ex. 1.) Debtor agreed to make monthly payments to Creditor by the first of each month and agreed that any payments not timely made were subject to a late fee charge of 1.5%. (*Id.*) On about November 13, 2018, Creditor and Debtor entered into an Asset Management Agreement - Addendum #1 ("Addendum"), effective as of November 1, 2018, in which Creditor agreed to give Debtor 30 days from the date each monthly payment was due (the first of each month) to make the payment due that month. (Ex. 2.)

Creditor performed all obligations required of it under the Agreement and Addendum, including by providing services during the administrative claim period from 01/31/19 to 4/30/19 (except insfoar as excused by Debtor's nonperformance). To date, Debtor has failed and refused to pay for the goods and services provided from the administrative claim period that are reflected on Creditor's Invoices Nos. 056050 SVC, 056321 CNT, 056493 SVC, 056718 CNT, 057456 SVC, 057258 CNT, and 057652 SVC to Debtor that are collectively attached hereto as Exhibit 3. The total principal amount currently owed by Debtor to Creditor pursuant to these Invoices from the administrative claims period totals \$51,136.78 (not including interest and late fees).

RESERVATION OF RIGHTS

Creditor reserves all legal, equitable, and contractual rights against all parties. Nothing contained herein is intended, nor should it be construed, to be (i) an admission or waiver by Creditor of any matter or thing, (ii) a waiver of a right to a jury trial on any matter or thing to which such a right exists, (iii) consent to the entry of a final order or a final judgment by the Bankruptcy Court, (iv) a release, waiver, or modification of any rights of Creditor against any person, entity, or property, or any property in which Creditor may have a security interest or lien, (v) a release, waiver, or modification of, or obligation under, any contract, agreement, or understanding between Creditor and any other party, or (vi) an election of remedies by Creditor.

Creditor reserves the right to amend, modify, or supplement this Administrative Expense Claim for any reason, at any time and from time to time, and in any respect, including, without limitation, for purposes of recharacterizing in any manner the claims set forth herein, reflecting any additional amounts owing from the Debtor, and including herein further relevant evidence and information.

EXHIBIT 1



Agreement No. FRHS-IN-01

Asset Management Agreement

This Asset Management Agreement is made and entered between RENOVO SOLUTIONS LLC (herein referred to as "RENOVO"), and FAYETTE REGIONAL HEALTH SYSTEM (herein referred to as "CLIENT"). RENOVO agrees to provide comprehensive asset management services to CLIENT under the following terms and conditions.

1. Definitions

For purposes of this Agreement, terms used herein shall have meanings as follows:

- (a) The term "Agreement" shall mean this Asset Management Agreement, as may from time to time be amended, modified and supplemented in accordance with the provisions hereof.
- (b) The term "Annual Asset Management Program Cost" shall mean the annual cost, which CLIENT is obligated to pay to RENOVO under Section 7 of this Agreement.
- (c) The term "Asset Management Inventory" shall mean the equipment and other assets listed on Attachment "A" to this Agreement, which is incorporated herein by this reference as if fully set forth.
- (d) The term "Equipment Coverage Summary Report" shall mean the periodic report prepared by RENOVO Quarterly, which shall set forth the current Asset Management inventory.
- (e) The term "Asset Management Services" shall mean the services to be provided by RENOVO as set forth in Section 2 of this Agreement.
- (f) The term "Active Contract Report" shall mean the periodic report prepared by RBNOVO, which shall set forth the labor and material expenditures, which have accrued in providing the Asset Management Services.
- (g) The term "Preventive Maintenance Completion Report" shall mean the periodic report prepared by RENOVO, which shall detail the preventive maintenance provided by RENOVO as part of the Asset Management Services.
- (h) The term "Quality improvement Report" shall mean the Quarterly report prepared by RENOVO, which shall describe the actions and activities of RENOVO and CLIENT in making qualitative improvements to the Asset Management Program.
- (i) The term "Total Program Expenditures" shall mean the total cost of RENOVO in providing the Asset Management Services, including, without limitation, the wages and benefits peld to the Asset Management Technical Staff and other employees or agents of RENOVO providing Asset Management Services, as well as the costs incurred by RENOVO for materials and supplies utilized in providing the Asset Management Services.

CLIENT D.

Pege 1 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

2. Scope of RENOVO Services and Coverage

During the term of this Agreement, RENOVO will provide CLIENT with the Asset Management Services as follows:

- (a) RENOVO will essign an Account Manager to provide management and coordination of equipment maintenance services for the Asset Management Inventory (see Attachment A for specific details). Equipment maintenance services will be provided by <u>1 (one)</u> site based Biomedical Technician, Monday thru Friday from 8:00am thru 4:30pm, Renovo will provide support from regional Biomedical and Rediciogical Service Specialists (Herein referred to as the "Asset Management Technical Staff) on an as needed basis. When appropriate, technical staff from an approved independent Service Organization or the Original Equipment Manufacturers may be utilized. Asset Management Technical Staff are available 24 hours a day, 7 days per week by calling the Renovo Solutions Service Center at 888-736-6861.
- (b) RENOVO will be financially responsible for all labor and material costs associated with routine repairs and maintenance (excluding consumable supplies) for the Asset Management Inventory (see Attachments A & C for specific inclusions and exclusions) up to a maximum expense of \$150,000.00 on an annual basis. Any costs exceeding \$160,000.00 on an annual basis will be shared between RENOVO and CLIENT on a 50/50 basis.
- (c) Uptime Guarantee: RENOVO guarantees a 97% uptime for all imaging equipment items as measured on an annual basis. Uptime percentage for each item of equipment is calculated as follows: Total covered annual hours, minus total annual downlime hours, divided by total covered annual hours. A unit is considered down when it cannot produce a scan, image or film. It is also down when restricted to the point that it cannot be used for its intended purpose. Downlime starts at first call for covered service and ends at the production of a diagnostically acceptable scan, image or film and release of the unit to the customer for patient use. At the end of each Agreement yeer, CLIENT shall receive a reduction in each item's annual coverage amount for the following one (1) year Agreement period, equal to one percent (1%) of the annual coverage amount for the titem, for each percentage point below the guaranteed uptime percentage for the current year (with a maximum discount amount of 15%).

Furthermore, all hours associated with the following activities would not be included in the Uplime calculation: preventive (scheduled) maintenance hours, service hours not covered by the contract coverage, failures caused by acts of God, and replacement part shipping delays as the result of weather and are beyond our control.

RENOVO SDM

Page 2 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

3. Reports and Compliance

During the term of this Agreement, RKNOVO will maintain records and prepare reports, as follows:

- (a) All preventive maintenance and repair documentation will be kept on file at the premises of CLIENT, as well as at the offices of RENOVO.
- (b) RENOVO will ensure that all Asset Management Services are in compliance with current Joint Commission and DNV accreditation standards, as well as any applicable requirements promutgated by the State Department of Health Services and other regulatory agencies with jurisdiction over CLIENT. The Asset Management Technical Staff will be in attendance at the time of all regulatory surveys/inspections.
- (c) RENOVO will provide CLIENT with Quarterly reports detailing various aspects of the asset management program to include, but not be limited to, the following: Equipment Coverage Summary Report (quarterly), Preventive Maintenance Completion Report (monthly), Quality Improvement Report (quarterly), Service History Report (quarterly), Special Case Service History report (quarterly) and Program Evaluation Report (annually).

4. CLIENT Responsibilities

During the term of this Agreement, CLIENT will provide RENOVO with the following:

- (a) CLIENT shall provide the Asset Management Technical Staff and other employees and egents of RKNOVO with full and complete access to the Asset Management Inventory to permit RENOVO to provide the Asset Management Services in a timely manner.
- (b) CLIENT will provide the Asset Management Technical Staff and employees and agents of RBNOVO with all service records and reports, equipment manuals and warranty information of the Asset Management Inventory which will permit RENOVO to provide the Asset Management Services and secure warranty services on the Asset Management Inventory, as applicable.
- (c) CLIENT will provide the Asset Management Technical Staff with reasonable temporary (a desk, chair in the Blomed Office) office space during the normal working hours as specified in Section 2(a) of this Agreement, sufficient facilities to maintain the records pertaining to the Asset Management Inventory, as well as unrestricted high-speed internet access for our computerized information management system to function property.

5. Agreement Term

The commencement of the term of this Agreement shall be the later of 12:01 a.m. on <u>February 15, 2015</u>, or the date that the initial installment payment required by Section 7 of this Agreement is received by **RENOVO**, and shall continue for a term of sbdy (60) months, unless earlier terminated in accordance with the provisions described in Section 6 of this Agreement.

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CLIENT

Page 3 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

6. Termination

Either RENOVO or *CLIENT* may terminate the term of this Agreement et any time during the term, with cause, by providing the other with at least ninety (90) days prior written notice to such termination. Termination with cause, for purposes of this Agreement, shall mean a material breach of this Agreement which is not cured within thirty (30) days of delivery of written notice by the non-defaulting party, which notice shall reasonably describe the alleged default or defaults.

7. Cost of Asset Management Program

The Year 1 annual cost of the Asset Management Services described in this Agreement is <u>\$235,600,00</u>. Provided the equipment inventory and scope of coverage remain the same, **RENOVO** may adjust the annual cost for Years 4 & 5 for inflationary reasons, but any increase will not exceed the then current Consumers Price index (CPI). Installment payments of the Annual Asset Management Program Cost shall be made by *CLIENT* to **RENOVO** via chack according to the attached payment schedule (Attachment D). The first monthly installment payment of the annual Asset Management Program Cost will be due on the effective date of the agreement and the balance of the annual cost will be divided into elaven monthly installments, based on the number of days in each month.

Excluding the initial installment payment, all installment payments are to be paid by CLIENT and received by RENOVO no later than the first day of each month in which payment is due. All payments not made in a timely manner, shall be subject to a late fee charge of one and one-half percent (1½%) of the installment payment amount, which shall be paid with the delinquent installment payment without notice or demand. In addition to the late payment fee, RENOVO also reserves the right to suspend or withhold equipment maintenance services from CLIENT, in the event CLIENT does not adhere to the agreed upon payment terms stated above. The withholding of services by RENOVO may include the removal of the Asset Managament Technical Staff from CLIENT's premises until such payments have been brought upto-date. The cost of any services provided by RENOVO, which are not included in the Asset Managament Service shall be charged at hourly rates established by RENOVO, plus expenses, and shall be separately involced by RENOVO.

8. Asset Management Inventory Changes

Modifications (e.g. equipment additions/deletions and scope of services) to the Asset Management Inventory can be made at any time during the period of the Agreement provided however, all changes, including, without limitation, adjustments to the cost of Asset Management Services, must be mutually agreed upon in writing by both RENOVO and CLIENT. The Asset Management Inventory Change Form (Attachment B) is provided for this purpose.

RENOVO SDA

Page 4 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

9. Liability Limitations

CLIENT hereby acknowledges and agrees that the maximum cumulative liability RENOVO shall have during each successive twelve (12) month period of this Agreement for the maintenance and repair expenditures with respect to each piece of equipment shall be limited to the fair market value of a like model, age and condition as the applicable piece of equipment is at the applicable time, and for any single repair an amount equal to fifty percent (60%) of such value. Once such maximum with respect to any piece of equipment is reached, such piece shall be removed from the Asset Management inventory with no reduction in the amounts due hereunder for the duration of such 12-month period. In the event any such equipment requires repair after being removed from the Asset Management inventory, all such repairs will be performed by RENOVO on a Time and Material (T&M) basis at RENOVO's then prevailing rates. In no event shall RENOVO be liable to CLIENT under this Agreement, by reason of any tort, breach of contract, or warranty, indemnification or other legal liabilities, for prospective, consequential, incidental, exemplery, punitive, indirect or special damages, economic toss, loss of profits or similar damages suffered by CLIENT rising out of a breach or default In the performance of RENOVO's obligations under this Agreement. RENOVO will not pay for any maintenance-related expenditure which are incurred after the expiration of this Agreement. RENOVO covenants that the Asset Management Inventory will be fully operational as of the expiration of the term of this Agreement, reasonable wear and tear excepted.

10. Insurance Coverage

This Agreement shall not be deemed to create a legal partnership, association, joint venture or other similar arrangement between RENOVO and CLIENT, the intent of this Agreement being that both RENOVO and CLIENT shall be and shall remain independent contractors for the parformance of their respective obligations under this Agreement. Each party covenants and agrees that they shall maintain ilability insurance coverages for their respective businesses in a commercially reasonable amount, and shall maintain workers' compensation insurance in required amounts on their own employees. CLIENT agrees that it shall maintain property damage and casually insurance, at its expanse, on the Asset Management inventory, and that RENOVO shall have no liability to CLIENT for any loss, damage, or injury to, or caused by, the Asset Management inventory which does not arise from the negligent acts or omissions to acts of RENOVO.

11. Environmental Systems & Acts of God

RENOVO is not responsible for paying the cost of repair services to the Asset Management Inventory which are etiributable to the failure of *CLIENT*'s environmental systems, including but not limited to: electrical distribution system, heating, ventilation and air conditioning systems, water supply and disposal systems, and any other facility support system; as well as failures due to acts of God.

RENOVO Q CLIENT

Page 5 of 8 Copyright 2014 RENOVO SOLUTIONS LLC ALL RIGHTS RESERVED



Agreement No. FRHS-IN-01

Asset Management Agreement

12. Indemnification

RENOVO and *CLIENT* shall defend, indemnify and hold each other harmless from and against all claims, ilability, loss and expanses, including reasonable costs, collection expenses and attorney's fees, which may arise because of the negligence, misconduct, or other fault of the indemnifying party, its representatives or employees.

13. Force Majeure

The duties and obligations of each party to this Agreement are limited in the event of circumstances beyond their control, such as major disaster, spidemic, war, complete or partial destruction of facilities, and disability of a significant number of personnel, significant tabor disputes, and acts of God. In such an event, the parties hereto agree to use their best efforts under the circumstances to fulfill their duties and obligations under this Agreement by whatever means are available.

14. Confidentiality

Except as otherwise specifically provided in this Agreement, the parties to this Agreement each covenant that they shall keep the terms and conditions of this Agreement strictly confidential and shall not distribute copies of this Agreement or disclose the terms and conditions of this Agreement to any person or entity. As a limited exception to the foregoing, either party may distribute copies of this Agreement or disclose the terms and conditions as follows:

- (a) This Agreement and the terms and conditions of this Agreement may be disclosed to the parties' legal, GPO and tax advisors.
- (b) This Agreement and the terms and conditions of this Agreement may be disclosed as may be necessary and appropriate to enforce the terms of this Agreement or as may be directed by binding court orders or subpoenas.
- (c) This Agreement and the terms of this Agreement may be disclosed as may be required to prevent them from violating any applicable laws, statutes or regulations which govern the respective business activities of the parties.

15. Arbitration

Any controversy or claim anising out of or relating to this Agreement or the respective rights under this Agreement shall be settled by arbitration in Fayette County, Indiana. Such arbitration shall be in accordance with the rules of the American Arbitration Association, and judgment upon the award may be entered in any court of competent jurisdiction. The prevailing party in such arbitration and any ensuing legal action shall be reimbursed by the party who does not prevail, for the reasonable attorneys, accountant, and expert fees, and the cost of such actions.

RENOVO SDM

CLIENT

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Agreement No. FRHS-IN-01

Asset Management Agreement

16. Notices

Any notice, designation, consent or approval required or permitted hereunder shall be made in writing and delivered personality or mailed by certified mail, return receipt requested, addressed to the parties as hereinafter specified. Any notice forwarded by mail in accordance with the terms of this section shall be deemed to have been received, delivered or given to the other party three (3) business days following the date of mailing. Addresses for purposes of this Agreement, must be otherwise designated in a subsequent written notice or as follows:

RENOVO SOLUTIONS LLC 1801 E. Parkcourt Place Building D, Sulte # 208 Santa Ana, CA 92701 Attention: President

FAYETTE REGIONAL HEALTH SYSTEM 1941 Virginia Avenue Connersville, IN 47331 Attention:

17. Omnibus Reconciliation Act of 1980

Upon written request and envitime within four years after the termination of this Agreement, **RENOVO** will make available to the Secretary of Health and Human Services or to the Comptroller General, or to any of their authorized representatives access to any and all records or other documentation needed to verify the nature, extent, and cost of the services provided to *CLIENT*. If any of these services are provided through a subcontractor, this right of access shall be extended to the relevant records of the subcontractor. This right is provided in order to comply with the requirements of Section 952 of the Omnibus Reconciliation Act of 1980, Public Law 98-499, as contained in Section 1881 (V) (1) of the Social Security Act, and the Implementing regulations at 42 CFR Part 420.

18. Entire Agreement

This Agreement contains the entire agreement between the parties, and may only be amended or modified by written instrument signed by the parties. The partiel invalidity of any provision of this Agreement shall not invalidate or affect the validity of the remaining provisions of this Agreement. If any provision of this Agreement is deemed invalid or unenforceable, this Agreement shall remain in full force and effect as if such invalid or unenforceable provision were omitted.

19. Walver

No failure by either party to require the performance by the other party of any of the terms of this Agreement shall in any way affect such party's rights to enforce such terms, nor shall any waiver on any one occasion be deemed a waiver of any other term hereof, or subsequent breach thereof. No right under this Agreement may be waived and no modification or amendment to this Agreement may be made except by written agreement executed by the parties.

CLIENT

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Agreement No. FRHS-IN-01

Asset Management Agreement

20. Jurisdiction

This Agreement shall be construed, interpreted, and governed by the laws of the State of Indiana. Time is of the essence for the purposes of this Agreement.

RENOVO SOLUTIONS LLC

By: (Signatury) CEO Tille: 2-16-15 Date:

FAYETTE REGIONAL HEALTH SYSTEM

711.620 By: (Signalure) W.C.FO

February 11, 2016

Tille: A15/15 Date:

Purchase Order Number:

Attachments;

- A. B. C. D.
- Asset Management Inventory Asset Management Inventory Change Form Special Provisions Payment Schedule

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EXHIBIT 2

November 7, 2018



Agreement No. FRHS-IN-001

Asset Management Agreement – Addendum #1

The Asset Management Agreement between RENOVO SOLUTIONS LLC (herein referred to as "RENOVO"), and FAYETTE REGIONAL HEALTH SYSTEM (herein referred to as "CLIENT"), is hereby amended according to the following terms and conditions.

1. Termination

Either RENOVO or **CLIENT** may terminate the term of this Agreement at any time during the term, without cause, by providing the other with at least sixty (60) days prior written notice to such termination.

2. Cost of Asset Management Program

RENOVO and *CLIENT* have agreed to new payment terms. All installment payments are to be paid by *CLIENT* and received by RENOVO no later than thirty (30) days from the first day of each month in which payment is due. RENOVO still reserves the right to suspend or withhold equipment maintenance services from *CLIENT*, in the event *CLIENT* does not adhere to the agreed upon payment terms stated. The withholding of services by RENOVO may include the removal of the Asset Management Technical Staff from *CLIENT's* premises until such payments have been brought up-to-date.

The Effective Date for the implementation of this Addendum is November 1, 2018.

All other sections of Agreement No. FRHS-IN-001 will remain in full force and effect as previously agreed to by both parties.

RENOVO SOLUTIONS LLC By: Name: CED Title: 11-13-18 Date:

FAYETTE REGIONAL HEALTH SYSEM
By: - Xmman (au) Boll- Joul
(Signature)
Name: nrrrantha Bell-Dont
Title: <u>CFO</u>
Date: 11 12 13
Name: <u>Drygotha BellJont</u> Title: <u>CFO</u>

RENOVO____

CLIENT____

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EXHIBIT 3

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j.

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

Date	Invoice #
1/31/2019	056050 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

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				F	P.O. No.	Terms
						Net 30
Quantity	Description	Serviced	Sen	vice Event	Rate	Amount
1 1 1 1 0.5	CARDIAC PULMONARY REHABILITATION Parts Shipping EMERGENCY ROOM Parts Shipping SURGICAL SERVICES Parts Labor Total sales tax calculated by AvaTax	12/31/2018 12/31/2018 12/17/2018 12/17/2018 01/23/2019 01/04/2019 01/31/2019	198010 198010 197314 197314 200947 198663 198753	7 4 4 2 4	175. 27. 62. 27. 10. 66. 150. 0.009	00 27.00T 66 62.66T 00 27.00T 86 10.86T 55 66.55T 00 75.00T
			1	Subtota	1	\$444.57
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Sales Ta	ax (0.0%)	\$0.00
	ices are subject to a service charge of 1.5% per mont allowed by law.	h, not to exceed th	e	Total		\$444.57

Phone #

844-473-6686



XPrinted: 02/01/2019 02:05 PM UTC

Billing - Time & Materials

Fayette Regional Health System for February 1, 2019 Billing

FINAL REPORT

SE #	Completed	Client PO #	Symptom	CE Taq #	Device			В	V	Propagation and a second second
980107	12/31/2018			16427	ScottCare - I	novo - Telemetry Sy	stem Transmitter			
				10421	oconource in					
	Contract Coverage		ts: <none></none>			Lab	or: <none></none>			
		: Leads need to b								
	Code / Resolution	: Replaced Acces	sory / Replaced lead w	vires						
						Туре	Description	Qty	Rate	Char
						PARTS STD	100233B 3 LEAD CABLE	1	\$175.50	\$175.
						PARTS STD	Shipping Shipping	1	\$27.00	\$27.
							Total for	Service Eve	ent #1980107:	\$202.
							Totals for Cardiac Pul	monary Reh	nabilitation - :	\$202.
gency R	òom∽				a state of the second			States and states	and the second	
AND DECKNON										A Constant of the Alter
SE #	Completed	Client PO #	Symptom	CE Tag #	Device			В	y	
			Symptom	CE Tag #		are - 8300 - Aspirato				
SE # 1973144	Completed 12/17/2018 Contract Coverage	Client PO #	ts: Scheduled Mainter		3M Health Ca	and and the state of the state of the second s	or: Scheduled Maintenance			
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter en misplaced.	14977 nance & Demand Mainten	3M Health Ca	and and the second s				
E # 973144	Completed 12/17/2018 Contract Coverage Problem	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter	14977 nance & Demand Mainten	3M Health Ca	Lab	or: Scheduled Maintenance	& Demand M	Maintenance	
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter en misplaced.	14977 nance & Demand Mainten	3M Health Ca	Lab	or: Scheduled Maintenance Description		Maintenance Rate	Char
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter en misplaced.	14977 nance & Demand Mainten	3M Health Ca	Lab	or: Scheduled Maintenance Description EA-035UM-S2 AC TO	& Demand M	Maintenance	
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter en misplaced.	14977 nance & Demand Mainten	3M Health Ca	Lab Type PARTS STD	or: Scheduled Maintenance Description EA-035UM-S2 AC TO DC POWER ADAPTER	& Demand M	Maintenance Rate \$62.66	Char \$62.
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter en misplaced.	14977 nance & Demand Mainten	3M Health Ca	Lab	or: Scheduled Maintenance Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping	& Demand M Qty 1 1	Maintenance Rate \$62.66 \$27.00	Char \$62. \$27.
SE # 1973144	Completed 12/17/2018 Contract Coverage Problem Code / Resolution	Client PO # e: Par h: Charger has be	ts: Scheduled Mainter en misplaced.	14977 nance & Demand Mainten ger	3M Health Ca ance	Lab Type PARTS STD PARTS STD	or: Scheduled Maintenance Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for	& Demand M Qty 1 1	Maintenance Rate \$62.66	Char \$62.
SE # 1973144 2009472	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019	Client PO #	ts: Scheduled Mainter en misplaced. ionent / Replaced char	14977 nance & Demand Mainten ger 14826	3M Health Ca ance Sylvan - Pedi	Lab Type PARTS STD PARTS STD ascan 100 - Transillu	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for suminator	& Demand M Qty 1 1 Service Eve	Maintenance Rate \$62.66 \$27.00 ent #1973144:	Char \$62 \$27
SE # 1973144 2009472	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019 Contract Coverage Problem	Client PO # Charger has been Replaced Comp Replaced Comp Signal Shipping charge	ts: Scheduled Mainter en misplaced. ionent / Replaced char ts: Scheduled Mainter ss for battery replacem	14977 nance & Demand Mainten ger 14826 nance & Demand Mainten ent on SE# 969692	3M Health Ca ance Sylvan - Pedi ance	Lab Type PARTS STD PARTS STD ascan 100 - Transillu	or: Scheduled Maintenance Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for	& Demand M Qty 1 1 Service Eve	Maintenance Rate \$62.66 \$27.00 ent #1973144:	Char \$62. \$27.
SE # 1973144 2009472	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019 Contract Coverage Problem	Client PO # Charger has been Replaced Comp Replaced Comp Signal Shipping charge	ts: Scheduled Mainter en misplaced. ionent / Replaced char ts: Scheduled Mainter ss for battery replacem	14977 nance & Demand Mainten ger 14826 nance & Demand Mainten	3M Health Ca ance Sylvan - Pedi ance	Lab Type PARTS STD PARTS STD ascan 100 - Transillu	Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for suminator	& Demand M Qty 1 1 Service Eve	Maintenance Rate \$62.66 \$27.00 ent #1973144:	Char \$62. \$27. \$89.
SE # 1973144 2009472	Completed 12/17/2018 Contract Coverage Problem Code / Resolution 01/23/2019 Contract Coverage Problem	Client PO # Charger has been Replaced Comp Replaced Comp Signal Shipping charge	ts: Scheduled Mainter en misplaced. ionent / Replaced char ts: Scheduled Mainter ss for battery replacem	14977 nance & Demand Mainten ger 14826 nance & Demand Mainten ent on SE# 969692	3M Health Ca ance Sylvan - Pedi ance	Lab Type PARTS STD PARTS STD ascan 100 - Transillu Lab	or: Scheduled Maintenance Description EA-035UM-S2 AC TO DC POWER ADAPTER Shipping Shipping Total for iminator or: Scheduled Maintenance	& Demand M Qty 1 Service Eve & Demand M	Maintenance Rate \$62.66 \$27.00 ent #1973144: Maintenance	Char \$62. \$27.



XPrinted: 02/01/2019 02:05 PM UTC

							Tota	Is for Emerge	ency Room - :	\$100.5
al Servi E #	Ces - Completed	Client PO #	Symptom	CE Tag #	Device			B	у	
986634	01/04/2019			10622	Zoll Medical	- M Series - Defibrilla	tor/Pacemakers, External			
	Contract Coverage	: Pa	rts: Scheduled Maintenance	& Demand Maintenan	ce	Lab	or: Scheduled Maintenanc	e & Demand I	Maintenance	
	Problem	BATTERY ON	CRASH CART SAYS IT NEE	DS REPLACED EQU	IP DESCR: C	RASH CAST IN PAC	U			
	Code / Resolution	: Replaced Corr	ponent / Replaced battery							
						Туре	Description	Qty	Rate	Char
		ş				PARTS STD	8000-0299-01 1400/2000/1600/17000 BATTERY (NOT UPGRADEABLE TO SMART BATTERY) FORMERLY 8004-000		\$66.55	\$66.
							Total fo	r Service Eve	ent #1986634:	\$66
987537	01/31/2019		Scheduled Maintenance	16381	NAI Tech Pro		CA+ - Radiographic, PACS,	Computer L	ogan Head	
	Contract Coverage		rts: <none></none>			Lab	or: <none></none>			
		: Scheduled Ma								
	Code / Resolution	i: SM Complete	7 SW Complete			Туре	Description	Qty	Rate	Char
						LABOR	B - Regular	0.5	\$150.00	\$75
							Total fo	r Service Eve	ent #1987537:	\$75
							Tota	Is for Surgica	I Services - :	\$141
								Billing	Grand-Total:	\$444

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Date	Invoice #
2/28/2019	056321 CNT

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

				·····		
	Contract	No.	P.O. No.		Terms	
	FRHS-IN	-01			Due on receipt	
Description	Invoi	ce Covera	ige Period	Amount		
Asset Management Service Contract Total sales tax calculated by AvaTax)19 to 03/1			16,132.20 0.00	
			ototal es Tax (0	.0%)	\$16,132.20	
Past due invoices are subject to a service charge of 1.5% per month, not to exe	ceed the				\$0.00	
naximum rate allowed by law.		To	tal		\$16,132.20	
•		1			••••••••••	
			ments/Cr	edits	\$0.00	

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

Date	Invoice #
2/28/2019	056493 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

				F	P.O. No.		Terms
	· · · · · · · · · · · · · · · · · · ·						Net 30
Quantity	Description	Serviced	Service I	Event	Rate		Amount
]	BIOMED Shipping INTENSIVE CARE CENTER Parts Total sales tax calculated by AvaTax	02/06/2019 02/06/2019 02/07/2019	2024323 2024323 2023384		10	.86 .92 .50 %	10.86T 10.92T 62.50T 0.00
			S	ubtota	1		\$84.28
		<u></u>	Sa	ales Ta	ax (0.0%)		\$0.00
Past due invoi maximum rate	ces are subject to a service charge of 1.5% per month allowed by law.	a, not to exceed the	Т	otal			\$84.28



Billing - Time & Materials

Fayette Regional Health System for March 1, 2019 Billing

FINAL REPORT

ledj- SE #	Completed	Client PO #	Symptom	CE Tag #	Device			By	y	
2024323	02/06/2019				CC: Biomed					
	Contract Coverage	e: Par	ts: <none></none>			Lal	oor: <none></none>	<i>t</i> 2		
	Problem	n: FedEx Shipping	October 2018 and N	ovember 2018.						
	Code / Resolution	: No Action Need	ed / Completed SE fo	or FedEx Shipping.						
						Туре	Description	Qty	Rate	Cha
						SHIPPING	FedEx Shipping - Oct 2018 FedEx Shipping	1	\$10.86	\$10
						SHIPPING	FedEx Shipping - Nov 2019 FedEx Shipping	1	\$10.92	\$10
							Total for	Service Eve	nt #2024323:	\$21
								Totals f	or Biomed - :	\$21
sivo Car	a Cantor-									distant de la compañía de la compañí
	e Center -	Client PO #	Sumatom	CE Tag #	Davisa			B		
SE #	Completed	Client PO #	Symptom	CE Tag #	Device			Ву	/	
SE #	Completed 02/07/2019			10822	Zoll Medical - I		ator/Pacemakers, External			- 2- 7 - 1-1
sive Care SE # 2023384	Completed 02/07/2019 Contract Coverage	e: Par			Zoll Medical - I		ator/Pacemakers, External por: Scheduled Maintenance			
SE #	Completed 02/07/2019 Contract Coverage Problem	e: Par n: Low battery	ts: Scheduled Mainte	10822 enance & Demand Mainter	Zoll Medical - I nance					
SE #	Completed 02/07/2019 Contract Coverage Problem	e: Par n: Low battery	ts: Scheduled Mainte	10822	Zoll Medical - I nance	Lal	por: Scheduled Maintenance	e & Demand M	Naintenance	
SE #	Completed 02/07/2019 Contract Coverage Problem	e: Par n: Low battery	ts: Scheduled Mainte	10822 enance & Demand Mainter	Zoll Medical - I nance					Chai
SE #	Completed 02/07/2019 Contract Coverage Problem	e: Par n: Low battery	ts: Scheduled Mainte	10822 enance & Demand Mainter	Zoll Medical - I nance	Lal	por: Scheduled Maintenance	e & Demand M	Naintenance	
SE #	Completed 02/07/2019 Contract Coverage Problem	e: Par n: Low battery	ts: Scheduled Mainte	10822 enance & Demand Mainter	Zoll Medical - I nance	Lal Type	Description AS10720-1 Battery 10V 2.5AH	e & Demand M Qty 1	Naintenance Rate	Cha
SE #	Completed 02/07/2019 Contract Coverage Problem	e: Par n: Low battery	ts: Scheduled Mainte	10822 enance & Demand Mainter	Zoll Medical - I nance	Lal Type	Description AS10720-1 Battery 10V 2.5AH Total for	2 & Demand M Qty 1 Service Even	Naintenance Rate \$62.50	Cha \$62

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Contract Invoice

Date	Invoice #
3/1/2019	056718 CNT

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

	Contract N	lo. P.O. No	o. Terms
	FRHS-IN-	DI	Net 30
Description	Invoic	e Coverage Period	Amount
Asset Management Service Contract Total sales tax calculated by AvaTax	03/15/20	019 to 04/14/2019	17,860.65
		Subtotal Sales Tax ((\$17,860.6
Past due invoices are subject to a service charge of 1.5% per month, not t	o exceed the	-	5.0%) \$0.0
naximum rate allowed by law.		Total	\$17,860.6
		Payments/C	redits \$0.0
		Balance Due	€ \$17,860.6

Phone # 844-473-6686

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4 Executive Circle Suite 185 Irvine, CA 92614 Phone: 844-473-6686

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

 Date
 Invoice #

 3/31/2019
 057456 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

					P.O. No.		Terms
							Net 30
Quantity	Description	Serviced	Service (Event	Rate		Amount
I	BIOMEDICAL ENGINEERING Shipping NORTH STAR REHAB Parts PATIENT CARE SERVICES Parts Total sales tax calculated by AvaTax	03/11/2019 03/19/2019 03/05/2019	2060135 2061662 2041358		152	9.92 2.10 4.59 0.00	10.92T 152.10T 74.59T 0.00
	L	I	S	ubtota	1	1	\$237.61
			S	ales T	ax (0.0%)		\$0.00
	ices are subject to a service charge of 1.5% per e allowed by law.	' Т	otal			\$ 237.61	

Phone #

844-473-6686



Billing - Time & Materials

Fayette Regional Health System for April 1, 2019 Billing

FINAL REPORT

nedical E SE #	Completed	Client PO #	Symptom	CE Tag #	Device			By	y	
2060135	03/11/2019			FRHS Contract	Renovo Solut	ions - N/A - Adminis	strative, Biomedical, Misc. La	abor		
	Contract Coverage	e: Part	ts: <none></none>			Lal	oor: <none></none>			
	Problem	n: Shipping charge	es for SE#1876975 for	r \$10.92						
	Code / Resolution	n: No Action Need	ed / 104332-1876975	\$10.92 FedEx Shipping	ayette Regional					
						Туре	Description	Qty	Rate	Char
						SHIPPING	FedEx Shipping Charges SE#1876975 Shipping Charges \$10.92	1	\$10.92	\$10.
							Total for	Service Eve	nt #2060135:	\$10.
									nt #2060135: ngineering - :	\$10. \$10.
h Star Re SE #	hab Completed	Client PO #	Symptom	CE Tag #	Device				ngineering - :	
SE #	Completed	Client PO #	Symptom			Maguet - Accutorr -	Totals for B	iomedical Er	ngineering - :	
	Completed 03/19/2019 Contract Coverage Problem	e: Part	ts: Scheduled Mainter 3/P cuff. No temp pro	12367 nance & Demand Maintena be, no O2 probe.	Datascope / I ance	Maquet - Accutorr - Lat	Totals for B	iomedical Er	ngineering - : Y	
SE #	Completed 03/19/2019 Contract Coverage Problem	e: Part	ts: Scheduled Mainter 3/P cuff. No temp pro	12367 nance & Demand Maintena	Datascope / I ance	58 C	Totals for B	iomedical Er	ngineering - : Y	
SE #	Completed 03/19/2019 Contract Coverage Problem	e: Part	ts: Scheduled Mainter 3/P cuff. No temp pro	12367 nance & Demand Maintena be, no O2 probe.	Datascope / I ance	Lal	Totals for B Monitor, NIBP por: Scheduled Maintenance	iomedical Er By e & Demand N	ngineering - : y Aaintenance	\$10.



XPrinted: 04/01/2019 02:49 PM UTC

				5			Tota	Is for North S	Star Rehab - :	\$152.
nt Care Se SE #	rvices - Completed	Client PO #	Symptom	CE Tag #	Device			By		
2041358	03/05/2019			11936	Baxter Health	ncare Corp Fenwal -	Sigma Spectrum - Pump, I	nfusion		
c	Contract Coverag			ance & Demand Maintena		Lab	or: Scheduled Maintenanc	e & Demand N	Naintenance	
				ot working. EQUIP DESC y and verified proper oper						
			n de gelegen kannen son in de standen son de service annan son en gelegen van annan			Туре	Description	Qty	Rate	Cha
					-	PARTS STD	35724 SIGMA SPECTRUM STANDARD BATTERY	1	\$74.59	\$74
							Total fo	r Service Eve	nt #2041358:	\$74
*							Totals fo	r Patient Car	e Services - :	\$74
								Billing	Grand-Total:	\$23

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Contract Invoice

Date	Invoice #
4/1/2019	057258 CNT

Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

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Ship To
Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

	Contract No.	P.O. No.	Terms
	FRHS-IN-01		Due on receipt
Description	Invoice C	overage Period	Amount
Asset Management Service Contract Asset Management Service Contract - Billing Adjustment Asset Management Service Contract - Changes prior to 02/15/2019 Total sales tax calculated by AvaTax	02/15/2019	to 05/14/2019 to 04/14/2019 to 02/14/2019	16,829.7 -894.4 -5.3 0.0
		Subtotal	\$15,929.9
		Sales Tax (0.0	%) \$0.0
Past due invoices are subject to a service charge of 1.5% per month, not to naximum rate allowed by law.	exceed the	Total	\$15,929.9
		Payments/Cred	dits \$0.0
		Balance Due	\$15,929.9

Phone

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Bill To

Fayette Regional Health System 1941 Virginia Ave Connersville, IN 47331-2833 US

Service Invoice

 Date
 Invoice #

 4/30/2019
 057652 SVC

Ship To

Fayette Regional Health System 1941 Virginia Ave. Connersville, IN 47331

					P.O. No.		Terms
							Net 30
Quantity	Description	Serviced	Service	Event	Rate		Amount
1	PATIENT CARE SERVICES Parts Shipping SURGICAL SERVICES	04/22/2019 04/01/2019 04/01/2019 03/29/2019	2091903 2066988 2066988 2044768			.59 .00 .66	108.31T 74.59T 27.00T 237.66T 0.00
		<u></u>		Subtota	al		\$447.56
				Sales T	'ax (0.0%)		\$0.00
	ices are subject to a service charge of 1.5% pe e allowed by law.	r month, not to exceed th	e .	Total			\$447.56

Phone #

844-473-6686



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Billing - Time & Materials

Fayette Regional Health System for May 1, 2019 Billing

FINAL REPORT

SE #	Completed	Client PO #	Symptom	CE Tag #	Device			В	у	
2091903	04/22/2019			12368	Mindray - Ac	cutorr V - Monitor, Vi	tal Signs			
	Contract Coverage	: Pa	rts: Scheduled Maintenance	& Demand Maintena	ance	Lab	or: Scheduled Maintenance	& Demand N	Maintenance	
	Problem	: Battery needs	eplaced.							
	Code / Resolution	: Replaced Acce	ssory / Replaced battery							
						Туре	Description	Qty	Rate	Char
						PARTS STD	115-018011-00 11.1V 4.4A LI-ION BATTERY	1	\$108.31	\$108.
							Total for	Service Eve	ent #2091903:	\$108.
								Totals for (Geri Psych - :	\$108
nt Care S SE #	Services - Completed	Client PO #	Symptom	CE Tag #	Device			Totals for (\$108
		Client PO #	Symptom	CE Tag # 11932		ncare Corp Fenwal -	Sigma Spectrum - Pump, Inf	B		\$108.
SE # 2066988	Completed 04/01/2019 Contract Coverage Problem	:: Pa n: Battery needs	rts: <none></none>					B		\$108
SE # 2066988	Completed 04/01/2019 Contract Coverage Problem	:: Pa n: Battery needs	rts: <none></none>				Sigma Spectrum - Pump, Inf	B		\$108
SE # 2066988	Completed 04/01/2019 Contract Coverage Problem	:: Pa n: Battery needs	rts: <none></none>			Lab	Sigma Spectrum - Pump, Inf or: <none></none>	B	y	



XPrinted: 05/01/2019 08.23 PM UTC

Total for Service Event #2	066988: \$101.59
Total for Dervice Lvent #2	.000500. \$101.55

Totals for Patient Care Services -: \$101.59

SE #	ices - Completed	Client PO #	Symptom	CE Tag #	Device	i stran i sveni sveni Na sveni s		Ē	Зу	
2044768	Contract Coverage: Problem:	Scheduled Mainte		13929 Demand Maintenar		•	Plus - Sterilizing System, Wa or: Scheduled Maintenance		Maintenance	
	Code / Resolution:	SM Complete / SI	M Complete			Туре	Description	Qty	Rate	Charge
						PARTS STD	13017 .1 micron filter	1	\$237.66	\$237.66
							Total for	Service Ev	ent #2044768:	\$237.66
							Totals	for Surgic	al Services - :	\$237.66

Billing Grand-Total: \$447.56



Rutan & Tucker, LLP 611 Anton Blvd., Suite 1400 PO Box 1950 Costa Mesa, CA 92628-1950 (714) 641-5100 Fax (714) 546-9035 www.rutan.com ORANGE COUNTY

PALO ALTO (650) 320-1500

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

VIA FEDEX

DATE:	June 10, 2019	CLIENT-MATTER NO.:	027426-0008		
то:	BMC Group, Inc. Attn: FMHA Claims Process 3732 West 120 th Street Hawthorne, CA 90250	ing			
FROM:	Cecilia Solórzano				
SUBJECT:	In Re: Fayette Memorial Hospital Association, Inc. dba Fayette Regional Health Systems USBC Case No. 18-07762-JJG-11				
ATTACHED:	Administrative Expense Claim Form filed by Renovo Solutions, LLC				

	Your immediate	response is required		Please comment
	For your inform	ation		Please complete
	For your files			Please review
	Please acknowled	dge receipt		Please sign
	Please handle			Please sign and return originals
	Please telephone me			In accordance with your request
\boxtimes	Other:	Enclosed is Renovo Solutions,	LL	C's Administrative Expense Claim Fo

Other: Enclosed is Renovo Solutions, LLC's Administrative Expense Claim Form for filing along with a copy of the face page of said claim. Please conform the face page and return to me in the enclosed self-addressed stamped envelope.