

Debtor 1 Fayette Memorial Hospital Association, Inc.

Debtor 2  
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of: Indiana  
(State)

Case number 18-07762

RECEIVED  
JUN 11 2019  
BMC GROUP

Official Form 410

Proof of Claim 04/16

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

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

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

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

Identify the Claim																															
1. Who is the current creditor?	<u>AIG Property Casualty, Inc. and its affiliates identified on the Addendum hereto</u> Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor																														
2. Has this claim been acquired from someone else?	No Yes. From whom?																														
3. Where should notices and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<table border="1"><thead><tr><th colspan="2">Where should notices to the creditor be sent?</th><th colspan="3">Where should payments to the creditor be sent? (if different)</th></tr></thead><tbody><tr><td colspan="2"><u>AIG Property Casualty, Inc., Attn: Kevin J. Lerner.</u> Eso. Name</td><td colspan="3">Name</td></tr><tr><td colspan="2"><u>80 Pine Street, 13th Floor</u> Number Street</td><td colspan="3">Number Street</td></tr><tr><td colspan="2"><u>New York, NY 10005</u> City State ZIP Code</td><td colspan="3">City State ZIP Code</td></tr><tr><td colspan="2">Contact phone <u>(212) 458-7101</u></td><td colspan="3">Contact phone</td></tr><tr><td colspan="2">Contact email <u>kevin.lerner@aig.com</u></td><td colspan="3">Contact email</td></tr></tbody></table>	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)			<u>AIG Property Casualty, Inc., Attn: Kevin J. Lerner.</u> Eso. Name		Name			<u>80 Pine Street, 13th Floor</u> Number Street		Number Street			<u>New York, NY 10005</u> City State ZIP Code		City State ZIP Code			Contact phone <u>(212) 458-7101</u>		Contact phone			Contact email <u>kevin.lerner@aig.com</u>		Contact email		
Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)																													
<u>AIG Property Casualty, Inc., Attn: Kevin J. Lerner.</u> Eso. Name		Name																													
<u>80 Pine Street, 13th Floor</u> Number Street		Number Street																													
<u>New York, NY 10005</u> City State ZIP Code		City State ZIP Code																													
Contact phone <u>(212) 458-7101</u>		Contact phone																													
Contact email <u>kevin.lerner@aig.com</u>		Contact email																													
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):																														
4. Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known) Filed on: MM / DD / YYYY																														
5. Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?																														

FMHA POC  
18-07762-00176  
00176

8. Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account number you use to identify the debtor: _____	
9. How much is the claim?	<u>\$UNLIQUIDATED (SEE ATTACHED)**</u> ** Subject to adjustment	Does this amount include interest of other charges? No Yes Attach statement itemizing interest, fees, expenses or other charges required by Bankruptcy Rule 3001(c)(2) (A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.  <u>SEE ATTACHED</u>	
9. Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. <b>Nature of property:</b> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe:  <b>Basis for perfection:</b> Attach redacted copies of documents, if any, that show evidence of perfection of as security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the liens has been filed or recorded.)  Value of property:                    \$ Amount of the claim that is secured:                    \$ Amount of the claim that is unsecured:                    \$                    (The sum of the secured and unsecured amounts should match the amount in line 7)  Amount necessary to cure any default as of the date of the petition: \$  Annual Interest Rate (when case was filed)                    ___% Fixed Variable	
10. Is the claim based on a lease?	No Yes. Amount necessary to cure any default as of the date of the petition. \$	
1. Is the claim subject to a right of setoff?	No Yes. Identify the property: <u>SEE ATTACHED</u>	
2. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?  A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	No Yes. Check all that apply: Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B) Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	Amount entitled to priority \$ \$

	Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.	\$ \$ \$
* Amounts subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.		

Sign Below	
<p><b>The person completing this proof of claim must sign and date it. FRBP 9011(b).</b></p> <p>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</p> <p><b>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 3751.</b></p>	<p><i>Check the appropriate box:</i></p> <p>I am the creditor.</p> <p>I am the creditor's attorney or authorized agent.</p> <p>I am the trustee, of the debtor, or their authorized agent. Bankruptcy Rule 3004.</p> <p>I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.</p> <p>I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.</p> <p>I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>6/10/2019</u> MM / DD / YYYY</p> <p>Signature _____</p> <p><b>Print the name of the person who is completing and signing this claim:</b></p> <p>Name <u>Kevin J. Lerner, Esq.</u> First Name Middle Name Last Name</p> <p>Title <u>Authorized Representative</u></p> <p>Company <u>AIG Property Casualty, Inc.</u> Identify the corporate servicers as the company if the authorized agent is a servicer.</p> <p>Address <u>80 Pine Street, 13th Floor</u> Number Street</p> <p><u>New York, NY 10005</u> City State ZIP Code</p> <p>Contact phone <u>(212) 438-7101</u> Email <u>kevin.lerner@aig.com</u></p>

**UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF INDIANA**

In re:  <b>FAYETTE MEMORIAL HOSPITAL ASSOCIATION, INC. d/b/a FAYETTE REGIONAL HEALTH SYSTEMS,</b>  <b>Debtor.</b>	Chapter 11  Case No. 18-07762
---	-------------------------------------

**ADDENDUM TO PROOF OF CLAIM OF NATIONAL UNION FIRE INSURANCE  
COMPANY OF PITTSBURGH, PA., AMERICAN HOME ASSURANCE COMPANY,  
LEXINGTON INSURANCE COMPANY, ILLINOIS NATIONAL INSURANCE  
COMPANY, AND CERTAIN OTHER  
ENTITIES RELATED TO AIG PROPERTY CASUALTY, INC.**

National Union Fire Insurance Company of Pittsburgh, Pa., American Home Assurance Company, Lexington Insurance Company, Illinois National Insurance Company, and certain other entities related to AIG Property Casualty, Inc. (collectively, "**AIG**") that provide or provided insurance, insurance services and/or surety bonds to Fayette Memorial Hospital Association, Inc. d/b/a Fayette Regional Health Systems, ("**Debtor**"), hereby submit this addendum (the "**Addendum**") to its proof of claim (the "**Proof of Claim**").

1. As of October 10, 2018 (the "**Petition Date**"), the Debtor is indebted to AIG for premiums, deductibles, and other related fees, expenses and obligations for, among other things, insurance coverages and services provided and to be provided by AIG to the Debtor as more fully described below.

2. **The Insurance Program.** AIG provided the Debtor with certain insurance coverages, including, without limitation, burglary, directors and officers, fidelity, liability, aircraft, medical malpractice, and other services pursuant to various insurance policies and other agreements (collectively, the "**Insurance Program**") for varying periods commencing October 1, 1996 and ending 12:01 a.m., September 1, 2019. Attached hereto is a list of the policies issued by AIG to the Debtor and certain related documentation. This claim is made for all obligations of the Debtor and other named insureds arising under the Insurance Program whether or not the relevant insurance policies and related agreements are specifically listed or described in the attached list or documents. Moreover, the documents which evidence the Insurance Program are voluminous and it is not practical to attach and/or list all of them. Nothing in this description of the Insurance Program or any of the attached documents is intended to vary, amend or alter in any way the terms, conditions, coverages, limitations, exclusions or dates of coverage of any policy or coverage.

3. **Fidelity and Surety Bonds.** AIG may have provided the Debtor with various surety, fidelity and other bonds for the account of the Debtor. Claim is asserted for all such bonds issued or outstanding and for all premiums, fees and expenses due thereunder, whether or not specifically listed or described in the attached documents. Nothing in this description of the bond programs is intended to vary, amend or alter in any way the terms, conditions, coverages, limitations, exclusions or dates of coverage of any bond. Should AIG be called upon to pay on any such bond, AIG may amend this proof of claim to assert a claim on account of such payment.

4. **Components of the Proof of Claim.**

to pay to AIG, among other things, certain premiums, deductibles, self-insured retention, reimbursement obligations, fees, expenses and related costs that are not readily calculable as this time. Such amounts remain unmatured, contingent and/or unliquidated, and such amounts constitute AIG's unliquidated claim. When the amount of premiums, deductibles, fees, expenses and other costs due under the Insurance Program, including, without limitation, damages that may arise from the rejection of the Insurance Program or any part thereof, are liquidated, become mature or are determined, such amounts shall become a liquidated claim. AIG expressly reserves the right to amend or supplement its Proof of Claim at any time, including after any bar date, for whatever reason, including without limitation, for the purpose of filing additional claims or to specify the amount of AIG's unmatured, contingent and/or unliquidated claim as they become matured and/or liquidated.

(b) **Other Insurance or Services.** To the extent AIG provides or provided any other or different insurance (including excess coverages or renewals of the Insurance Program), or other services to the Debtor, either included within or in addition to the Insurance Program, AIG hereby asserts a claim for all obligations of the Debtor to AIG arising thereunder, including, without limitation, premiums, deductibles, self-insured retention, reimbursement obligations, fees, expenses and other costs arising from such transactions, or from funds advanced or to be advanced on the Debtor's behalf. Additionally, AIG reserves the right to amend this proof of claim to assert further amounts due or particulars in connection therewith.

(c) **Bond Obligations.** To the extent of any bonds outstanding, the Debtor agreed to pay to AIG, among other things, any and all loss and expense, including, without limitation, attorneys' fees, incurred by AIG by reason of having issued any such bonds, and losses incurred as a result of the issuance of any bonds. The amount presently due AIG with respect to any bonds is unliquidated and untabulated.

(d) **Quantum Meruit.** To the extent the Debtor received a benefit from insurance or from bonds provided by AIG, the Debtor is obligated to pay AIG for the value of the benefits received.

(e) **Indemnity Obligations.** In the event the Debtor has entered into any agreement with AIG pursuant to which Debtor has a duty to indemnify AIG, a claim is made herein for such right to indemnity.

(f) **Other.** In connection with the foregoing, the Debtor also may be liable to AIG by virtue of relevant principles of contract and common law relating to, among other things, subrogation, suretyship, indemnification or contribution.

5. **Right of Recoupment.** AIG asserts the right to use funds paid to it on account of, among other things, the Insurance Program to recoup obligations of the Debtor arising from, among other things, the Insurance Program.

6. **Security.** To the extent AIG holds any cash or other collateral as security for its claim, regardless of whether such cash or collateral is property of the Debtor's estate, AIG asserts a secured claim and/or a right of setoff and reserves its rights to collect against same by recoupment and/or setoff. Alternatively, or in addition, to the extent AIG holds an interest in any property of the Debtor, AIG asserts a security interest in same.

7. **Interest.** AIG claims all rights to claim interest to the extent permitted by law, including post-petition interest to the extent such interest is secured. To the extent this claim or any portion hereof, is unliquidated, appropriate interest (if any) remains unliquidated at this time. In preparing any tabulation of a liquidated claim, we will endeavor to include a tabulation of applicable interest to the extent dates of accrual of obligations can be readily ascertained. AIG reserves the right to amend such calculations and to claim additional interest as facts are learned, data compiled, and/or unliquidated claims become liquidated.

8. **Voluminous Documents Not Attached.** As indicated above, supporting documents for this Proof of Claim are voluminous. Additionally, supporting documents may contain confidential or privileged information. Supporting documents, including policies of insurance, are not attached, but may be made available upon request.

9. **Administrative Expense.** To the extent AIG's claim against the Debtor relates to insurance coverage provided after the Petition Date, AIG is entitled to administrative priority

to administrative priority under section 503(b)(1) as an “actual, necessary” cost of preserving the bankruptcy estate); see also Metropolitan Ins. Co. v. Sharon Steel Corp. (In re Sharon Steel Corp.), 161 B.R. 934, 937 (Bankr. W.D. Pa. 1994); In re Gamma Fishing Co., 70 B.R. 949, 953-54 (Bankr. S.D. Cal. 1987). Therefore, through this Proof of Claim, AIG also asserts an administrative expense claim for all services provided, risks insured or occurrences occurring after the Petition Date, all or a portion of which may be set forth in this Proof of Claim. To the extent any amounts set forth herein are entitled to administrative expense priority, AIG hereby requests immediate allowance and payment of its administrative expense. Any failure by AIG to specifically assert an administrative expense claim against the Debtor’s estate shall not be deemed a waiver by AIG of its right to payment of an administrative expense, said right being asserted herein and fully preserved.

**10. Arbitration.** The filing of this Proof of Claim is not intended to waive any right to arbitration. AIG expressly reserves the right to seek arbitration of any dispute arising in connection with this claim. To the extent of any pre-existing arbitration agreement between AIG and Debtor, this court’s jurisdiction to resolve disputes should be limited to referring such disputes to arbitration and enforcing any arbitration award.

**11. No Consent to Jurisdiction; No Waiver of Jury Trial.** The filing of this Proof of Claim is not and shall not be deemed or construed as: (i) a consent to jurisdiction of this Court with respect to proceedings, if any, commenced in the Debtor’s case involving the Proof of Claim or AIG; (ii) a waiver or release of AIG’s right to a trial by jury in this Court or any other court in any proceeding as to any and all matters so triable herein, whether or not the same be designated legal, public, or private rights in any case, controversy or proceeding related hereto, notwithstanding any designation of such matters as “core” proceedings pursuant to 28 U.S.C. § 157(b)(2), and whether such jury trial right is pursuant to statute or the United States Constitution; (iii) a consent to this Court’s entry of final orders or judgments with respect to the Proof of Claim or any other matter involving AIG; (iv) a waiver of AIG’s right to have any and all orders and judgments of this Court reviewed *de novo* by a court duly authorized under Article III of the United States Constitution; or (v) a waiver of AIG’s right to move to withdraw the reference with respect to the subject matter of this Proof of Claim, any objection thereto or other proceeding which may be commenced in the Debtor’s bankruptcy case or otherwise involving AIG.

**12. Reservation of Rights.** In executing and filing this Proof of Claim, AIG: (i) does not waive any right or rights that it has or may have against any other persons liable for all or part of the claim set forth herein; (ii) expressly reserves the right to amend or supplement this proof of claim in any respect; (iii) expressly reserves the right to assert all claims, causes of action, defenses, offsets or counterclaims; and (iv) expressly reserves the right to contest insurance coverage in the event of each or any claim that may be tendered by the Debtor for coverage.

Fayette Memorial Hospital Association, Inc. dba Fayette Regional Health System  
 Petition Date: 10/10/2018  
 Policy List Date: 06/05/2019

Policy #	Profit Center	Branch	Major Class	Ultimate D&B	Account #	Insured Name	Writing Company	Effective	Expiration	Under Last
00067665592	39 - PRIVATE AND N	14 - PHILADELPHIA	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2011-09-01	2012-09-01	
00066830414	39 - PRIVATE AND N	14 - PHILADELPHIA	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2010-09-01	2011-09-01	
00065054702	39 - PRIVATE AND N	08 - PITTSBURGH	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2010-09-01	2011-09-01	
00065033751	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2011-09-01	2012-09-01	
00018632722	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2018-09-01	2019-09-01	FROGGATT
00018632659	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2018-09-01	2019-09-01	FROGGATT
00018245238	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2017-09-01	2018-09-01	FROGGATT
00018245237	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2017-09-01	2018-09-01	FROGGATT
00017679123	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2016-09-01	2017-09-01	
00017679122	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2016-09-01	2017-09-01	
00016604804	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2015-09-01	2016-09-01	
00016604799	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2015-09-01	2016-09-01	
00015653738	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2014-09-01	2015-09-01	
00015653435	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2014-09-01	2015-09-01	
00013571993	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2013-09-01	2014-09-01	
00013548864	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2013-09-01	2014-09-01	
00011814513	39 - PRIVATE AND N	08 - PITTSBURGH	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2008-09-01	2009-09-01	
00011807091	39 - PRIVATE AND N	14 - PHILADELPHIA	FIDELITY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2009-09-01	2010-09-01	
00011796221	39 - PRIVATE AND N	14 - PHILADELPHIA	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2008-09-01	2009-09-01	
00011793640	39 - PRIVATE AND N	08 - PITTSBURGH	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2008-09-01	2010-09-01	
00011377108	39 - PRIVATE AND N	02 - CHICAGO	BURGLARY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2012-09-01	2013-09-01	
00011326334	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2012-09-01	2013-09-01	
00006735622	39 - PRIVATE AND N	02 - CHICAGO	FIDELITY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	AMERICAN HOME ASSURANCE CO	2006-09-01	2007-09-01	
00006735602	39 - PRIVATE AND N	02 - CHICAGO	LIAB/OT AUTO/BI CLM	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2006-09-01	2007-09-01	
00006735585	39 - PRIVATE AND N	02 - CHICAGO	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	NATIONAL UNION FIRE INS.CO.	2006-09-01	2007-09-01	
00001932814	39 - PRIVATE AND N	14 - PHILADELPHIA	FIDELITY	68734466	68734466	FAYETTE REGIONAL HEALTH SYSTEM	AMERICAN HOME ASSURANCE CO	2007-09-01	2008-09-01	
00001932765	39 - PRIVATE AND N	08 - PITTSBURGH	LIAB/OT AUTO/BI CLM	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	AMERICAN HOME ASSURANCE CO	2007-09-01	2008-09-01	
00001932762	39 - PRIVATE AND N	08 - PITTSBURGH	D & O - CLAIMS MADE	156520611	156520611	FAYETTE REGIONAL HEALTH SYSTEM	AMERICAN HOME ASSURANCE CO	2007-09-01	2008-09-01	
00006791460	07 - LEX HEALTHCAR	31 - HOUSTON	MED MALPRACTICE C	21475827	21475827	FAYETTE MEMORIAL HOSPITAL	LEXINGTON INSURANCE COMPANY	2002-10-01	2005-10-01	
00003385095	14 - AEROSPACE	07 - ATLANTA	AIRCRAFT - ALL PERIL	21475827	0	FAYETTE MEMORIAL HOSPITAL ASSO	ILLINOIS NATIONAL INS CO	1996-10-01	2004-07-01	
00008591460	39 - PRIVATE AND N	81 - SAN ANTONIO	D & O - CLAIMS MADE	21475827	21475827	FAYETTE MEMORIAL HOSPITAL, INC	NATIONAL UNION FIRE INS.CO.	1999-07-06	2000-07-06	
00008564934	39 - PRIVATE AND N	81 - SAN ANTONIO	D & O - CLAIMS MADE	21475827	21475827	FAYETTE MEMORIAL HOSPITAL, INC	NATIONAL UNION FIRE INS.CO.	1998-07-06	1999-07-06	

AIG PROPERTY CASUALTY, INC.  
100 CONNELL DRIVE, 04 WEST FLOOR  
BERKELEY HEIGHTS, NJ 07922

June 10, 2019

VIA OVERNIGHT MAIL

BMC Group, Inc.  
Attn: FMHA Claims Processing  
3732 West 120th Street  
Hawthorne, CA 90250

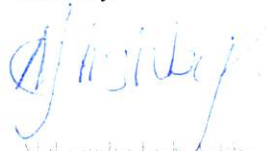
Re: Fayette Memorial Hospital Association, Inc. dba Fayette Regional Health System  
Case Number: 18-07762

To whom this may concern:

Enclosed please find one original and one copy of a Proof of Claim for the case mentioned above. Please file the originals in the Court file, kindly have the copies stamped "Filed", and return the copies in the enclosed self-addressed stamped envelope.

If you have any questions, please do not hesitate to contact me at (973) 351-8576.  
Thank you for your cooperation in this matter.

Sincerely,



Aleksandra Fisk Ashtby  
Litigation Paralegal