Fill in this information to identify the case:						
Debtor 1	Fayette Memorial Hospital Association, Inc.					
Debtor 2 (Spouse, if filing)						
United States	Bankruptcy Court for the: Southern District of Indiana, Indianapolis Division					
Case number	18-07762-JJG-11					

E-Filed on 06/16/2019 Claim # 201

Modified Form 410

Proof of Claim 04/16

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

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

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

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

Part 1: **Identify the Claim** 1. Who is the current Miriam Emile creditor? Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor Has this claim been ✓ No acquired from ☐ Yes. From whom? _ someone else? 3. Where should notices Where should notices to the creditor be sent? Where should payments to the creditor be sent? (if and payments to the different) creditor be sent? Federal Rule of Name Bankruptcy Procedure (FRBP) 2002(g) PO BOX 1041 Number Street Street Number ОН 45373 Troy City State ZIP Code State ZIP Code Contact phone (937) 367-6483 Contact email Contact email Uniform claim identifier for electronic payments in chapter 13 (if you use one): ✓ No Does this claim amend one already filed? ☐ Yes. Claim number on court claims registry (if known) ____ Filed on MM / DD / YYYY 5. Do you know if anyone ✓ No else has filed a proof ☐ Yes. Who made the earlier filing? of claim for this claim?

6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	\$\$ Does this amount include interest or other charges? ✓ No ✓ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
3.	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. Services Performed
9.	Is all or part of the claim secured?	Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
		Value of property: \$
		Amount of the claim that is secured: \$ Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.
		Amount necessary to cure any default as of the date of the petition: \$
		Annual Interest Rate (when case was filed)% ☐ Fixed ☐ Variable
10	. Is this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$
11	. Is this claim subject to a right of setoff?	✓ No ✓ Yes. Identify the property:

A claim may be partly priority and partly priority and partly priority and partly priority and partly priority. For example, in some categories, the law limits the amount entitled to priority. Domestic support obligations (including alimony and child support) under										
A claim may be partly priority and partly priority p			₽ No							
princity and partly nonpriotity. For example, in some categories, the amount entitled to priority. 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). Up to \$2,850° of deposits toward purchase, lease, or rental of property or services for law limits the amount entitled to priority. Up to \$2,850° of deposits toward purchase, lease, or rental of property or services for law limits and the priority. Wages, salaries, or commissions (put to \$1,2850°) earned within 180 days before the barrouptry petition is field or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). Taxes or penalties eved to governmental units. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Taxes or penalties eved to governmental units. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Taxes or penalties oved to governmental units. 11 U.S.C. § 507(a)(5). Taxes or penalties oved to governmental units. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Taxes or penalties oved to governmental units. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Taxes or penalties oved to governmental units. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Contributions to an employee benefit plan. 11 U.S.C.			☐ Yes. Check	k one:	Amount entitled to priority					
in some categories, the amount entitled to priority. Up to \$22,500* of deposits floward purchase, lease, or rental of property or services for law limits the amount entitled to priority. Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filled or the debtor's business ends, whichever is earlier. \$\\ \text{\$\frac{1}{2}\$ \text{\$\frac{1}{2}\$} \te		priority and partly			\$0.00					
Wages, salaries, or commissions (pur to \$1,2,60) earned within 180 days before the bankruptory perition is filled or the debtor's business ends, whichever is earlier. \$ 11 U.S.C. § \$507(a)(4). \$ \$ 12 Contributions to an employee benefit plan. 11 U.S.C. § \$507(a)(5). \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		in some categories, the law limits the amount			\$0.00					
Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(3). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies. * Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment. 13. is all or part of the claim entitled to administrative priority pursuant to the date of adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment. 13. is all or part of the claim entitled to administrative priority pursuant to the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the date of commencement of the above case, in the commencement of the commencement of the above case, in the comme		chance to phony.	bankru	ptcy petition is filed or the debtor's business ends, whichever is earlier.	\$0.00					
Other: Specify subsection of 11 U.S.C. § 507(a)() that applies.			☐ Taxes	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$0.00					
* Amounts are subject to adjustment on 401/19 and every 3 years after that for cases begun on or after the date of adjustment. 13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. \$ 503(b)(9)? Part 3: Sign Below The person completing this proof of claim must sign and date it. FRPB 9011(b). If you file this claim electronically, FRBP 5005(a)(2) authorizes courts o establish local rules specifying what a signature is establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000 mprisoned for up to 5 years, or both. If 30.3 C. \$ \$ 152, 157, and 3571. **Mariam Emile** Name** Miriam Emile** First name** Miriam Emile** Company **Amounts are subject to adjustment on 401/19 and every 3 years after that for cases begun on or after the date of adjustment. 13. Is all or part of the claim entitied to administrative priority pursuant to the claim the amount of your claim erising from the value of any goods received by the believe rules of the above cases. In the believe rules of the above cases. In the believe rule and believe the sense of such. 14			☐ Contrib	outions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$					
13. Is all or part of the claim entitled to administrative priority pursuant to administrative priority pursuant to administrative priority pursuant to administrative priority pursuant to the person completing this proof of Laim sign and date it. FREP 9011(b). I am the creditor's attorney or authorized agent. I am the creditor's attorney or authorized agent. I am the creditor's attorney or authorized agent. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3004. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. A person who files a fraudulent claim could be fined up to \$500,000, [mprisoned for up to 5] sears, or both. 18 U.S.C. §§ 152, 157, and 3571. Micriam Emile Signature Print the name of the person who is completing and signing this claim: Name Mirram Emile Signature Print the name of the person who is completing and signing this claim: Name Mirram Emile Signature Print the name of the person who is completing and signing this claim: Name Mirram Emile Signature Print the name of the person who is completing and signing this claim: Name Mirram Emile Signature Print the name of the person who is completing and signing this claim: Name Mirram Emile Signature Print the name of the person who is completing and signing this claim: Name Mirram Emile Signature Print the name of the person who is completing and signing this claim: Name Signature Print the name of the person who is completing and signing this claim: Name Signature Print the name of the person who is completing and signing this claim: Name Signature Number Street			Other.	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$					
claim entitled to administrative priority pursuant priority pursua			* Amounts	are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or af	ter the date of adjustment.					
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this proof of claim must sign and date it. FRBP 9011(b). If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. I aw the creditor's attorney or authorized agent. Bankruptcy Rule 3004. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. I declare under penalty of perjury that the foregoing is true and correct. Executed on date O6/16/2019 Miriam Emile Signature Print the name of the person who is completing and signing this claim: Name Miriam Emile Signature Print the name of the person who is completing and signing this claim: Name Miriam Emile Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code		Part 3: Sign Below								
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If you file this claim electronically, FRBP and the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating to amount of the claim, the creditor gave the debtor credit for any payments received toward the debt. If a we examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct. I declare under penalty of perjury that the foregoing is true and correct. I declare under penalty of perjury that the foregoing is true and correct. Executed on date OB/16/2019 Executed on date OB/16/2019 Miriam Emile Signature Print the name of the person who is completing and signing this claim: Name Miriam Emile First name Middle name Last name Title Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code			☑ I am the creditor.							
electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. I understand that an authorized signature on this *Proof of Claim** serves as an acknowledgment that when calculating to amount of the claim, the creditor gave the debtor credit for any payments received toward the debt. I have examined the information in this *Proof of Claim** serves as an acknowledgment that when calculating to amount of the claim, the creditor gave the debtor credit for any payments received toward the debt. I have examined the information in this *Proof of Claim** and have a reasonable belief that the information is true and correct. I declare under penalty of perjury that the foregoing is true and correct. Executed on date **06/16/2019** **Miriam Emile** **Signature** **Print the name of the person who is completing and signing this claim:* **Name** **Miriam Emile** **First name** **Miriam Emile** **First name** **Miriam Emile** **First name** **Title** **Company** I understand that an authorized signature on this **Proof of Claim** serves as an acknowledgment that when calculating to amount of the claim, the creditor gave the debtor credit for any payments received toward the debt. I have examined the information in this **Proof of Claim** and have a reasonable belief that the information is true and correct. I declare under penalty of perjury that the foregoing is true and correct. **Executed on date** **Miriam Emile** **First name** **Miriam Emile** **First name** **Miriam Emile** **First name** **Miriam Emile** **Title** **Address** **Number** **Street** **City** **State** **ZIP Code**			☐ I am the creditor's attorney or authorized agent.							
SoOS(a)(2) authorizes courts to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. 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. 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. 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. 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. 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. A person who files a fraudulent claim, the creditor gave the debtor credit for any payments received toward the debt. A declare under penalty of perjury that the foregoing is true and correct. Executed on date										
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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. I declare under penalty of perjury that the foregoing is true and correct. Executed on date O6/16/2019 Miriam Emile Signature Print the name of the person who is completing and signing this claim: Name Miriam Emile First name Middle name Last name Title Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code		specifying what a signature	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.							
To declare under penalty of perjury that the foregoing is true and correct. Executed on date 06/16/2019 MM / DD / YYYY Miriam Emile Signature Print the name of the person who is completing and signing this claim: Name Miriam Emile First name Middle name Last name Title Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Otty State ZIP Code		fraudulent claim could be fined up to \$500,000, imprisoned for up to 5		d the information in this <i>Proof of Claim</i> and have a reasonable belief that the inf	formation is true					
Miriam Emile Signature Print the name of the person who is completing and signing this claim: Name Miriam Emile First name Miriam Emile First name Middle name Last name Title Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code		18 U.S.C. §§ 152, 157, and	I declare under	penalty of perjury that the foregoing is true and correct.						
Print the name of the person who is completing and signing this claim: Name		3571.	Executed on da							
Name Miriam Emile First name Middle name Last name Title Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code				·						
First name Middle name Last name Title Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code			Print the name	of the person who is completing and signing this claim:						
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Company Identify the corporate servicer as the company if the authorized agent is a servicer. Address Number Street City State ZIP Code			Title	This haire widde haire East haire						
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Number Street City State ZIP Code			Company	Identify the corporate servicer as the company if the authorized agent is a servicer.						
Number Street City State ZIP Code			Address							
				Number Street	· · · · · · · · · · · · · · · · · · ·					
				City State ZIP Code						
			Contact phone	Email						

Attachment 1 - Fayette 457b.pdf

Description -

Activity Summary for the period 1/1/2019 to 6/7/2019	
Beginning Balance as of 01/01/2019:	\$81,355.30
Contributions	\$0.00
Earnings	\$0.00
Gain/Loss	\$9,580.76
Transfers	\$0.00
Distributions	\$0.00
Ending Balance as of 06/07/2019:	\$90,936.06
Vested Balance as of 06/07/2019:	\$90,936.06
Rate of Return:	11.78%

Investment Summary as of 6/7/2019	Units	Price	Balance	Percentage
Vanguard LifeStrgy Growth	2706.430	\$33.60	\$90,936.06	100.00 %
			\$90,936.06	100 %

Account Summary as of 6/7/2019	ount Summary as of 6/7/2019		Balance	Percentage	
Plan Account Plan Account	\$90,936.06	100.0 %	\$90,936.06	100.00 %	
	\$90,936.06		\$90,936.06	100 %	

Deferral Source Summary as of 6/7/2019	Vested Balance	Vested %	Balance	Percentage	
Elective Deferrals	\$90,936.06	100.0 %	\$90,936.06	100.00 %	
	\$90,936.06		\$90,936.06	100 %	

Investment Activity for the period 1/1/2019 to 6/7/2019	Beginning Balance	Contributions	Transfers	Earnings	Gain/Loss	Distributions	Ending Balance
Vanguard LifeStrgy Growth	\$81,355.30	\$0.00	\$0.00	\$0.00	\$9,580.76	\$0.00	\$90,936.06
	\$81,355.30	\$0.00	\$0.00	\$0.00	\$9,580.76	\$0.00	\$90,936.06

Account Activity for the period 1/1/2019 to 6/7/2019	Beginning Balance	Contributions	Earnings	Gain/Loss	Distributions	Ending Balance
Plan Account Plan Account	\$81,355.30	\$0.00	\$0.00	\$9,580.76	\$0.00	\$90,936.06
	\$81,355.30	\$0.00	\$0.00	\$9,580.76	\$0.00	\$90,936.06

Deferral Source Activity for the period 1/1/2019 to 6/7/2019	Beginning Balance	Contributions	Earnings	Gain/Loss	Distributions	Ending Balance
Elective Deferrals	\$81,355.30	\$0.00	\$0.00	\$9,580.76	\$0.00	\$90,936.06
	\$81,355.30	\$0.00	\$0.00	\$9,580.76	\$0.00	\$90,936.06