

Fill in this information to identify the case:

Debtor 1 Hutcheson Medical Center, Inc.

Debtor 2
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Georgia

Case number 14-42863-pwb

RECEIVED

DEC 22 2015

BMC GROUP

Official Form 410

Proof of Claim

12/15

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. §§ 162, 167, and 3671.

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

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Daniel & Yeager, LLC</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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Daniel & Yeager, LLC</u> Name <u>6767 Old Madison Pike, Suite 690</u> Number Street <u>Huntsville</u> <u>AL</u> <u>35806</u> City State ZIP Code Contact phone <u>256-382-5320</u> Contact email <u>Mike.Williams@dystaffing.com</u>	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____ Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>278</u> Filed on <u>04/22/2015</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Hutcheson Med POC



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Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☒ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 170,582.88. Does this amount include interest or other charges?
☐ No
☒ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.

Services Performed

9. Is all or part of the claim secured? ☐ No
☒ Yes. The claim is secured by a lien on property.
Nature of property:
☒ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: Chickamauga Clinic

Basis for perfection: Judicial Lien

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: \$ 350,000.00

Amount of the claim that is secured: \$ 170,582.88

Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) _____ %

☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ 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).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5006(a)(2) authorizes courts to establish local rules specifying what a signature is.

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

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date

12/15/2015
MM / DD / YYYY

Signature

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

Name

Mike

Williams

First name

Middle name

Last name

Title

Chief Financial Officer

Company

Daniel & Yeager, LLC

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

6767 Old Madison Pike, Suite 690

Number Street

Huntsville

AL

35806

City

State

ZIP Code

Contact phone

256-382-5320

Email

Mike.Williams@dystaffing.com

UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF GEORGIA		PROOF OF CLAIM
Name of Debtor: Hutcheson Medical Center, Inc.	Case Number: 14-42863-pwb	<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> RECEIVED APR 22 2015 BMC GROUP </div>
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or entity to whom the debtor owes money or property): Daniel & Yeager, LLC		
Name and addresses where notices should be sent: Daniel & Yeager, LLC Attention: Mike Williams, CFO 6767 Old Madison Pike Suite 690 Huntsville, AL 35806 Telephone number: 256-382-5320 email: Mike_Williams@dstaffing.com		COURT USE ONLY
Name and addresses where payment should be sent (if different from above):		<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (if known) Filed on: _____
Telephone number: _____ Email: _____		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
1. Amount of Claim as of Date Case Filed: \$170,582.88 If all or part of your claim is secured, complete item 4. If all or part of your claim is entitled to priority, complete item 5. Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis For Claim: <u>Services Provided</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: _____	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)
4. Secured Claim (See instruction #4) Check the appropriate box if your claim is secured by a lien on property or a right of setoff, attached required documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). </div> <div style="width: 30%;"> <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. § 507(a)(4). </div> <div style="width: 30%;"> <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7). </div> <div style="width: 30%;"> <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). </div> <div style="width: 30%;"> <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) _____. </div> </div> <div style="text-align: right; margin-top: 10px;"> Amount entitled to priority: \$ _____ </div>		
*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.		
6. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		
7. Documents: Attach are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements. If the claim is secured, box 4 has been completed and redacted copies of documents providing		

Hutcheson Med POC



00278

evidence of perfection of a security interest. (See instruction #7, and the definition of "redacted")

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.

☐ I am the creditor.

☒ I am the creditor's authorized agent.
(Attach copy of power of attorney, if any.)

☐ I am the trustee, or the debtor,
or their authorized agent.
(See Bankruptcy Rule 3004.)

☐ I am a guarantor, surety, indorser, or other codebtor.
(See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Mike Williams

Title: Chief Financial Officer

Company: Daniel & Yeager, LLC

Address and telephone number (if different from notice address above):

6767 Old Madison Pike

Suite 690

Huntsville, AL 35806

Telephone number: 256-382-5320

email: Mike_Williams@dystaffing.com

(Signature)

(Date)

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

In Re:

Hutcheson Medical Center, Inc.

Case No. 14-42863-pwb
Chapter 11

Debtor.

CREDITOR: Daniel & Yeager, Inc.

SUMMARY OF CLAIM

TOTAL OF CLAIM.....\$170,582.88

Amount owed under Agreement dated March 31, 2014: \$216,000.00

Payments:

<u>Check No.</u>	<u>Date Posted</u>	<u>Amount</u>
3164	4/30/2014	\$ 7,500.00
3685	6/26/2014	7,844.29
3902	7/9/2014	7,500.00
3996	7/21/2014	7,500.00
4284	8/18/2014	7,500.00
4447	9/9/2014	7,572.83
2014 Total Payments:		<u>45,417.12</u>
Balance Remaining		\$170,582.88

Document

Attached: Agreement dated March 31, 2014.

**EXHIBIT A
TO
PROOF OF CLAIM**

**IN THE SUPERIOR COURT OF CATOOSA COUNTY
STATE OF GEORGIA**

DANIEL & YEAGER, INC.,

Judgment Creditor,

v.

HUTCHESON MEDICAL CENTER INC.,

Judgment Debtor.

CIVIL ACTION FILE

NO. 2013 SU CV 1080

NOTICE OF FILING FOREIGN JUDGMENT

COMES NOW, Daniel & Yeager, Inc., Judgment Creditor herein, and pursuant to O.C.G.A. §9-12-133, hereby notifies Hutcheson Medical Center, Inc., the Judgment Debtor, of the following:

1.

On or about June 6, 2013, a judgment was obtained by the Judgment Creditor against the Judgment Debtor in the Court of Alabama, in the total sum of \$221,052.33. An exemplified copy of said judgment is attached hereto as Exhibit "A" and incorporated herein by reference.

2.

The name of the Judgment Creditor is Daniel & Yeager, Inc., whose address is 6767 Old Madison Pike, Suite 690, Huntsville, AL 35806.

3.

The name of the attorney for the Judgment Creditor in the State of Georgia is Samuel J. Gowin, whose office address is 707 Georgia Avenue, Suite 300, Chattanooga, TN 37402.

4.

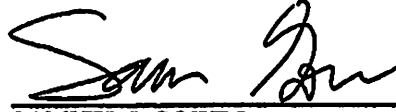
The Judgment Creditor has caused the aforesaid judgment to be filed with the Superior Court of Catoosa County, Georgia, on the 12th day of August, 2013.

1

SUPERIOR COURT
CATOOSA COUNTY, GA
FILED IN OFFICE

Aug 12 2013
Debra Cline
CLERK/DEPUTY CLERK

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Sam Gowin", written over a horizontal line.

SAMUEL J. GOWIN
Georgia Bar No. 141211
Attorney for Plaintiff/ Judgment Creditor

707 Georgia Avenue, Suite 300
Chattanooga, TN 37402
(423) 266-3131

IN THE CIRCUIT COURT OF MADISON COUNTY, ALABAMA

DANIEL & YEAGER, INC.,)
Plaintiff,)
V.) Case No.: CV-2013-900495.00
HUTCHESON MEDICAL CENTER INC,)
Defendant.)

ORDER GRANTING APPLICATION FOR DEFAULT JUDGMENT

This action came on the application of plaintiff Daniel & Yeager, Inc. (D&Y), for entry of a default judgment pursuant to rule 55(b)(2) of the Alabama Rules of Civil Procedure against defendant Hutcheson Medical Center (Hutcheson). Hutcheson, having been duly served with the summons and complaint, and not being an infant or unrepresented incompetent person, and having failed to plead or otherwise defend.

It is ORDERED, ADJUDGED, and DECREED, that judgment be, and hereby is, entered against defendant Hutcheson, and in favor of D&Y, in the sum of \$221,052.33, consisting of the principal amount of \$209,384.80; accrued interest in the amount of \$8,319.72; and attorneys fees and costs in the amount of \$3,347.81. Interest is hereby ordered to accrue on the full amount at the post-judgment *per diem* rate set by Alabama law.

DONE this 6th day of June, 2013.

/s/ D. ALAN MANN
CIRCUIT JUDGE

I, <u>William D. Page</u> , Judge of the above-named Court, do hereby certify that, <u>Jane C. Smith</u> , whose name is signed to the preceding Certificate of Exemplification, is the Clerk of the above-named Court, duly elected/appointed, and that full faith and credit are due to his/her official acts. I further certify that the Seal affixed to the Exemplification is the Seal of the Court, and that the attestation thereof is in due form of law.	
<u>William D. Page</u> Judge <u>7-19-13</u> Date	
I, <u>Jane C. Smith</u> , Clerk of the above-named Court, do hereby certify that <u>William D. Page</u> , whose name is signed to the foregoing certificate, is the Judge of the above-named Court, elected and sworn, and that the signature of the Judge is genuine.	
In witness whereof, I have hereunto set my hand and affixed the Seal of the Court, this date <u>7-19-13</u> Clerk Date	

CERTIFICATE OF EXEMPLIFICATION

Case Number
CV 13-900495

STATE OF ALABAMA

IN THE _____ CIRCUIT COURT OF _____ MADISON, ALABAMA

(Circuit or District)

(Name of County)

Daniel & Veager, Inc. v. Hutcheson Medical Center, Inc.
(State of Alabama or Plaintiff) Defendant

I, Jane C. Smith, Clerk of the above-named Court, do hereby certify that the documents annexed to this Certificate of Exemplification are true copies of originals on file and of record in this office.

In witness whereof, I have hereunto set my hand and Seal of the Court, this date.

Jane C. Smith
Clerk

7-19-13
Date

I, William D. Page, Judge of the above-named Court, do hereby certify that, Jane C. Smith, whose name is signed to the preceding Certificate of Exemplification, is the Clerk of the above-named Court, duly elected/appointed, and that full faith and credit are due to his/her official acts. I further certify that the Seal affixed to the Exemplification is the Seal of the Court, and that the attestation thereof is in due form of law.

William D. Page
Judge

7-19-13
Date

I, Jane C. Smith, Clerk of the above-named Court, do hereby certify that William D. Page, whose name is signed to the foregoing certificate, is the Judge of the above-named Court, elected and sworn, and that the signature of the Judge is genuine.

In witness whereof, I have hereunto set my hand and affixed the Seal of the Court, this date.

Jane C. Smith
Clerk

7-19-13
Date

General Civil Case Filing Information Form (Non-Domestic)

Court
☒ Superior
☐ State

County Catoosa

Date Filed 07-12-2013
MM-DD-YYYY

Docket # 2013 SUCV 1080

Plaintiff(s)

Daniel + Yasser Inc.
Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

No. of Plaintiffs 1

Plaintiff/Petitioner's Attorney ☐ Pro Se

Gowin, Samuel J
Last First Middle I. Suffix

Bar # 141211

Defendant(s)

Hutcherson Medical Center, Inc.
Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

Last First Middle I. Suffix Prefix Maiden

No. of Defendants 1

Check Primary Type (Check only ONE)

☐ Contract/Account

☐ Wills/Estate

☐ Real Property

☐ Dispossession/Distress

☐ Personal Property

☐ Equity

☐ Habeas Corpus

☐ Appeals, Reviews

☒ Post Judgment Garnishment, Attachment, or Other Relief

☐ Non-Domestic Contempt

☐ Tort (If tort, fill in right column)

☒ Other General Civil Specify domestic
AL judgment

If Tort is Case Type:

(Check no more than TWO)

☐ Auto Accident

☐ Premises Liability

☐ Medical Malpractice

☐ Other Professional Negligence

☐ Product Liability

☐ Other Specify _____

Are Punitive Damages Pleased? ☐ Yes ☐ No

IN THE SUPERIOR COURT OF CATOOSA COUNTY
STATE OF GEORGIA

DANIEL & YEAGER, INC.,

Judgment Creditor,

v.

HUTCHESON MEDICAL CENTER INC.,

Judgment Debtor.

CIVIL ACTION FILE

NO. 2013 SL CV 1080

AFFIDAVIT

STATE OF GEORGIA
COUNTY OF CATOOSA

COMES NOW, Samuel J. Gowin, who, after having been first duly sworn, deposes and states as follows:

1.

The information contained in this Affidavit is true and correct and based upon my personal knowledge. I am over 18 years of age, and I am competent to testify as to the matters set forth herein.

2.

I am the principal in the law firm of Samuel J. Gowin, and I am licensed to practice law in the State of Georgia. The law firm of Samuel J. Gowin has been retained on behalf of the Judgment Creditor in connection with enforcing a judgment against Hutcheson Medical Center, Inc., which judgment was obtained in Madison County, Alabama.

3.

This Affidavit is made pursuant to the requirements of O.C.G.A. §9-12-133 with respect to filing a Foreign Judgment in the State of Georgia.

SUPERIOR COURT
CATOOSA COUNTY, GA
FILED IN OFFICE

Aug 12 20 13
10:00 AM W. J. W. W.
CLERK/DEPUTY CLERK

4.

The name of the Judgment Debtor is Hutcheson Medical Center, Inc., whose last known address is 100 Gross Crescent, Fort Oglethorpe, GA 30742.

5.

The name of the Judgment Creditor is Daniel & Yeager, Inc., whose last known address is 6767 Old Madison Pike, Suite 690, Huntsville, AL 35806.

6.

The State of Alabama, where the judgment originated, has adopted and is currently under effect, the "Uniform Enforcement of Foreign Judgment Act" in substantially the same form as Georgia's law pursuant to O.C.G.A. §9-12-138.

7.

Attached hereto as Exhibit "A" and incorporated herein by reference is a copy of the Notice of Filing aforesaid judgment, which was mailed to the Judgment Debtor on June 6, 2013, by depositing same in the United States Mail in a properly addressed envelope with adequate postage thereon to assure delivery.

This 12th day of August, 2013.



SAMUEL J. GOWIN

Subscribed and sworn to
before me this 12th day
of August, 2013.



Notary Public



IN THE SUPERIOR COURT OF CATOOSA COUNTY
STATE OF GEORGIA

DANIEL & YEAGER, INC.,

Judgment Creditor,

v.

HUTCHESON MEDICAL CENTER INC.,

Judgment Debtor.

CIVIL ACTION FILE

NO. 2013 SUCV 1080

CERTIFICATE OF SERVICE

This is to certify that I have on this day served the following parties with a true and correct copy of the foregoing, by placing the same in the United States Mail, with adequate postage thereon, addressed to:

Hutcheson Medical Center, Inc.
Cathy Hulsey, Registered Agent
100 Gross Crescent Cir.
Forth Oglethorpe, GA 30742

This 12th day of August, 2013.



Samuel Gowin
Georgia Bar No. 141211

707 Georgia Ave., Suite 300
Chattanooga, TN 37402
Office: 423-266-3131
Fax: 423-291-4976

SUPERIOR COURT
CATOOSA COUNTY, GA
FILED IN OFFICE

Aug 12 20 13
Colore Crum
CLERK/DEPUTY CLERK

3K0075PG0628

WRIT OF FIERI FACIAS
IN THE CATOOSA COUNTY SUPERIOR COURT
STATE OF GEORGIA

Lien Doc: FFA
Recorded 09/26/2013 11:00AM
Carter Brown
Clerk Superior Court, Walker County, Ga.
Bk 00102 Pg 0783-0784

Civil Action Number: 2013-SU-CV-1080

Judgment Date: 06/03/2013

Plaintiff's Attorney - Name, Address, Telephone:

GOWIN, SAMUEL J
ATTORNEY AT LAW
707 GEORGIA AVENUE, SUITE 300
CHATTANOOGA TN 37402-
4232883131

Plaintiff(s):

DANIEL & YEAGER, INC.

VS.

Defendant(s):

HUTCHESON MEDICAL CENTER INC., 100 GROSS
CRESCENT CIRCLE FORT OGLETHORPE GA 30742

Fi. Fa. in Hands of:

SAMUEL J. GOWIN

To all and singular the sheriffs of the State and their lawful
deputies:

In the above styled case, and on the judgment date set out, the
plaintiff(s) named above recovered against the defendant(s)
named above, judgment in the following sums:

INTEREST SHALL ACCRUE FROM THE DATE HEREOF ON
THE PRINCIPAL AMOUNT AT THE STATUTORY RATE AS
PROVIDED BY O.C.G.A. 7-4-12, UNTIL PAID.

CATOOSA COUNTY, GEORGIA

Filed and recorded in this office

2013 at 9:45 a.m. Aug. 22

Recorded in Lien Record Book 75 Page 628

TRACY BROWN, Clerk

Principal: \$221,052.33
Interest:
Interest - Other:
Attorney's Fees:
Court Costs:
Fifa Issue Enter:

Total: \$221,052.33

Note:

with future interest upon said principal amount from the date of
judgment at the legal rate.

CANCELLATION

The within and foregoing Fi.Fa. having been paid in full the Clerk
of Superior Court is hereby directed to cancel it of record

This _____ day of _____

Signature

Title

Therefore, YOU ARE COMMANDED, that of the goods and
chattels, lands and tenements of said defendants(s), and
ESPECIALLY/ONLY of the following described property to wit:

YOU cause to be made the several sums set out in the foregoing recital of the judgment in this case and have the said several
sums of money before the Superior/State Court of this County at the next term of court, with this Writ to render to said plaintiff(s)
the principal, interest, attorney fees and costs aforesaid.

Witness the Honorable Judge of Said Court RALPH VAN PELT, JR., this the 22 day of August 2013

TRACY BROWN, Clerk

Debbie Clevie
Deputy Clerk

Entered M
Recorded in Book Page(s)

A diligent search was made and no property of the defendant(s) _____

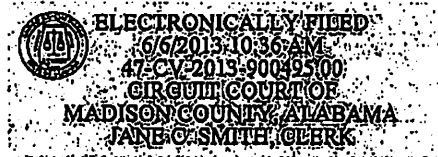
has been found in this County, on which to levy this F.I.F.a.

This _____ day of _____

STATE OF GEORGIA COUNTY OF: CATOOSA
I have this day executed the within F.I.F.a. By levying upon and
seizing the following described property of defendant(s) to wit:

STATE OF GEORGIA COUNTY OF: CATOOSA
I have this day executed the within F.I.F.a. By levying upon
And seizing the following described property of
defendant(s) to wit:

Levied at	GEORGIA	Levied at	GEORGIA
this	day of	this	day of
THE PROPERTY DESCRIBED IN LEVY WAS KNOCKED DOWN TO		THE PROPERTY DESCRIBED IN LEVY WAS KNOCKED DOWN TO	
Sheriff's Service	\$	Sheriff's Service	\$
Sheriff's Commission	\$	Sheriff's Commission	\$
Sheriff's Deed	\$	Sheriff's Deed	\$
Sheriff's Levy	\$	Sheriff's Levy	\$
Advertising Fee	\$	Advertising Fee	\$
Other	\$	Other	\$
Total	\$	Total	\$
Net Proceeds	\$	Net Proceeds	\$



IN THE CIRCUIT COURT OF MADISON COUNTY, ALABAMA

DANIEL & YEAGER, INC.,
Plaintiff,

V.

HUTCHESON MEDICAL CENTER INC,
Defendant.

)
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Case No.: CV-2013-900495.00

ORDER GRANTING APPLICATION FOR DEFAULT JUDGMENT

This action came on the application of plaintiff Daniel & Yeager, Inc. (D&Y), for entry of a default judgment pursuant to rule 55(b)(2) of the Alabama Rules of Civil Procedure against defendant Hutcheson Medical Center (Hutcheson). Hutcheson, having been duly served with the summons and complaint, and not being an infant or unrepresented incompetent person, and having failed to plead or otherwise defend.

It is ORDERED, ADJUDGED, and DECREED, that judgment be, and hereby is, entered against defendant Hutcheson, and in favor of D&Y, in the sum of \$221,052.33, consisting of the principal amount of \$209,384.80; accrued interest in the amount of \$8,319.72; and attorneys fees and costs in the amount of \$3,347.81. Interest is hereby ordered to accrue on the full amount at the post-judgment *per diem* rate set by Alabama law.

DONE this 6th day of June, 2013.

/s/ D. ALAN MANN

CIRCUIT JUDGE

AGREEMENT

This Agreement, by and between Daniel & Yeager, Inc. ("Daniel & Yeager") and Hutcheson Medical Center, Inc. ("Hutcheson") entered into as of the 31st day of March, 2014.

WHEREAS, Daniel & Yeager obtained a default judgment against Hutcheson in the Circuit Court of Madison County, Alabama, in the case of *Daniel & Yeager, Inc., Plaintiff v. Hutcheson Medical Center, Inc., Defendant*, Case No. CV-2013-900495.00 in the total amount of \$221,052.33 on the 6th day of June, 2013 (such default judgment hereinafter referred to as the "Judgment");

WHEREAS, Daniel & Yeager caused the Judgment to be domesticated in the State of Georgia through the filing of a Notice of Filing Foreign Judgment filed in the case of *Daniel & Yeager, Inc., Judgment Creditor v. Hutcheson Medical Center, Inc., Judgment Debtor*, Civil Action File No. 2013-SUCV-1080 in the Superior Court of Catoosa County, Georgia on August 12, 2013;

WHEREAS, in order to avoid the legal fees and expenses that would result from further efforts to collect the Judgment by involuntary means, Daniel & Yeager has agreed to accept payment by Hutcheson of the Judgment over time and in accordance with the terms of this Agreement; and

WHEREAS, in exchange for such terms and conditions, Daniel & Yeager has agreed to forebear any further collection efforts so long as Hutcheson abides by the terms of this Agreement;

NOW, THEREFORE, for and in consideration of the above stated premises, and other good and valuable consideration, the receipt and sufficiency of which is irrevocably acknowledged by the parties by their authorized signatures hereto, the parties agree as follows:

1. Hutcheson shall pay Daniel & Yeager the total sum of \$216,000 in twenty-eight equal monthly installments of \$7,500 and a final monthly installment of \$6,000. The first installment is due within five (5) days after the execution of this Agreement by both parties and their counsel, and the remaining twenty-eight installments shall be due on the 5th day of each month thereafter.

2. Payment shall be delivered to Daniel & Yeager at the following address:
Daniel & Yeager, Inc.
6767 Old Madison Pike
Suite 690
Huntsville, AL 35806
Attention: Mike Williams, CFO

or at such other address as Daniel & Yeager may designate in writing. Any change of address shall be effective no earlier than twenty (20) days after it has been delivered to Hutcheson.

3. Hutcheson shall be in default of this Agreement if it shall fail to deliver any payment to Daniel & Yeager when and where due and has failed to cure such error after ten (10)

days written notice of such failure. Provided Hutcheson is not in default of this Agreement, Daniel & Yeager agrees that it shall forebear from exercising any rights or remedies available to it under state or federal law to collect the Judgment, including, but not limited to, the seizure or attachment of any of Hutcheson's assets, including accounts or personal or real property.

4. Any notices sent pursuant to this Agreement by Daniel & Yeager shall be sent to Hutcheson as follows:

Hutcheson Medical Center, Inc.,
100 Gross Crescent,
Fort Oglethorpe, Georgia, 30742,
Attention: T. Parrell Hayes, Chief Executive Officer

with a copy to:

C. George Caudle, Esq.
300 Forest Avenue
Chattanooga, Tennessee 37405
Attorney for Hutcheson Medical Center

Any notices sent by Hutcheson to Daniel & Yeager shall be sent to:

Daniel & Yeager, Inc.
6767 Old Madison Pike
Suite 690
Huntsville, AL 35806
Attention: Mike Williams, CFO

with a copy to:

Samuel J. Gowin, Esq.
707 Georgia Avenue, Suite 300
Chattanooga, Tennessee 37402

5. This Agreement shall be governed by the laws of the State of Georgia without reference to its choice of law principles.

6. This Agreement is binding upon the parties hereto, their successors and assigns. In the event Daniel & Yeager shall assign any of its rights under this Agreement, Daniel & Yeager shall provide written notice of assignment to Hutcheson at least twenty (20) days prior to the effective date of such assignment.

7. Within thirty (30) days of its receipt of all payments hereunder, and upon written request from Hutcheson, Daniel & Yeager will cause the entry of a Satisfaction of Judgment in the Office of the Clerk of the Superior Court for Catoosa County, Tennessee, and in the office of the clerk of the court for the Circuit Court of Madison County, Alabama.

SIGNATURES ON NEXT PAGE

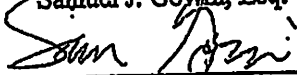
DANIEL & YEAGER

Daniel & Yeager, Inc.

By: 

It's Authorized Representative
MICHAEL J. WILLIAMS, CFO

Samuel J. Gowin, Esq.



707 Georgia Avenue, Suite 300
Chattanooga, Tennessee 37402
(423) 266-3131 - Telephone
(423) 291-4976 Facsimile
Email: sgowin@gowinlaw.com
Attorney for Daniel & Yeager, Inc.

HUTCHESON

Hutcheson Medical Center, Inc.

By: 

It's Authorized Representative

C. George Caudle, Esq.



P.O. Box 310
Chattanooga, Tennessee 37401
(423) 267-5500 - Telephone
(423) 468-2599 - Facsimile
Email: gcaudle@caudlelaw.com
Attorney for Hutcheson Medical
Center, Inc.

CHAMBLISS

Liberty Tower
605 Chestnut Street, Suite 1700
Chattanooga, TN 37450
(423) 756-3000
chamblisslaw.com

CHAMBLISS, BAHNER & STOPHEL, P.C.

JEFFREY W. MADDUX
DIRECT DIAL (423) 757-0296
DIRECT FAX (423) 508-1296
jmaddux@chamblisslaw.com
ALSO LICENSED IN GEORGIA

December 18, 2015

VIA FEDERAL EXPRESS

BMC Group
Attn: Hutcheson Medical Center, Inc., Claims Processing
300 Continental Blvd., #570
El Segundo, CA 90245

**Re: Proof of Claim for Filing in Hutcheson Medical Center, Inc., Case No. 14-42863 Pending
in the United States Bankruptcy Court, Northern District, Georgia**

To Whom It May Concern:

Enclosed is an Amended Proof of Claim for filing in the above-referenced bankruptcy proceeding in the United States Bankruptcy Court for the Northern District of Georgia. The Amended Proof of Claim is on behalf of the following entity:

<u>Entity Filing Claim</u>	<u>Secured Claim Amount</u>
1. Daniel & Yeager, LLC (D&Y)	\$170,582.88

Please contact me at the number above if you have any questions regarding these Proofs of Claims.

Sincerely,

Jeffrey W. Maddux
JWM/gaf
Enclosures