

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF GEORGIA  
ROME DIVISION

RECEIVED  
JAN 27 2016  
BMC GROUP

IN RE: )  
 )  
HUTCHESON MEDICAL CENTER, INC. ) CHAPTER 11  
and HUTCHESON MEDICAL DIVISION, ) Jointly Administered Under  
INC., ) CASE NO. 14-42863-pwb  
 )  
 )  
Debtors. )

REQUEST FOR ALLOWANCE AND PAYMENT OF  
ADMINISTRATIVE EXPENSE CLAIM PURSUANT TO 11 U.S.C. § 503

COMES NOW the claimant identified below and hereby requests the allowance of an administrative expense claim pursuant to Section 503 of the Bankruptcy Code, arising from November 20, 2014 through November 20, 2015, showing the following:

CLAIMANT'S NAME AND ADDRESS: Medical Third Party Resources, Inc  
1014 East Harrison Ave  
Hallinger TX 78550

Amount of 11 U.S.C. § 503 Administrative Expense

\$ 35,147.77  
~~30,462.85~~

1. The undersigned holds an administrative expense claim pursuant to 11 U.S.C. § 503 in the amount identified above against the following Debtor identified in these bankruptcy cases:

- Hutcheson Medical Center, Inc.
- Hutcheson Medical Division, Inc.

2. The consideration for this debt (or ground for this liability owed by the Debtor is as follows:

Third Party Reimbursement contract

3. The administrative expense is entitled to administrative priority under 11 U.S.C. § 503(b) and 11 U.S.C. § 507(a)(2) because:

under contract

Hutcheson Med POC



00388

4. A copy of the writing (invoice, purchase order, lease agreement, etc.) on which the administrative expense is founded, if any, is attached hereto or cannot be attached for the reason set forth in the statement attached hereto.

5. The amount of all payments on the administrative expense have been credited and deducted for the purpose of making this request.

6. The undersigned is aware that under 18 U.S.C. §§ 152 and 3571, the penalty for presenting a fraudulent claim in a bankruptcy case includes a fine of up to \$500,000 or imprisonment for up to five years, or both.

**WHEREFORE**, the undersigned requests that the Court allow the administrative expense or expenses requested herein, to be paid in accordance with the priorities set forth in the Bankruptcy Code and based upon availability of funds.

Dated: Jan 26 2016

Name of Claimant: Medical Third Party Resources, Inc.

Signed: MP Kleeneyer

By (if appropriate): Michael P Kleeneyer

As Its (if appropriate): President

**INSTRUCTIONS:**

Mail the completed form by March 7, 2016, to the Clerk, United States Bankruptcy Court, Northern District of Georgia, Room 339, 600 East First Street, Rome, Georgia 30161, with a copy served on Trustee's Claims Agent: (i) if by overnight or hand delivery: BMC Group, Attn: Hutcheson Medical Center, Inc. Claims Processing, 300 Continental Blvd., #570, El Segundo, CA 90245; (ii) if by first class mail: BMC Group, Attn: Hutcheson Medical Center, Inc. Claims Processing, PO Box 90100, Los Angeles, CA 90009.

**DISTRIBUTION LIST**

Martin P. Ochs  
Office of the United States Trustee  
362 Richard Russell Building  
75 Ted Turner Drive, SW  
Atlanta, GA 30303

J. Robert Williamson  
J. Hayden Kepner, Jr.  
Scroggins & Williamson, P.C.  
One Riverside  
4401 Northside Parkway  
Suite 450  
Atlanta, GA 30327

David B. Kurzweil  
Greenberg Traurig, LLP  
3333 Piedmont Road, NE, Suite 2500  
Atlanta, GA 30303

David E. Lemke  
Waller Landsden Dortch & Davis, LLP  
511 Union Street, Suite 2700  
Nashville, TN 37219



**IT IS ORDERED as set forth below:**

**Date: January 7, 2016**

**Paul W. Bonapfel  
U.S. Bankruptcy Court Judge**

---

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF GEORGIA  
ROME DIVISION**

**IN RE:** ) **CHAPTER 11**  
 )  
**HUTCHESON MEDICAL CENTER, INC.** ) **Jointly Administered Under**  
**and HUTCHESON MEDICAL DIVISION,** ) **CASE NO. 14-42863-pwb**  
**INC.,** )  
 )  
**Debtors.** )

**ORDER AND NOTICE OF LAST DATE TO FILE APPLICATIONS  
FOR PAYMENT OF ADMINISTRATIVE EXPENSE CLAIMS  
ARISING ON OR BEFORE NOVEMBER 30, 2015**

The Trustee in these cases has filed a Motion to Set Administrative Claims Bar Date (the "Motion") [Doc. 433]. The Court having determined that is appropriate to set a bar date, it is,

**ORDERED AND NOTICE IS HEREBY GIVEN, as follows:**

1. All individuals and entities who provided goods, services, or other consideration to the Debtors on or after **November 20, 2014** (the "**Petition Date**") and who assert that they have not been paid in full ("**Post-Petition Claimants**"), except those listed in paragraph 5 below, **must** file a request for allowance of their claims substantially in the form attached to this order (a "**Request**

**for Claim Allowance”) for all claims that arose between the Petition Date and November 30, 2015;**

2. All Post-Petition Claimants, except those listed in paragraph 5 below, must file their Requests for Claim Allowance **no later than March 7, 2016** (the “Administrative Bar Date”). The Request for Claim Allowance **must** be filed with the Clerk, United States Bankruptcy Court, Northern District of Georgia, Room 339, 600 East First St., Rome, Georgia 30161-3187 or filed electronically through the CM/ECF system no later than the Administrative Bar Date. Post-Petition Claimants must also serve a copy of any Request for Claim Allowance upon the Claims Agent at the following address:

**If by overnight or hand delivery:**

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

**If by First Class Mail:**

BMC Group  
Attn: Hutcheson Medical Center, Inc. Claims Processing  
PO Box 90100  
Los Angeles, CA 90009

3. Any Post-Petition Claimant, except those listed in paragraph 5 below, who does not file a Request for Claim Allowance by the Administrative Bar date **may be forever barred from any recovery for any such claim.**

4. This Order does **not** apply to the following claimants, who are **not** required to submit a Request for Claim Allowance by the Administrative Bar Date:

(a) current or former **employees** of the Debtors with respect to claims arising out of their employment;

(b) current or former **patients** of the Debtors with respect to claims arising out of medical treatment received from the Debtors,

(c) claimants asserting claims under 11 U.S.C. § 503(b)(9) for the value of goods provided to the Debtors within 20 days before the Petition Date;

(d) claimants requesting compensation and reimbursement of expenses under 11 U.S.C. §§ 330(a) and 503(b)(2);

(e) creditors who have filed a proof of claim asserting a claim against the Debtors that arose before the Petition Date and who do not contend that they have a claim arising after the Petition Date;

(f) any claimant listed as undisputed on the List of Post-Petition Claims filed by the Trustee pursuant to paragraph 5; and

(g) claimants asserting any claims arising on or after December 1, 2015.

5. The Trustee shall within seven days from the date hereof file a list of Post-Petition Claims that the Debtors' books and records show are unpaid as of November 30, 2015. This list will be available through BMC Group, the Trustee's claim agent (the "**Claims Agent**") on its website [www.bmcgroup.com](http://www.bmcgroup.com) and accessible to all parties that receive notice of this Order and Notice. The Trustee shall identify the claims on said list that are not disputed. Any Post-Petition Claimant included on the Trustee's list, but who disputes the claim amount must file a Request for Claim Allowance. Any claims listed as undisputed shall be allowed as administrative expenses subject to later objection by the Trustee or any other party in interest.

Counsel for the Trustee shall promptly serve a copy of this Order and Notice on (a) the Office of the United States Trustee, (b) all other interested parties requesting notice, (c) all parties listed on the creditors matrix maintained in this case, and (d) any other party who has transacted

business with the Debtors' estates post-petition with respect to which (i) the Debtors' records do not reflect payment in full or (ii) the party, by written communication to the Debtors, has disputed that it has been paid in full. Counsel for the Trustee shall file a certificate of such service.

**[END OF DOCUMENT]**

Prepared and presented by:

SCROGGINS & WILLIAMSON, P.C.

/s/ J. Robert Williamson

J. ROBERT WILLIAMSON

Georgia Bar No. 765214

J. HAYDEN KEPNER, JR.

Georgia Bar No. 416616

One Riverside

4401 Northside Parkway

Suite 450

Atlanta, Georgia 30327

(404) 893-3880

*Special Counsel for the Trustee*



**IT IS ORDERED** as set forth below:

**Date:** January 7, 2016

Paul W. Bonapfel  
U.S. Bankruptcy Court Judge

---

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF GEORGIA  
ROME DIVISION**

**IN RE:** ) **CHAPTER 11**  
 )  
**HUTCHESON MEDICAL CENTER, INC.** ) **Jointly Administered Under**  
**and HUTCHESON MEDICAL DIVISION,** ) **CASE NO. 14-42863-pwb**  
**INC.,** )  
 )  
**Debtors.** )

**ORDER AND NOTICE OF LAST DATE TO FILE APPLICATIONS  
FOR PAYMENT OF ADMINISTRATIVE EXPENSE CLAIMS  
ARISING ON OR BEFORE NOVEMBER 30, 2015**

The Trustee in these cases has filed a Motion to Set Administrative Claims Bar Date (the “**Motion**”) [Doc. 433]. The Court having determined that is appropriate to set a bar date, it is,

**ORDERED AND NOTICE IS HEREBY GIVEN**, as follows:

1. All individuals and entities who provided goods, services, or other consideration to the Debtors on or after **November 20, 2014** (the “**Petition Date**”) and who assert that they have not been paid in full (“**Post-Petition Claimants**”), except those listed in paragraph 5 below, **must** file a request for allowance of their claims substantially in the form attached to this order (a “**Request**”



for Claim Allowance”) for all claims that arose between the Petition Date and November 30, 2015;

2. All Post-Petition Claimants, except those listed in paragraph 5 below, must file their Requests for Claim Allowance **no later than March 7, 2016** (the “Administrative Bar Date”). The Request for Claim Allowance must be filed with the Clerk, United States Bankruptcy Court, Northern District of Georgia, Room 339, 600 East First St., Rome, Georgia 30161-3187 or filed electronically through the CM/ECF system no later than the Administrative Bar Date. Post-Petition Claimants must also serve a copy of any Request for Claim Allowance upon the Claims Agent at the following address:

**If by overnight or hand delivery:**

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

**If by First Class Mail:**

BMC Group  
Attn: Hutcheson Medical Center, Inc. Claims Processing  
PO Box 90100  
Los Angeles, CA 90009

3. Any Post-Petition Claimant, except those listed in paragraph 5 below, who does not file a Request for Claim Allowance by the Administrative Bar date **may be forever barred from any recovery for any such claim.**

4. This Order does not apply to the following claimants, who are not required to submit a Request for Claim Allowance by the Administrative Bar Date:

(a) current or former **employees** of the Debtors with respect to claims arising out of their employment;

**MEDICAL  
THIRD  
PARTY  
RESOURCES  
INCORPORATED**



***"Providing more than  
third-party assistance  
to the patients we touch."***

**www.mtpr.com**

Corporate Home Office  
1014 E. Harrison  
Harlingen, TX 78550

Phone 956.423.7750  
Fax 956.423.3613  
Toll Free 800.524.9145

Clerk  
United States Bankruptcy Court  
Northern District of Georgia  
Rome, GA 30161

January 26, 2015

Medical Third Party Resources, Inc. has contracted with Hutcheson Medical Center since 2007. We provide third party eligibility and certification services to Hutcheson and have brought in millions of dollars in third party reimbursement over the past 8 years. We have maintained a fully trained staff consisting of a Director and Case Worker as well as utilized two local nurses for GA certification on Medicaid.

We have an executed contract where we are on a contingency fee basis of 12% on the amount of reimbursement we bring into the hospital. MTPR has gone through numerous management changes, consultant groups, re-organization, trustees and now bankruptcy. We were the only outsourced entity still working for Hutcheson and bringing in an average of \$75,000 monthly from third-party reimbursement.

Through all of the financial woes of Hutcheson, we were paid up until Aug. of 2015. You will see our last two invoices still outstanding for a total of \$35,147.77. We also had pending accounts approved but could not get Hutcheson to assist in our billing which would have generated additional monies. We believe that we should be paid on our outstanding invoice as this is based on money generated by MTPR and paid directly to Hutcheson Medical Center who chose to pay others with the money owed Medical Third Party Resources, Inc. Please keep in mind our services were not on equipment or hard goods, but actual dollar we brought into the hospital in reimbursement (cash) generated solely by MTPR>

Being unable to communicate with anyone of authority representing Hutcheson Medical Center Medical Third Party Resources filed a lien with the County of Catoosa in the state of GA. for \$35,147.77 on 11-13-15. This lien copy of which is included and been duly accepted and recorded.

If there is additional information needed, please feel free to contract me at anytime.

Respectfully:  
  
Michael P Kleemeyer / President



**MEDICAL  
THIRD  
PARTY  
RESOURCES  
INCORPORATED**

**Michael Kleemeyer**  
President

Corporate Home Office  
1014 E. Harrison  
Harlingen, TX 78550

Phone 956.423.7750 ext.116  
Fax 956.423.3613  
Toll Free 800.524.9145 ext.116  
Mobile 956.499.6877

**www.mtpr.com**  
Mike.Kleemeyer@mtpr.com

***"Providing more than  
third-party assistance  
to the patients we touch."***

## **CONTRACT-AGREEMENT**

**STATE OF GEORGIA**

**COUNTY OF CATOOSA**

This agreement is made and entered into this, the 1st day of May, 2007, by and between, **Hutcheson Medical Center**, herein referred to as the Hospital, and **Medical Third Party Resources, Inc.**, hereinafter referred to as MTPR.

### **PURPOSE OF AGREEMENT**

The purpose of this agreement is to state the terms and conditions under which MTPR will provide services for patient accounts referred by the Hospital for assistance in obtaining medical financial aid from public and/or private sources to pay for incurred Hospital expenses.

The parties hereby agree as follows:

#### **I. SERVICES TO BE PERFORMED BY MTPR**

MTPR, for consideration, agrees to perform the following services for the Hospital:

- a) Accept and screen patient accounts referred by the Hospital for medical third-party financial assistance;
- b) Contact third-party resource agencies in order to obtain medical, financial assistance for inpatient, outpatient and emergency room patients who are unable to pay incurred Hospital charges;
- c) Obtain all necessary data in connection with the application process for all third-party resource agencies and perform follow-up activities through the reimbursement stage;
- d) Complete all necessary forms for the Hospital and/or the patient and, where appropriate or necessary, provide transportation;
- e) Maintain appropriate records for all referred patient accounts including comprehensive accountability and managerial reports;
- f) Provide patient advocacy services, as necessary and appropriate, in order to obtain third-party reimbursement for the Hospital;

#### **II. HOSPITAL REFERRALS**

- (a) The Hospital will refer all self-pay, patient accounts that may need service an consultation by MTPR personnel. The Hospital will provide a daily census to MTPR for a check and balance system to ensure that MTPR is receiving all self-pay accounts in order to screen for eligibility for third-party financial assistance.

- (b) The Hospital agrees that the services provided by MTPR, in no way, releases the patient from its normal financial obligations;
- (c) Shall provide MTPR with any and all information on referred patient accounts regarding medical reimbursement received from third-party agencies; and will furnish on site office space, telephone service, computer access, copier & fax service, postage and equipment needed in the pursuit of third-party eligibility.
- (d) Agrees to bill accounts that MTPR submits to the Hospital Billing Department within billing deadline time frames in order to prevent MTPR accounts from going past the billing deadline.

### **III. COVENANTS OF MEDICAL THIRD PARTY RESOURCES, INC.**

- a) In performing the services required under this agreement, MTPR, its directors, officers, agents and employees shall comply with all applicable federal, state, county and city statutes, ordinances and regulations;
- b) MTPR represents that this agreement does not violate any applicable federal, state, county or city statutes, ordinances, or regulations; and
- c) MTPR shall furnish the Hospital with such information and documentation as the Hospital may request to assure compliance with all applicable policies and regulations.

### **IV. COMPENSATION**

For all third-party eligibility & certification services rendered to Hospital, Hospital agrees:

- a) To pay MTPR a fee of 12% on the actual dollars brought into the Hospital from third-party reimbursement, whereas MTPR was instrumental in establishing eligibility, and this fee shall be paid to MTPR as a monthly non-recourse payment, MTPR shall cap its fee to a maximum of \$5,000 on any single patient reimbursement.
- b) MTPR shall be entitled to charge on all in-patients, out-patients & ER patients as described above and after the Hospital has received the actual reimbursement
- c) The Hospital, upon receipt of an invoice from MTPR, shall remit payment within Twenty (20) days

### **V. TERM OF AGREEMENT**

The term of this Agreement shall commence on Mar.1<sup>st</sup>. 2007 and shall continue for a term of one year and automatically renew annually, unless terminated as provided for in Section VI

## **VI. TERMINATION AGREEMENT**

This agreement may be terminated as follows:

- a) Either party may terminate this agreement by giving the other party written notice at least sixty (60) days prior to an effective termination date;
- b) Upon notice of termination being given by either party, the Hospital agrees to continue furnishing MTPR with copies of relevant third-party remittance reports and patient billing records on previously referred patient accounts; and
- c) All original records furnished to MTPR shall remain the property of the Hospital and will not be removed from the Hospital's premises. All information, records, documentation and other work products developed by MTPR shall remain the property of MTPR, and shall be kept by MTPR.
- d) If MTPR is operating within (on-site) the Hospital at the time of termination, the Hospital agrees to continue to provide MTPR with all relevant reports, same office space, supplies, equipment, phone service, postage, computer access and copy service necessary to perform the previously described services for the Hospital for a period not to exceed sixty (60) days from the effective date of termination.

## **VII. TRADE SECRETS**

- a) MTPR employees are familiar with the various MTPR trade secrets regularly used in the conduct of business such as formulas, patterns, devices, handling and processing activities and follow up procedures necessary to generate any and all third-party resources available for payment of medical services. MTPR employees are contractually bound from disclosing any trade secrets, either directly or indirectly. Additionally, MTPR employees are prohibited from using any trade secrets in any way or at anytime except as required in the course of their employment with MTPR. All files, records, documents, custom designed software, drawings, specifications, equipment, and similar items relating to the business of MTPR, whether prepared by MTPR personnel or contract employees, is the exclusive property of MTPR and shall not be removed from the offices of MTPR, under any circumstances, without the prior written consent of MTPR;
- b) The Hospital acknowledges that MTPR employees are contractually bound from disclosing any trade secrets and hereby agrees not to inquire, either directly or indirectly, about any MTPR trade secrets; and
- c) The Hospital acknowledges that MTPR employees are contractually bound by a Non-compete Clause. In addition, the Hospital agrees not to employ, or contract with MTPR personnel during the term of this agreement, nor for a period of at least two years from the date of termination of this agreement.

## VIII. ATTORNEY FEES AND COSTS

If litigation is necessary to enforce or interpret the terms of the agreement, the prevailing party shall be entitled to reasonable attorney fees, costs, and necessary disbursements in addition to any other relief the prevailing party may be entitled.

## IX. MISCELLANEOUS PROVISIONS

This agreement shall be bound by the following provisions:

- a) Georgia law is to Apply: This agreement shall be construed under and in accordance with the laws of the State of Georgia, without regard to the conflict of law, principles of that state. Venue and jurisdiction arising from this contract agreement shall lie exclusively with the Superior Court of Catoosa County, Georgia.
- b) Legal Construction: In case any one or more of the provisions contained in this agreement shall, for any reason, be held to be invalid, illegal, or unenforceable in any respect, such cause of action shall not affect any other provision herein and this agreement shall be construed as if such invalid, illegal, or unenforceable provision had never been contained herein;
- c) Prior Agreements Superseded: This agreement constitutes the sole and only agreement between the parties, with respect to the incorporated subject matter; and
- d) MTPR shall incorporate, within a monthly billing report, any sales taxes that may be required by the State Comptroller on insurance accounts for which reimbursements are recovered. These sales taxes will then be paid by MTPR to the State Comptroller on a quarterly basis. Exemptions to sales taxes include those Hospitals that operate on a not-for-profit basis.
- e) MTPR employees will meet all of the compliance related training and certification required by the hospital/provider related to its general code of conduct, policies and procedures, including patient confidentiality and HIPAA. The hospital will furnish MTPR with a written copy of its guidelines and requirements of which MTPR will adhere and enforce. \_\_\_\_\_
- f) Notice: Any notice, demand or communication required, permitted or desired to be given hereunder shall be deemed effectively given when mailed by prepaid certified mail, return receipt requested; delivered by hand or personal delivery or overnight courier service addressed as follows:

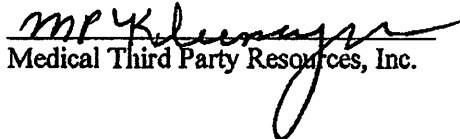
Hutcheson Medical Center, Inc.  
100 Gross Crescent Circle  
Ft. Oglethorpe, GA 30742  
Attn. Vice President/CFO

Medical Third Party Resources, Inc.  
1014 East Harrison  
Harlingen, TX 78550  
President

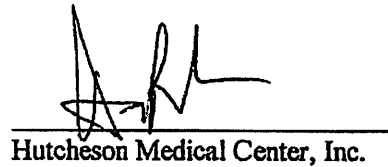
- g) Waiver of Breach: The failure of either party to insist upon strict performance of any term or condition or covenant herein, shall not be deemed to be a waiver of any right or remedy by either party; which they may have and shall not be deemed to be a waiver of any subsequent breach or default.
- h) Amendments: This agreement may not be changed, amended or modified except in writing, signed by all parties hereto.

In performing the services herein specified, MTPR will be acting as an independent contractor. Nothing contained in this agreement shall be construed to create a partnership or joint venture between Hospital and MTPR, nor to authorize either Hospital or MTPR to act as a general or special agent of the other party in any respect, except as specifically set forth in this agreement.

EXECUTED on the day and year incorporated above.

  
\_\_\_\_\_  
Medical Third Party Resources, Inc.

President

  
\_\_\_\_\_  
Hutcheson Medical Center, Inc.

VP / CFO  
\_\_\_\_\_  
Title

**Claim of Lien**

State of Georgia

County of Catoosa

**This claim of lien expires and is void 395 days from the date of filing of the claim of lien if no notice of commencement of lien action is filed in that time period.**

Notice is hereby given that on May 01, 2007, Medical Third Party Resources, Inc. by Michael P Kleemeyer, of 1014 East Harrison, Harlingen, Texas 78550, a Third Party Reimbursement services, commenced services at the Hutcheson Medical Center located at 100 Gross Circle, Fort Oglethorpe, in the County of Catoosa, State of Georgia, more specifically known and legally described as:

\_\_\_\_\_

Claimant claims a lien in the amount of \$35,147.77 on the Hutcheson Medical Center and the premises or real estate on which it is erected or built, belonging to \_\_\_\_\_ whose address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . For satisfaction of a claim which became due on November 01, 2015, upon completion of services, for a Third Party eligibility and certification services for all third-party reimbursement including Medicaid, SSI and all government reimbursement.

Claimant signed a contract dated May 01, 2007 and was employed or furnished labor, services, equipment and/or materials under an agreement with Chief Financial Officer, 100 Gross Circle, Fort Oglethorpe, Georgia, 30742.

Claimant hereby declares that there is now due the balance of \$35,147.77 which respondents neglect and refuse to pay despite requests and demands for payment. For this reason, Claimant is entitled to a lien on the property described herein and the improvements located thereon for the



total sum of the lien claimed along with interest on the maturity of the debt as allowable according to Statute in such cases made and provided.

Michael P Kleemeyer President      11-13-15  
Medical Third Party Resources, Inc. by Michael P Kleemeyer      Date  
1014 East Harrison  
Harlingen, Texas 78550

STATE OF GEORGIA, COUNTY OF CATOOSA, ss:

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me,  
\_\_\_\_\_, personally appeared Medical Third Party Resources, Inc. by Michael P Kleemeyer, known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within Affidavit, and, being first duly sworn on oath according to law, deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the matters stated herein are true to the best of his/her information, knowledge and belief.

In witness whereof I hereunto set my hand and official seal.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Title (and Rank)

My commission expires \_\_\_\_\_

Document Prepared By:

Medical Third Party Resources, Inc. by Michael P Kleemeyer  
1014 East Harrison  
Harlingen, Texas 78550

**Medical Third Party Resources, Inc**

**PO Box 3596**

**Harlingen, TX 78551**

**October 30, 2015**

**Eligibility Amount: \$4,684.92**

Director Patient Financial Services

Hutcheson Medical Center

100 Gross Crescent Circle

Fort Oglethorpe, GA 30742

Director:

Please be informed that as per our contract agreement between MTPR, Inc. and HMC, I am submitting a bill for services rendered.

The cases billed have been approved and HMC has been paid accordingly. At this time, we are submitting the attached Billing Report for proper payment.

MTPR, Inc. thanks you for the opportunity to serve the medically needy in your area.

Sincerely,

Jennifer Jensen Garland

MTPR Hospital Director

**Medical Third Party Resources, Inc.**  
**P.O Box 3596**  
**Harlingen, TX 78551**

September 1, 2015

<b>Eligibility Amount:</b>	<b>\$</b>	<b>18,240.83</b>
<b>Parkside Applications:</b>	<b>\$</b>	<b><u>150.00</u></b>
		<b>18,390.83</b>

Director Patient Financial Services  
Hutcheson Medical Center  
100 Gross Crescent Circle  
Fort Oglethorpe, GA 30742

Director:

Please be informed that as per our contract agreement between MTPR, Inc. and HMC, I am submitting a bill for services rendered.

The cases billed have been approved and HMC has been paid accordingly. At this time, we are submitting the attached Billing Report for proper payment.

MTPR, Inc. thanks you for the opportunity to serve the medically needy in your area.

Sincerely,

Jennifer Jensen-Garland  
MTPR Hospital Director

**Medical Third Party Resources, Inc.**  
**P.O Box 3596**  
**Harlingen, TX 78551**

October 5, 2015

<b>Eligibility Amount:</b>	<b>\$</b>	<b>10,702.12</b>
<b>Parkside Applications:</b>	<b>\$</b>	<b><u>350.00</u></b>
		<b>11,052.12</b>

Director Patient Financial Services  
Hutcheson Medical Center  
100 Gross Crescent Circle  
Fort Oglethorpe, GA 30742

Director:

Please be informed that as per our contract agreement between MTPR, Inc. and HMC, I am submitting a bill for services rendered.

The cases billed have been approved and HMC has been paid accordingly. At this time, we are submitting the attached Billing Report for proper payment.

MTPR, Inc. thanks you for the opportunity to serve the medically needy in your area.

Sincerely,

Jennifer Jensen-Garland  
MTPR Hospital Director

rest on the maturity of the debt as allowable according  
vided.

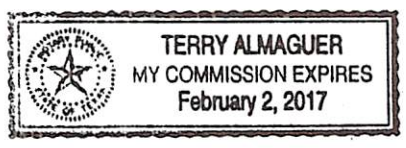
President  
resources, Inc. by Michael P Kleemeyer Date 11-13-15

son  
Texas 78550

STATE OF GEORGIA, COUNTY OF CATOOSA, ss:

On this 13 day of November, 2015, before me,  
Michael P. Kleemeyer, personally appeared Medical Third Party Resources,  
Inc. by Michael P Kleemeyer, known to me (or satisfactorily proven) to be the persons whose  
names are subscribed to the within Affidavit, and, being first duly sworn on oath according to law,  
deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the  
matters stated herein are true to the best of his/her information, knowledge and belief.

In witness whereof I hereunto set my hand and  
official seal.



Terry Almaguer  
Notary Public

Title (and Rank)

My commission expires 2-2-2017

Document Prepared By:

Medical Third Party Resources, Inc. by Michael P Kleemeyer  
1014 East Harrison  
Harlingen, Texas 78550

CASH ONLY IF ALL CheckLock™ SECURITY FEATURES LISTED ON BACK INDICATE NO TAMPERING OR COPYING



**MEDICAL THIRD PARTY RESOURCES, INC.**

P.O. Box 3596 / 1014 East Harrison Ave.  
Harlingen, TX 78551  
Phone: (956) 423-7750  
Fax: (956) 440-0496

COMPASS BANK  
521 N. 77 S.Strip, Harlingen, TX 78551  
Phone: (956) 430-5000  
35-1054/1130

19056

11/13/2015

TO THE ORDER OF Catoosa County Clerk

\$\*\*13.00

thirteen and 00/100\*\*\*\*\* DOLLARS

Catoosa County Clerk

VOID AFTER 30 DAYS

lien

*Humberto Zamora by  
MP Kleeneyu President*

⑈019056⑈ ⑆113010547⑆ 0051116715⑈

MEDICAL THIRD PARTY RESOURCES, INC.

Catoosa County Clerk

11/13/2015

19056

13.00

Compass Bank #0051 lien

13.00

Details on Back  
Intuit® CheckLock™ Secure Check