

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

RECEIVED

MAR 22 2016

BMC GROUP

IN RE:) CHAPTER 11
)
HUTCHESON MEDICAL CENTER, INC.) Jointly Administered Under
and HUTCHESON MEDICAL DIVISION,) CASE NO. 14-42863-pwb
INC.,)
)
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: Elsevier B.V. (Legal Collections)
Rodanweg 29
1043 NX Amsterdam
The Netherlands

Amount of 11 U.S.C. § 503 Administrative Expense \$ 27,950.00

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:

Use of our services

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:

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.

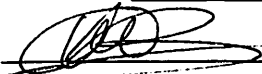
5. The amount of all payments on the administrative expense have been credited and deducted for the purpose of making this request.

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: 1 March 2016

Name of Claimant: M. C. Bloemenveld

Signed:  (Elsevier)

By (if appropriate): _____

As Its (if appropriate): _____

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

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Nashville, TN 37219

Elsevier Inc, Clinical Solutions North America
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 Philadelphia, PA 19103-2899
 United States
 Telephone: +1-888-955-5291
 Fax: +1-314-447-8036
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 Seller ID Tax Registration Number: 13-1958712



Renewal Invoice

Bill To	Hutcheson Medical Center Melissa Smeltzer, Director of Education 100 Gross Crescent Circle Fort Oglethorpe, GA 30742 United States	Invoice No	R004760
		Invoice Date	26-May-15
		Due Date	25-Jun-15
		Terms	per the contract
TAX/VAT Reg. No			
Purchase Order No			

Coding Strategies Fee for period from May 20, 2015 to May 19, 2016	USD	4,326.00
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Ship To	Hutcheson Medical Center Melissa Smeltzer, Director of Education 100 Gross Crescent Circle Fort Oglethorpe, GA 30742 United States	Total	USD	4,326.00
		Tax	USD	
		Amount Due	USD	4,326.00

Agreement No	1-8633753186	SIS ID	605048	Account Number	1-8633753186
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PAYMENT OPTIONS

- Important** Please make sure that you reference invoice number R004760 on your payment option to ensure timely turnaround.
- 1. Wire Transfers To** Citibank N.A.-Account# 3075-3564, 399 Park Avenue, New York, NY 10043 USA, ABA# 021000089
- 2. Check** Make payable to Elsevier Inc. Send to Elsevier, P.O.Box 7247-7684 Philadelphia, PA 19170-7684 USA (please send a copy of the invoice with check)
- 3. Credit Card** Send CC details to Elsevier, 3251 Riverport Lane, Attn: Credit Control, Maryland Heights, MO 63043, USA.
 Toll Free Fax: 877-223-1436. Visa Card Access/Euro/Mastercard American Express
 Card no : - - - Expiry Date: Month Year
 Name : _____ Signature : _____

Elsevier Inc, Clinical Solutions North America
1600 John F. Kennedy Boulevard, Suite 1800
Philadelphia, PA 19103-2899
United States
Telephone: +1-888-955-5291
Fax: +1-314-447-8036
E-mail: cs_creditinquiry@elsevier.com
Seller ID Tax Registration Number: 13-1958712



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Page 2 of 2

Renewal Invoice

Invoice No	R004760
Invoice Date	26-May-15
Due Date	25-Jun-15
Terms	per the contract

<u>Coding Strategies - Subscription</u>		
	Currency	
EduCode Regulatory Essentials	USD	4,326.00
Grand Total:		<u>4,326.00</u>

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 1600 John F. Kennedy Boulevard, Suite 1800
 Philadelphia, PA 19103-2899
 United States
 Telephone: +1-888-955-5291
 Fax: +1-314-447-8036
 E-mail: cs_creditinquiry@elsevier.com
 Seller ID Tax Registration Number: 13-1958712



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Renewal Invoice

Bill To	Hutcheson Medical Center Heidi Egbert, Director of Education 100 Gross Crescent Circle Fort Oglethorpe, GA 30742 United States	Invoice No	R005150
		Invoice Date	17-Jun-15
		Due Date	16-Aug-15
		Terms	per the contract
TAX/VAT Reg. No			
Purchase Order No			

EPM- Core Development Fee for period from May 20, 2015 to May 19, 2016	USD	6,537.00
The Joint Commission/OSHA Compliance Course Fee for period from May 20, 2015 to May 19, 2016	USD	1,916.00

Ship To	Hutcheson Medical Center Heidi Egbert, Director of Education 100 Gross Crescent Circle Fort Oglethorpe, GA 30742 United States	Total	USD	8,453.00
		Tax	USD	
		Amount Due	USD	8,453.00

Agreement No	1-8444079003	SIS ID	605048	Account Number	1-8633753186
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PAYMENT OPTIONS

- Important** Please make sure that you reference invoice number R005150 on your payment option to ensure timely turnaround.
- 1. Wire Transfers To** Citibank N.A.-Account# 3075-3564, 399 Park Avenue, New York, NY 10043 USA, ABA# 021000089
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 Name : _____ Signature : _____

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E-mail: cs_creditinquiry@elsevier.com
Seller ID Tax Registration Number: 13-1958712



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Page 2 of 2

Renewal Invoice

Invoice No	R005150
Invoice Date	17-Jun-15
Due Date	16-Aug-15
Terms	per the contract

<u>EPM- Core Development - Subscription</u>		
	Currency	
EPM - Core Development	USD	6,537.00
Grand Total:		<u>6,537.00</u>
<u>The Joint Commission/OSHA Compliance Course - Subscription</u>		
	Currency	
OSHA Compliance Course	USD	1,916.00
Grand Total:		<u>1,916.00</u>



Elsevier Inc.
3251 Riverport Lane
Maryland Heights, MO 63043
USA

Tel: (+1) 314 447 8265
Fax: (+1) 314 447 8036
Federal ID: 13-1958712

Invoice

Number : 2100006705
Date : 12 MAY 2014
Terms : 30 NET
Due Date : 11 JUN 2014
P.O. Ref :

BILL TO: 1058988

Erlanger at Hutcheson
Heidi Egbert
100 Gross Crescent Cir
Fort Oglethorpe, GA 30742-3669
United States

SEND TO: 1058988

Heidi Egbert
Erlanger at Hutcheson
100 Gross Crescent Cir
Fort Oglethorpe GA 30742-3669
United States

Bill to VAT/TAX number:

Quantity	Description	Unit Price	Line Total
1	MCS JCAHO	1,916.00	1,916.00
1	EPM Core Development	6,537.00	6,537.00
Comments/Remarks:		Net Amount :	8,453.00
RETENTION - MC STRATEGIES - FOR THE PERIOD OF 5/20/14 - 5/19/15		VAT/Sales Tax 0%	0.00
		Total Amount USD	8,453.00

Please mention invoice details when making payment

Account Number	:	1058988
Invoice Number	:	2100006705
Invoice Date	:	12 MAY 2014
Total amount	:	USD 8,453.00

REMITTANCE SLIP - PLEASE RETURN WITH PAYMENT
PLEASE RETURN THE COMPLETE INVOICE IF YOU ARE MAKING ANY CHANGES

PAYMENT OPTIONS:

1. Wire Transfer: Acct#3075-3564, ABA #021000089 Citibank New York, 399 Park Avenue, New York, NY 10043, USA
2. Send a check to Elsevier Inc., PO Box 7247-7684, Philadelphia, PA 19170-7684, USA
3. Send CC details to Elsevier, 3251 Riverport Lane, Attn: Credit Control, Maryland Heights, MO 63043, USA. Toll Free Fax: 877-223-1436

Visa Card Access/Euro/Mastercard American Express

Card no : |_|_|_|_| - |_|_|_|_| - |_|_|_|_| - |_|_|_|_|

Expiry Date: Month |_|_| Year |_|_|

Signature : _____

Name : _____



Elsevier Inc.
3251 Riverport Lane
Maryland Heights, MO 63043
USA

Tel: (+1) 314 447 8265
Fax: (+1) 314 447 8036
Federal ID: 13-1958712

Invoice	
Number	: 2100006704
Date	: 12 MAY 2014
Terms	: 30 NET
Due Date	: 11 JUN 2014
P.O. Ref	:

BILL TO: 1058988

Erlanger at Hutcheson
Heidi Egbert
100 Gross Crescent Cir
Fort Oglethorpe, GA 30742-3669
United States

SEND TO: 1058988

Heidi Egbert
Erlanger at Hutcheson
100 Gross Crescent Cir
Fort Oglethorpe GA 30742-3669
United States

Bill to VAT/TAX number:

Quantity	Description	Unit Price	Line Total
1	MCS EduCode Regulatory Essentials	6,718.00	6,718.00
Comments/Remarks:		Net Amount :	6,718.00
RETENTION - MC STRATEGIES - FOR THE PERIOD OF 5/20/14 - 5/19/15		VAT/Sales Tax 0%	0.00
		Total Amount USD	6,718.00

Please mention invoice details when making payment

Account Number	: 1058988
Invoice Number	: 2100006704
Invoice Date	: 12 MAY 2014
Total amount	: USD 6,718.00

REMITTANCE SLIP - PLEASE RETURN WITH PAYMENT
PLEASE RETURN THE COMPLETE INVOICE IF YOU ARE MAKING ANY CHANGES

PAYMENT OPTIONS:

- Wire Transfer: Acct#3075-3564, ABA #021000089 Citibank New York, 399 Park Avenue, New York, NY 10043, USA
- Send a check to Elsevier Inc., PO Box 7247-7684, Philadelphia, PA 19170-7684, USA
- Send CC details to Elsevier, 3251 Riverport Lane, Attn: Credit Control, Maryland Heights, MO 63043, USA. Toll Free Fax: 877-223-1436

Visa Card Access/Euro/Mastercard American Express

Card no : |_|_|_|_| - |_|_|_|_| - |_|_|_|_| - |_|_|_|_|

Expiry Date: Month |_|_| Year |_|_|

Signature : _____

Name : _____