Docket #0951 Date Filed: 03/11/2024

UNITED STATES BANKRUPTCY COURT

Central DISTRICT OF California

In Re. Beverly Community Hospital Association §
§
§
Debtor(s) §

Case No. 23-12359

Lead Case No. 23-12359

☒ Jointly Administered

Monthly Operating Report

Chapter 11

Reporting Period Ended: 01/31/2024

Petition Date: 04/19/2023

Months Pending: 10

Industry Classification: 6 2 2 1

Reporting Method: Accrual Basis ◉ Cash Basis ○

Debtor's Full-Time Employees (current): 0

Debtor's Full-Time Employees (as of date of order for relief): 632

Supporting Documentation (check all that are attached):

(For jointly administered debtors, any required schedules must be provided on a non-consolidated basis for each debtor)

- ☒ Statement of cash receipts and disbursements
- ☒ Balance sheet containing the summary and detail of the assets, liabilities and equity (net worth) or deficit
- ☒ Statement of operations (profit or loss statement)
- ☒ Accounts receivable aging
- ☒ Postpetition liabilities aging
- ☒ Statement of capital assets
- ☒ Schedule of payments to professionals
- ☒ Schedule of payments to insiders
- ☒ All bank statements and bank reconciliations for the reporting period
- ☐ Description of the assets sold or transferred and the terms of the sale or transfer

/s/ Howard M. Ehrenberg
Signature of Responsible Party

Howard M. Ehrenberg
Printed Name of Responsible Party

03/06/2024
Date

1875 Century Park East, Suite 1900 Los Angeles, CA 90067
Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefo
§ 1320.4(a)(2) applies.

2312359240311000000000002

Debtor's Name Beverly Community Hospital Association Case No. 23-12359

Part 1: Cash Receipts and Disbursements		Current Month	Cumulative
a.	Cash balance beginning of month	$30,467,414	
b.	Total receipts (net of transfers between accounts)	$3,502,223	$94,357,419
c.	Total disbursements (net of transfers between accounts)	$3,375,559	$87,522,960
d.	Cash balance end of month (a+b-c)	$30,594,078	
e.	Disbursements made by third party for the benefit of the estate	$0	$24,020,852
f.	Total disbursements for quarterly fee calculation (c+e)	$3,375,559	$111,543,812

Part 2: Asset and Liability Status (Not generally applicable to Individual Debtors. See Instructions.)		Current Month
a.	Accounts receivable (total net of allowance)	$4,349,731
b.	Accounts receivable over 90 days outstanding (net of allowance)	$4,265,908
c.	Inventory (Book ○ Market ○ Other ◉ (attach explanation))	$0
d	Total current assets	$35,628,227
e.	Total assets	$41,966,824
f.	Postpetition payables (excluding taxes)	$12,606,569
g.	Postpetition payables past due (excluding taxes)	$466,121
h.	Postpetition taxes payable	$0
i.	Postpetition taxes past due	$0
j.	Total postpetition debt (f+h)	$12,606,569
k.	Prepetition secured debt	$67,064,945
l.	Prepetition priority debt	$0
m.	Prepetition unsecured debt	$34,231,095
n.	Total liabilities (debt) (j+k+l+m)	$113,902,609
o.	Ending equity/net worth (e-n)	$-71,935,785

Part 3: Assets Sold or Transferred		Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	$0	$38,313,618
b.	Total payments to third parties incident to assets being sold/transferred outside the ordinary course of business	$0	$24,020,852
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	$0	$14,292,767

Part 4: Income Statement (Statement of Operations) (Not generally applicable to Individual Debtors. See Instructions.)		Current Month	Cumulative
a.	Gross income/sales (net of returns and allowances)	$324,380	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	$1,355,668	
c.	Gross profit (a-b)	$-1,031,288	
d.	Selling expenses	$1,944,367	
e.	General and administrative expenses	$603,602	
f.	Other expenses	$-28,079	
g.	Depreciation and/or amortization (not included in 4b)	$0	
h.	Interest	$0	
i.	Taxes (local, state, and federal)	$0	
j.	Reorganization items	$-283,059	
k.	Profit (loss)	$3,268,119	$-72,038,291

Debtor's Name Beverly Community Hospital Association Case No. 23-12359

Part 5: Professional Fees and Expenses

				Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
a.	Debtor's professional fees & expenses (bankruptcy) *Aggregate Total*			$0	$315,053	$0	$200,000
	Itemized Breakdown by Firm						
		Firm Name	Role				
	i	Kurtzman Carson Consultant	Other	$0	$115,053	$0	$0
	ii	Sheppard, Mullin, Richter	Lead Counsel	$0	$0	$0	$0
	iii	Portage Point Partners, LLC	Financial Professional	$0	$0	$0	$0
	iv	Orrick Herrington & Sutcliffe	Special Counsel	$0	$0	$0	$0
	v	Bryan Cave Leighton Paisner	Other	$0	$200,000	$0	$200,000
	vi	Dentons US LLP	Other	$0	$0	$0	$0
	vii	Greenberg Traurig, LLP	Other	$0	$0	$0	$0
	viii	Sill Cummins & Gross P.C	Other	$0	$0	$0	$0
	ix	Colliers International Greater	Other	$0	$0	$0	$0
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Debtor's Name Beverly Community Hospital Association Case No. 23-12359

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Debtor's Name Beverly Community Hospital Association Case No. 23-12359

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				Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
b.	Debtor's professional fees & expenses (nonbankruptcy) *Aggregate Total*			$0	$5,372	$0	$5,372
	Itemized Breakdown by Firm						
		Firm Name	Role				
	i	Seyfarth and Shaw LLP	Other	$0	$0	$0	$0
	ii	MKM Law Group PC	Other	$0	$0	$0	$0
	iii	Blanchard Saiger Law PC	Other	$0	$0	$0	$0
	iv	Clark-Hill	Other	$0	$0	$0	$0
	v	Reeves Immigration Law Group	Other	$0	$0	$0	$0
	vi	Doyle, Schiffer, McMahon LLP	Other	$0	$5,372	$0	$5,372
	vii	West and Rosa LLP	Other	$0	$0	$0	$0
	viii	Hooper, Lundy, and Bookman	Other	$0	$0	$0	$0
	ix	Nixon Peabody	Other	$0	$0	$0	$0
	x	James R. Lahana	Other	$0	$0	$0	$0
	xi	Moss Adams LLP	Other	$0	$0	$0	$0
	xii	Holthouse Carlin & Van Trigt	Other	$0	$0	$0	$0
	xiii	Miller Geer & Associates	Other	$0	$0	$0	$0
	xiv	Nizette Short	Other	$0	$0	$0	$0

Debtor's Name Beverly Community Hospital Association Case No. 23-12359

	xv	Bell, McAndrews & Hitachi	Other	$0	$0	$0	$0
	xvi	Tegria Services Group	Other	$0	$0	$0	$0
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Debtor's Name Beverly Community Hospital Association Case No. 23-12359

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Debtor's Name Beverly Community Hospital Association Case No. 23-12359

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c.	All professional fees and expenses (debtor & committees)						

Part 6: Postpetition Taxes		Current Month	Cumulative
a.	Postpetition income taxes accrued (local, state, and federal)	$0	$0
b.	Postpetition income taxes paid (local, state, and federal)	$0	$0
c.	Postpetition employer payroll taxes accrued	$0	$0
d.	Postpetition employer payroll taxes paid	$157,715	$7,051,769
e.	Postpetition property taxes paid	$0	$0
f.	Postpetition other taxes accrued (local, state, and federal)	$0	$0
g.	Postpetition other taxes paid (local, state, and federal)	$0	$0

Part 7: Questionnaire - During this reporting period:

a.	Were any payments made on prepetition debt? (if yes, see Instructions)		Yes ◉	No ◯	
b.	Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions)		Yes ◯	No ◉	
c.	Were any payments made to or on behalf of insiders?		Yes ◯	No ◉	
d.	Are you current on postpetition tax return filings?		Yes ◉	No ◯	
e.	Are you current on postpetition estimated tax payments?		Yes ◉	No ◯	
f.	Were all trust fund taxes remitted on a current basis?		Yes ◉	No ◯	
g.	Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions)		Yes ◯	No ◉	
h.	Were all payments made to or on behalf of professionals approved by the court?		Yes ◉	No ◯	N/A ◯
i.	Do you have:	Worker's compensation insurance?	Yes ◉	No ◯	
		If yes, are your premiums current?	Yes ◉	No ◯	N/A ◯ (if no, see Instructions)
		Casualty/property insurance?	Yes ◉	No ◯	
		If yes, are your premiums current?	Yes ◉	No ◯	N/A ◯ (if no, see Instructions)
		General liability insurance?	Yes ◉	No ◯	
		If yes, are your premiums current?	Yes ◉	No ◯	N/A ◯ (if no, see Instructions)
j.	Has a plan of reorganization been filed with the court?		Yes ◯	No ◉	
k.	Has a disclosure statement been filed with the court?		Yes ◯	No ◉	
l.	Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?		Yes ◉	No ◯	

Debtor's Name Beverly Community Hospital Association Case No. 23-12359

Part 8: Individual Chapter 11 Debtors (Only)

a.	Gross income (receipts) from salary and wages	$0
b.	Gross income (receipts) from self-employment	$0
c.	Gross income from all other sources	$0
d.	Total income in the reporting period (a+b+c)	$0
e.	Payroll deductions	$0
f.	Self-employment related expenses	$0
g.	Living expenses	$0
h.	All other expenses	$0
i.	Total expenses in the reporting period (e+f+g+h)	$0
j.	Difference between total income and total expenses (d-i)	$0
k.	List the total amount of all postpetition debts that are past due	$0
l.	Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)?	Yes ○ No ◉
m.	If yes, have you made all Domestic Support Obligation payments?	Yes ○ No ○ N/A ◉

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.

/s/ Howard M. Ehrenberg
Signature of Responsible Party

Howard M. Ehrenberg
Printed Name of Responsible Party

Chapter 11 Trustee
Title

03/06/2024
Date

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
BALANCE SHEET
UNAUDITED

		FOR THE MONTH ENDED 1/31/2024
Assets		
Cash and cash equivalents	$	30,594,077
Certifcates of Deposit& Savings		2,130,362
Net Patient Accounts receivable		4,349,731
Third Party Settlements Receivable		9,921,204
Other Receivables		(11,754,814)
Inventories		-
Prepaid Expeses		383,766
Deposits & Other Current Assets		3,900
Total current assets		**35,628,227**
Non-Current Assets		6,338,598
Total Assets	**$**	**41,966,824**
Liabilities and Fund Balance		
Current Liabilities - Post-petition		
Trade payables	$	9,371,848
Accrued compensation and liabilities		1,584,034
Accrued Paid Time Off & Sick Leave Reserve		-
Accrued Interest Payable		1,442,587
Accrued Professional Fees		208,100
Accrued Other Expense		-
Total current liabilities		**12,606,569**
Liabilities subject to compromise		34,231,095
Long term Debt, net		67,064,945
Taxes payable		-
Total Liabilities		**113,902,608**
Fund Balance		**(71,935,784)**
Total Liabilities and Fund Balance	**$**	**41,966,824**

[1] Note: Substantially all of the Debtors' assets were sold pursuant to court approved sale on September 6, 2023 [Docket No. 718].

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
STATEMENT OF OPERATIONS
UNAUDITED

	JAN 1,2023 - JAN 31, 2023
Net Revenue	$ 324,380
Cost of Good Sold	1,355,668
Gross Profit	1,031,288
Selling, General & Admistrative	
Selling Expenses	(1,944,367)
General & Administrative	(603,602)
Depreciation and Amortization	-
Total Expenses	(2,547,969)
Income (Loss) from Operataions	3,579,257
Other expense, net [1]	(28,079)
Interest Expense, net	
Net Income (Loss)	3,551,178
Reorganization items	(283,059)
Adjusted Net income (Loss)	$ 3,268,119

[1] Includes loss on sale of assets pursuant to court approved sale on September 6, 2023 [Docket No. 718].
[2] Note: Adjusted Net Income is due to the reversal of accruals for operating expenses that had not materialized.

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
ACCOUNTS RECEIVABLE AGING
UNAUDITED
January 31, 2024

CATEGORY	TOTAL	CURRENT	1-30 DAYS	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS
Patient AR Claims	13,006,419	$ 575,250	$ 9,743	$ -	$ -	$ -	$ 12,421,425
Workers Comp Receivable	181,739	1,815	-	-	-	-	179,924
Allowance for Doubtful Accounts	(8,838,426)	(493,900)	(9,085)	-	-	-	(8,335,441)
Total Patient AR	4,349,731	83,165	658	-	-	-	4,265,908
Third Party Settlement Receivable	9,921,204						
Other Receivables	(11,754,814)						
Total	$ 2,516,122						

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
ACCOUNTS PAYABLE AGING
January 31, 2024
UNAUDITED

CATEGORY	TOTAL	1-30 DAYS	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS
Trade Payables	$ 596,820	62,107	68,592	110,469	89,747	265,906
Accrual Journal Entries	8,730,679	8,730,679				
Total	$ 9,327,499	$ 8,792,786	$ 68,592	$ 110,469	$ 89,747	$ 265,906

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
CASH ACTIVITY
UNAUDITED

	FOR THE PERIOD FROM JAN 1 -31, 2024
Total Receipts	$ 3,502,223
Cash Disbursements:	
Payroll & Taxes	1,719,231
Employee Benefits	574,596
Temp Nursing	53,631
Physicians	-
Leases & Rentals	22,013
Utilities	1,524
Insurance	67,590
Repairs & Maintenance	-
Purchased Services	546,717
Other G&A	240,240
UST Fees	150,016
Total Disbursements	3,375,559
Cash Flow	126,664
Beginning Balance	30,467,413
Ending Balance	$ 30,594,077

Note: Substantially all of the Debtors' assets were sold pursuant to court approved sale on September 6, 2023 [Docket No. 718]. Proceeds from the sale, totaling $24,020,852, were disbursed from escrow for the benefit of secured lenders.

Western Alliance Bank™

Member FDIC

PO Box 26237 • Las Vegas, NV 89126-0237

Return Service Requested

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
CH. 11 DIP CASE 2:23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Last statement: December 31, 2023
This statement: January 31, 2024
Total days in statement period: 31

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Direct inquiries to:
877-476-2265

Western Alliance Bank
450 B Street Ste 150
San Diego CA 92101

NEW PRICING WILL GO INTO EFFECT FEBRUARY 1, 2024 FOR SELECT SERVICES. YOU MAY OR MAY NOT SEE A CHANGE IN FEES DEPENDING ON THE SERVICES YOU USE. FOR QUESTIONS, PLEASE CONTACT YOUR RELATIONSHIP MANAGER OR TREASURY MANAGEMENT ADVISOR OR CLIENT CARE AT 888-995-2265.

Analyzed Business Checking

Account number	XXXXXX0265	Beginning balance	$0.00
Low balance	$0.00	Total additions	.00
Average balance	$0.00	Total subtractions	.00
Avg collected balance	$0	Ending balance	$.00

**** No activity this statement period ****

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

Thank you for banking with Western Alliance Bank

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX5079

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX5079	$0.00

Business Checking - Analysis-XXXXXXXX5079

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$0.00**
	0 Credit(s) This Period	$0.00
	0 Debit(s) This Period	$0.00
01/31/2024	**Ending Balance**	**$0.00**

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0455

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
DENTAL PLAN ACCOUNT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0455	$0.00

Business Checking - Analysis-XXXXXXXX0455

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$0.00**
	5 Credit(s) This Period	$15,246.13
	5 Debit(s) This Period	$15,246.13
01/31/2024	**Ending Balance**	**$0.00**

Other Credits

Date	Description	Amount
01/05/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$4,816.25
01/10/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,686.74
01/17/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$2,508.21
01/24/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,270.64
01/31/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$4,964.29

Electronic Debits

Date	Description	Amount
01/05/2024	DELTA-3941461312 PAYMENT 33701	$4,816.25
01/10/2024	DELTA-3941461312 PAYMENT 34112	$1,686.74
01/17/2024	DELTA-3941461312 PAYMENT 34309	$2,508.21
01/24/2024	DELTA-3941461312 PAYMENT 34645	$1,270.64
01/31/2024	DELTA-3941461312 PAYMENT 34925	$4,964.29

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/05/2024	$0.00	01/17/2024	$0.00	01/31/2024	$0.00
01/10/2024	$0.00	01/24/2024	$0.00		

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX1486

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX1486	$292,543.46

Business Checking - Analysis-XXXXXXXX1486

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$286,031.46**
	1 Credit(s) This Period	$6,512.00
	0 Debit(s) This Period	$0.00
01/31/2024	**Ending Balance**	**$292,543.46**

Electronic Credits

Date	Description	Amount
01/24/2024	MOLINA HEALTHCAR MOLINAACH 01251980	$6,512.00

Daily Balances

Date	Amount
01/24/2024	$292,543.46

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0544

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
"H" ACCOUNT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0544	$39,921.68

Business Checking - Analysis-XXXXXXXX0544

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$53,958.81**
	2 Credit(s) This Period	$7,642.07
	12 Debit(s) This Period	$21,679.20
01/31/2024	**Ending Balance**	**$39,921.68**

Electronic Credits

Date	Description	Amount
01/19/2024	COBRA Prem IGOE AND COMPANY NTE* Dec COBRA Prem Collected\	$7,521.18
01/22/2024	MBI SETL MED-I-BANK	$120.89

Electronic Debits

Date	Description	Amount
01/02/2024	MBI SETL MED-I-BANK	$1,052.37
01/02/2024	MBI SETL MED-I-BANK	$1,445.28
01/04/2024	MBI SETL MED-I-BANK	$54.52
01/08/2024	MBI SETL MED-I-BANK	$102.69
01/09/2024	MBI SETL MED-I-BANK	$200.00
01/12/2024	MBI SETL MED-I-BANK	$25.36
01/19/2024	MBI SETL MED-I-BANK	$63.44
01/25/2024	MBI SETL MED-I-BANK	$6.18
01/26/2024	IDR Chk Re Igoe and Company 01/08-01/21 Checks\	$740.77
01/30/2024	Admin Pymt IGOE AND COMP IN Jan 23 Flex Charges\	$317.50

Other Debits

Date	Description	Amount
01/26/2024	611879 Internet Transfer to 550198764 on 1/26/24 AT 9:01 January 2024 Cobra	$6,911.05
01/26/2024	611855 Internet Transfer to 550198764 on 1/26/24 AT 9:01 December 2023 Cobra	$10,760.04

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/02/2024	$51,461.16	01/04/2024	$51,406.64	01/08/2024	$51,303.95

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Business Checking - Analysis-XXXXXXXX0544 (continued)

Daily Balances (continued)

Date	Amount	Date	Amount	Date	Amount
01/09/2024	$51,103.95	01/22/2024	$58,657.22	01/30/2024	$39,921.68
01/12/2024	$51,078.59	01/25/2024	$58,651.04		
01/19/2024	$58,536.33	01/26/2024	$40,239.18		

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0552

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
AHC BLUE CROSS CAPITATION ACCT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0552	$711,892.18

Business Checking - Analysis-XXXXXXXX0552

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$711,983.15**
	0 Credit(s) This Period	$0.00
	1 Debit(s) This Period	$90.97
01/31/2024	**Ending Balance**	**$711,892.18**

Checks Cleared

Check Nbr	Date	Amount
122644	01/03/2024	$90.97

* Indicates skipped check number

Daily Balances

Date	Amount
01/03/2024	$711,892.18

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0579

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
PAYROLL ACCOUNT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0579	$50,681.46

Business Checking - Analysis-XXXXXXXX0579

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$93,794.05**
	3 Credit(s) This Period	$1,331,229.75
	11 Debit(s) This Period	$1,374,342.34
01/31/2024	**Ending Balance**	**$50,681.46**

Other Credits

Date	Description	Amount
01/03/2024	286579 Internet Transfer from 550198764 on 1/03/24 AT 7:33 PPE 12 30 2023 Pay Da	$449,150.00
01/16/2024	194783 Internet Transfer from 550198764 on 1/16/24 AT 10:39 PPE 1 13 2024	$465,881.54
01/22/2024	116537 Internet Transfer from 550198764 on 1/22/24 AT 11:18 Payroll Third Wave	$416,198.21

Other Debits

Date	Description	Amount
01/03/2024	Outgoing Wire 409801 ADP CLIENT TRUST 1400385855	$449,150.00
01/17/2024	Outgoing Wire 413018 ADP CLIENT TRUST 5900299830	$462,354.12
01/22/2024	Outgoing Wire 414119 ADP CLIENT TRUST 7500898273	$413,628.12
01/31/2024	Outgoing Wire 416503 ADP CLIENT TRUST 0700404534	$36,062.58

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
206448	01/25/2024	$580.90	206652	01/08/2024	$223.51	206655	01/22/2024	$2,580.51
206650*	01/10/2024	$4,489.40	206653	01/08/2024	$716.18			
206651	01/10/2024	$2,007.89	206654	01/08/2024	$2,549.13			

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/03/2024	$93,794.05	01/16/2024	$549,689.48	01/25/2024	$86,744.04
01/08/2024	$90,305.23	01/17/2024	$87,335.36	01/31/2024	$50,681.46
01/10/2024	$83,807.94	01/22/2024	$87,324.94		

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0595

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
BEVERLY HOSPITAL
DEBTOR-IN-POSSESSION
GENERAL ACCOUNT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0595	$761,591.79

Business Checking - Analysis-XXXXXXXX0595

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$521,943.60**
	101 Credit(s) This Period	$285,929.70
	32 Debit(s) This Period	$46,281.51
01/31/2024	**Ending Balance**	**$761,591.79**

Electronic Credits

Date	Description	Amount
01/02/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1119619103* 1341858379\	$27.84
01/02/2024	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1219880* 1954690845\	$73.40
01/02/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1119579706* 1341858379\	$267.66
01/02/2024	HCCLAIMPMT AETNA A04 TRN* 1* 823361000349903* 1066033492\	$488.00
01/02/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1119579707* 1341858379\	$785.38
01/02/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 987001591808* 1954518790~	$1,914.31
01/02/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 987001591810* 1954518790~	$2,607.61
01/02/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 987001591809* 1954518790~	$5,458.21
01/03/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 990008990393* 1954518790~	$12.67
01/03/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1119665133* 1341858379\	$1,632.53
01/03/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1119792986* 1341858379\	$1,796.07
01/04/2024	HCCLAIMPMT AETNA A06 TRN* 1* 823363000111294* 1066033492\	$64.13
01/04/2024	HCCLAIMPMT AETNA A06 TRN* 1* 824001000193908* 1066033492\	$146.63
01/04/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1120025570* 1341858379\	$773.89
01/04/2024	EFT Paymen OPTUM TRN* 1* 1696103* 1330219954\	$4,430.00
01/04/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826637959* 1542174068\	$8,113.68
01/04/2024	EFT Paymen HealthCare Partn TRN* 1* 222680578* 1330219954\	$9,349.90
01/04/2024	EFT Paymen OPTUM TRN* 1* 6755104* 1330219954\	$19,203.42
01/05/2024	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2046819* 1954310407\	$55.36
01/05/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826646324* 1542174068\	$147.67
01/05/2024	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1220022* 1954690845\	$421.19
01/05/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 939001439092* 1954518790~	$9,423.48
01/08/2024	HCCLAIMPMT AETNA AS01 TRN* 1* 824003000260640* 1066033492\	$444.52
01/08/2024	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 438390872* 1954472349\	$456.00
01/08/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1120472582* 1341858379\	$471.75
01/08/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1120376219* 1341858379\	$1,869.72
01/08/2024	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000206029* 1205327501\	$14,273.40

FDIC

Business Checking - Analysis-XXXXXXXX0595 (continued)

Electronic Credits (continued)

Date	Description	Amount
01/09/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1120762871* 1341858379\	$55.14
01/09/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1120762870* 1341858379\	$516.96
01/09/2024	HCCLAIMPMT Health Net, LLC TRN* 1* 0809763448* 1954402957\	$660.00
01/09/2024	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 28051565* 1912155938~	$1,819.93
01/09/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 919001207797* 1954518790~	$10,156.19
01/10/2024	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4014708* 1954310407\	$44.49
01/10/2024	HCCLAIMPMT VALLEY PRESBYTER TRN* 1* 8104696* 1951945832\	$49.60
01/10/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826649673* 1542174068\	$108.14
01/10/2024	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2047011* 1954310407\	$173.43
01/10/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1120898941* 1341858379\	$445.48
01/10/2024	EFT Paymen HealthCare Partn TRN* 1* 222683141* 1330219954\	$1,471.89
01/10/2024	EFT Paymen OPTUM CARE NETWO TRN* 1* 8140425* 1330219954\	$2,342.64
01/10/2024	EFT Paymen OPTUM TRN* 1* 1696546* 1330219954\	$5,740.55
01/10/2024	EFT Paymen OPTUM TRN* 1* 6755536* 1330219954\	$8,686.04
01/10/2024	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-2033676* 1330704304\	$14,304.33
01/11/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 952001520886* 1954518790~	$210.19
01/11/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826651277* 1542174068\	$216.36
01/11/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121192892* 1341858379\	$3,237.34
01/11/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121192893* 1341858379\	$6,323.24
01/11/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826651276* 1542174068\	$13,329.84
01/12/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826659386* 1542174068\	$324.66
01/12/2024	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2047116* 1954310407\	$359.30
01/12/2024	HCCLAIMPMT AETNA A06 TRN* 1* 824009000214312* 1066033492\	$423.72
01/12/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 928001156397* 1954518790~	$633.34
01/12/2024	EFT Paymen HealthCare Partn TRN* 1* 222685378* 1330219954\	$1,533.87
01/12/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121394491* 1341858379\	$3,061.84
01/16/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121468768* 1341858379\	$27.92
01/16/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121604169* 1341858379\	$57.64
01/16/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826660561* 1542174068\	$435.90
01/17/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826661942* 1542174068\	$49.60
01/17/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121808071* 1341858379\	$84.29
01/17/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 921001577895* 1954518790~	$133.40
01/17/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826661187* 1542174068\	$341.01
01/17/2024	HCCLAIMPMT Health Net, LLC TRN* 1* 0809764822* 1954402957\	$406.59
01/17/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 921001577896* 1954518790~	$15,232.99
01/18/2024	HCCLAIMPMT FAMILY CARE SPEC TRN* 1* 5102437* 1954582615\	$185.95
01/18/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 969001647672* 1954518790~	$332.08
01/18/2024	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 28208689* 1912155938~	$553.28
01/18/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1121932832* 1341858379\	$657.91
01/18/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1122012780* 1341858379\	$805.03
01/18/2024	HCCLAIMPMT VALLEY PRESBYTER TRN* 1* 8104932* 1951945832\	$1,049.79
01/18/2024	EFT Paymen OPTUM TRN* 1* 6756137* 1330219954\	$3,813.12
01/18/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826663529* 1542174068\	$12,078.69
01/19/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1122160368* 1341858379\	$64.95
01/19/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1122160367* 1341858379\	$139.57
01/19/2024	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1220297* 1954690845\	$231.14
01/22/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1122449040* 1341858379\	$152.99
01/22/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1122449041* 1341858379\	$5,290.54
01/23/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 900009472834* 1954518790~	$9.28
01/23/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 900009472835* 1954518790~	$283.79
01/23/2024	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 28280559* 1912155938~	$12,562.22
01/24/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1122886799* 1341858379\	$71.81
01/24/2024	HCCLAIMPMT AETNA A06 TRN* 1* 824019000323414* 1066033492\	$158.26
01/24/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 968001729990* 1954518790~	$1,758.70
01/24/2024	EFT Paymen HealthCare Partn TRN* 1* 222689410* 1330219954\	$4,577.10
01/25/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1123029592* 1341858379\	$23.30
01/25/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1123029594* 1341858379\	$58.34
01/25/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1123029593* 1341858379\	$277.29

Business Checking - Analysis-XXXXXXXX0595 (continued)

Electronic Credits (continued)

Date	Description	Amount
01/26/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826679245* 1542174068\	$128.51
01/26/2024	Chargepoint Inc 1232024 03 00008633/14	$1,293.57
01/26/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826679244* 1542174068\	$2,050.00
01/26/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 951001623796* 1954518790~	$22,248.76
01/29/2024	HCCLAIMPMT VALLEY PRESBYTER TRN* 1* 8105268* 1951945832\	$49.60
01/29/2024	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1220435* 1954690845\	$76.88
01/29/2024	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826686108* 1542174068\	$103.97
01/29/2024	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2047719* 1954310407\	$342.05
01/29/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1123465081* 1341858379\	$1,463.71
01/30/2024	EFT Paymen OPTUM TRN* 1* 6757116* 1330219954\	$3,043.00
01/30/2024	HCCLAIMPMT HNB - ECHO TRN* 1* 1123659260* 1341858379\	$4,140.92
01/30/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 904001612366* 1954518790~	$12,408.88
01/31/2024	HCCLAIMPMT ASSOCIATED HISPA TRN* 1* 2329697* 1954365761\	$0.68
01/31/2024	EFT Paymen OPTUM TRN* 1* 6757208* 1330219954\	$1,485.00
01/31/2024	EFT Paymen OPTUM CARE NETWO TRN* 1* 8143238* 1330219954\	$3,359.95
01/31/2024	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 995001844852* 1954518790~	$10,892.82

Other Debits

Date	Description	Amount
01/02/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$210.03
01/02/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$5,000.00
01/03/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$2,529.52
01/04/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$525.45
01/05/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX4870	$229.06
01/05/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$391.78
01/05/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0455	$4,816.25
01/08/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$729.12
01/09/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$3,079.42
01/10/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$170.96
01/10/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$1,042.02
01/10/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0455	$1,686.74
01/11/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$111.88
01/11/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$310.47
01/12/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$127.73
01/12/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$176.66
01/16/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$1,526.48
01/17/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$874.26
01/17/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0455	$2,508.21
01/18/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$48.55
01/19/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$5,399.71
01/22/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$468.93
01/22/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$471.00
01/24/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0455	$1,270.64
01/24/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$1,499.25
01/25/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0617	$477.99
01/25/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$1,143.80
01/26/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$195.00
01/29/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$2,312.03
01/30/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$919.35
01/31/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0625	$1,064.93
01/31/2024	TRANSFER TO Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0455	$4,964.29

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/02/2024	$528,355.98	01/10/2024	$632,816.48	01/19/2024	$688,067.08
01/03/2024	$529,267.73	01/11/2024	$655,711.10	01/22/2024	$692,570.68
01/04/2024	$570,823.93	01/12/2024	$661,743.44	01/23/2024	$705,425.97
01/05/2024	$575,434.54	01/16/2024	$660,738.42	01/24/2024	$709,221.95
01/08/2024	$592,220.81	01/17/2024	$673,603.83	01/25/2024	$707,959.09
01/09/2024	$602,349.61	01/18/2024	$693,031.13	01/26/2024	$733,484.93

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Business Checking - Analysis-XXXXXXXX0595 (continued)

Daily Balances (continued)

Date	Amount	Date	Amount	Date	Amount
01/29/2024	$733,209.11	01/30/2024	$751,882.56	01/31/2024	$761,591.79

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0617

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0617	$0.00

Business Checking - Analysis-XXXXXXXX0617

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$0.00**
	7 Credit(s) This Period	$6,800.27
	14 Debit(s) This Period	$6,800.27
01/31/2024	**Ending Balance**	**$0.00**

Other Credits

Date	Description	Amount
01/02/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$5,000.00
01/05/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$391.78
01/10/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$170.96
01/11/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$111.88
01/12/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$176.66
01/22/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$471.00
01/25/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$477.99

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
11384	01/05/2024	$93.70	11398*	01/05/2024	$93.70	11404*	01/22/2024	$471.00
11388*	01/05/2024	$110.68	11399	01/11/2024	$63.62	11405	01/25/2024	$67.19
11391*	01/02/2024	$5,000.00	11400	01/11/2024	$1.20	11406	01/25/2024	$140.80
11392	01/05/2024	$93.70	11401	01/11/2024	$47.06	11407	01/25/2024	$270.00
11396*	01/10/2024	$170.96	11402	01/12/2024	$176.66			

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/02/2024	$0.00	01/11/2024	$0.00	01/25/2024	$0.00
01/05/2024	$0.00	01/12/2024	$0.00		
01/10/2024	$0.00	01/22/2024	$0.00		

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL
Customer Number: XXXXXXXX0625

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0625	$0.00

Business Checking - Analysis-XXXXXXXX0625

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$0.00**
	19 Credit(s) This Period	$24,006.05
	65 Debit(s) This Period	$24,006.05
01/31/2024	**Ending Balance**	**$0.00**

Other Credits

Date	Description	Amount
01/02/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$210.03
01/03/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$2,529.52
01/04/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$525.45
01/08/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$729.12
01/09/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$3,079.42
01/10/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,042.02
01/11/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$310.47
01/12/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$127.73
01/16/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,526.48
01/17/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$874.26
01/18/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$48.55
01/19/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$5,399.71
01/22/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$468.93
01/24/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,499.25
01/25/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,143.80
01/26/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$195.00
01/29/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$2,312.03
01/30/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$919.35
01/31/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$1,064.93

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
15685	01/03/2024	$1,042.02	15712	01/03/2024	$580.00	15716	01/04/2024	$139.50
15690*	01/08/2024	$529.50	15713	01/10/2024	$1,042.02	15717	01/04/2024	$287.50
15701*	01/02/2024	$5.27	15714	01/02/2024	$3.60	15718	01/03/2024	$445.50
15711*	01/02/2024	$138.00	15715	01/02/2024	$63.16	15719	01/03/2024	$462.00

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Business Checking - Analysis-XXXXXXXX0625 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
15720	01/29/2024	$139.50	15738	01/16/2024	$548.89	15756	01/31/2024	$230.00
15721	01/04/2024	$98.45	15739	01/16/2024	$284.27	15757	01/24/2024	$45.00
15722	01/08/2024	$146.85	15740	01/16/2024	$2.40	15758	01/25/2024	$980.00
15723	01/09/2024	$3,079.42	15741	01/16/2024	$64.64	15759	01/25/2024	$163.80
15724	01/08/2024	$2.40	15742	01/17/2024	$475.00	15760	01/29/2024	$33.00
15725	01/08/2024	$50.37	15743	01/17/2024	$91.25	15761	01/26/2024	$6.00
15726	01/16/2024	$46.28	15744	01/18/2024	$10.00	15762	01/26/2024	$6.00
15727	01/11/2024	$139.50	15745	01/18/2024	$10.00	15763	01/26/2024	$138.00
15728	01/11/2024	$2.40	15746	01/18/2024	$1.20	15764	01/26/2024	$45.00
15729	01/19/2024	$65.04	15747	01/18/2024	$27.35	15766*	01/31/2024	$455.71
15730	01/11/2024	$168.57	15748	01/22/2024	$66.00	15767	01/29/2024	$1.20
15731	01/12/2024	$76.73	15749	01/22/2024	$82.50	15768	01/29/2024	$1,005.06
15732	01/29/2024	$91.25	15750	01/19/2024	$2,255.25	15769	01/30/2024	$50.85
15733	01/12/2024	$45.00	15751	01/19/2024	$3,079.42	15770	01/31/2024	$123.11
15734	01/12/2024	$6.00	15752	01/22/2024	$111.43	15771	01/31/2024	$256.11
15735	01/17/2024	$308.01	15753	01/22/2024	$209.00	15772	01/30/2024	$92.00
15736	01/29/2024	$1,042.02	15754	01/24/2024	$1,316.25	15773	01/30/2024	$776.50
15737	01/16/2024	$580.00	15755	01/24/2024	$138.00			

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/02/2024	$0.00	01/12/2024	$0.00	01/25/2024	$0.00
01/03/2024	$0.00	01/16/2024	$0.00	01/26/2024	$0.00
01/04/2024	$0.00	01/17/2024	$0.00	01/29/2024	$0.00
01/08/2024	$0.00	01/18/2024	$0.00	01/30/2024	$0.00
01/09/2024	$0.00	01/19/2024	$0.00	01/31/2024	$0.00
01/10/2024	$0.00	01/22/2024	$0.00		
01/11/2024	$0.00	01/24/2024	$0.00		

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0633

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0633	$0.00

Business Checking - Analysis-XXXXXXXX0633

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$0.00**
	0 Credit(s) This Period	$0.00
	0 Debit(s) This Period	$0.00
01/31/2024	**Ending Balance**	**$0.00**

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX0692

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
AHC HEALTH NET CAPITATION ACCT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0692	$92,378.52

Business Checking - Analysis-XXXXXXXX0692

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$92,378.52**
	0 Credit(s) This Period	$0.00
	0 Debit(s) This Period	$0.00
01/31/2024	**Ending Balance**	**$92,378.52**

FDIC

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL
Customer Number: XXXXXXXX8764

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX8764	$3,307,068.81

Business Checking - Analysis-XXXXXXXX8764

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$3,777,851.39**
	35 Credit(s) This Period	$3,065,790.02
	102 Debit(s) This Period	$3,536,572.60
01/31/2024	**Ending Balance**	**$3,307,068.81**

Deposits

Date	Description	Amount
01/02/2024	REMOTE DEPOSIT	$3,469.93
01/03/2024	REMOTE DEPOSIT	$452.73
01/03/2024	REMOTE DEPOSIT	$4,571.67
01/03/2024	REMOTE DEPOSIT	$9,199.63
01/03/2024	REMOTE DEPOSIT	$19,482.66
01/04/2024	REMOTE DEPOSIT	$120.00
01/05/2024	REMOTE DEPOSIT	$639.00
01/05/2024	REMOTE DEPOSIT	$1,191.00
01/08/2024	REMOTE DEPOSIT	$3,509.72
01/08/2024	REMOTE DEPOSIT	$5,997.11
01/10/2024	REMOTE DEPOSIT	$75.43
01/16/2024	REMOTE DEPOSIT	$10,266.79
01/23/2024	REMOTE DEPOSIT	$47.33
01/23/2024	REMOTE DEPOSIT	$110.00
01/26/2024	REMOTE DEPOSIT	$232.17
01/26/2024	REMOTE DEPOSIT	$20,451.49
01/30/2024	REMOTE DEPOSIT	$3,067.06
01/30/2024	REMOTE DEPOSIT	$14,160.63
01/31/2024	REMOTE DEPOSIT	$1,627.66

Electronic Credits

Date	Description	Amount
01/05/2024	Adventist Health EDI PYMNTS 1929606	$3,302.80
01/05/2024	Adventist Health EDI PYMNTS 1929605	$4,214.47
01/05/2024	Adventist Health EDI PYMNTS 1929607	$728,209.08
01/12/2024	Adventist Health EDI PYMNTS 1936795	$4,143.68

FDIC

Business Checking - Analysis-XXXXXXXX8764 (continued)

Electronic Credits (continued)

Date	Description	Amount
01/12/2024	Adventist Health EDI PYMNTS 1936794	$716,904.02
01/12/2024	Adventist Health EDI PYMNTS 1936793	$1,030,288.60
01/16/2024	Adventist Health EDI PYMNTS 1937293	$95.76
01/22/2024	Adventist Health EDI PYMNTS 1942060	$445,478.21
01/30/2024	BMO Alto ACCTVERIFY 50000000033	$0.05
01/30/2024	BMO Alto ACCTVERIFY 50000000033	$0.25

Other Credits

Date	Description	Amount
01/11/2024	DEBIT REVERSE FICTITIOUS CK#1006	$4,500.00
01/19/2024	DEBIT REVERSE FICTITIOUS CK#1124	$3,770.00
01/23/2024	DEBIT REVERSE FICTITIOUS CK#1122	$3,770.00
01/26/2024	611879 Internet Transfer from 500290544 on 1/26/24 AT 9:01 January 2024 Cobra	$6,911.05
01/26/2024	611855 Internet Transfer from 500290544 on 1/26/24 AT 9:01 December 2023 Cobra	$10,760.04
01/31/2024	DEBIT REVERSE FICTITIOUS CK#1136	$4,770.00

Electronic Debits

Date	Description	Amount
01/05/2024	ACH Paymen BEVERLY COMMUNIT Keenan Week of 01/02/2024	$20,699.00
01/12/2024	ADP PAYROLL FEES ADP FEES 779093735705	$3,110.38
01/12/2024	ACH Paymen BEVERLY COMMUNIT Keenan Week of 01/08/2024	$5,236.29
01/12/2024	ACH Paymen BEVERLY COMMUNIT Express Scripts 48446601C & 29628981A	$5,252.11
01/12/2024	ACH Paymen BEVERLY COMMUNIT Express Scripts 48485961C & 29645711A	$6,176.91
01/12/2024	ACH Paymen BEVERLY COMMUNIT PPE 12 30 2023 Pay Date 01 05 2024	$6,238.64
01/12/2024	ACH Paymen BEVERLY COMMUNIT Beverly Hospital Invoice 14405	$67,590.00
01/12/2024	ACH Paymen BEVERLY COMMUNIT TRransamerica PPE 12 30 2023 Pay Date 01 05 2024	$70,987.71
01/19/2024	ACH Paymen BEVERLY COMMUNIT Express Scripts Invoices 48546781C & 29685431A	$18,329.41
01/19/2024	ACH Paymen BEVERLY COMMUNIT January Stop Loss	$32,920.89
01/29/2024	ERISA PENALTY PAYMENT 0000	$4,000.00
01/29/2024	ACH Paymen BEVERLY COMMUNIT Keenan Week of 1/15/24	$14,808.04
01/29/2024	BEVERLY COMMUNIT ACH Paymen 9951816005	$38,694.42
01/29/2024	ACH Paymen BEVERLY COMMUNIT Keenan Week of 1/22/24	$135,725.15
01/29/2024	QUARTERLY FEE PAYMENT 0000	$150,016.00

Other Debits

Date	Description	Amount
01/03/2024	286579 Internet Transfer to 500290579 on 1/03/24 AT 7:33 PPE 12 30 2023 Pay Date	$449,150.00
01/04/2024	Outgoing Wire 410224 ADP CLIENT TRUST 3359726VV	$226,465.49
01/09/2024	Outgoing Wire 411244 Pitney Bowes	$1,600.00
01/16/2024	Outgoing Wire 412746 Adventist Health Systems/West	$3,900.00
01/16/2024	194783 Internet Transfer to 500290579 on 1/16/24 AT 10:39 PPE 1 13 2024	$465,881.54
01/18/2024	Outgoing Wire 413390 ADP CLIENT TRUST 3542575VV	$227,817.77
01/22/2024	Outgoing Wire 414252 ADP CLIENT TRUST 3815902VV	$162,960.03
01/22/2024	116537 Internet Transfer to 500290579 on 1/22/24 AT 11:18 Payroll Third Wave	$416,198.21

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
1006	01/10/2024	$4,500.00	2768	01/03/2024	$952.00	2810	01/03/2024	$3,163.45
1122*	01/22/2024	$3,770.00	2769	01/04/2024	$8,640.00	2811	01/09/2024	$11,678.85
1124*	01/18/2024	$3,770.00	2785*	01/03/2024	$874.00	2812	01/05/2024	$3,353.57
1136*	01/30/2024	$4,770.00	2805*	01/03/2024	$64,100.09	2813	01/11/2024	$180.21
2566*	01/09/2024	$1,369.31	2806	01/05/2024	$8,390.00	2814	01/05/2024	$307.78
2584*	01/17/2024	$5,336.45	2807	01/08/2024	$1,476.00	2815	01/09/2024	$2,433.39
2735*	01/02/2024	$3,202.97	2808	01/18/2024	$2,891.38	2816	01/09/2024	$5,937.25
2767*	01/02/2024	$23,753.03	2809	01/04/2024	$3,082.92	2817	01/04/2024	$14,631.83

Business Checking - Analysis-XXXXXXXX8764 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
2818	01/04/2024	$10,246.24	2837	01/09/2024	$5,999.96	2876	01/12/2024	$6,480.00
2819	01/05/2024	$418.50	2839*	01/08/2024	$3,580.71	2877	01/11/2024	$903.38
2820	01/03/2024	$50.00	2840	01/22/2024	$1,849.67	2878	01/10/2024	$900.00
2821	01/03/2024	$385.00	2841	01/09/2024	$767.25	2879	01/16/2024	$840.45
2822	01/02/2024	$43,343.50	2842	01/04/2024	$120.00	2881*	01/22/2024	$446.10
2823	01/04/2024	$1,832.82	2845*	01/04/2024	$74,602.86	2882	01/09/2024	$55,875.52
2824	01/08/2024	$1,330.44	2860*	01/16/2024	$24,756.00	2883	01/10/2024	$97.18
2825	01/04/2024	$1,987.47	2863*	01/11/2024	$27,719.65	2884	01/10/2024	$56,416.65
2826	01/03/2024	$676.19	2865*	01/09/2024	$95.43	2885	01/17/2024	$3,800.00
2827	01/17/2024	$1,687.50	2866	01/23/2024	$182.00	2886	01/10/2024	$338.40
2828	01/04/2024	$247.02	2867	01/11/2024	$7,996.54	2887	01/29/2024	$156,738.20
2829	01/03/2024	$17,273.31	2868	01/10/2024	$9,310.00	2888	01/30/2024	$42,227.28
2830	01/04/2024	$1,725.00	2869	01/22/2024	$3,542.75	2890*	01/29/2024	$124,870.90
2831	01/04/2024	$320.31	2870	01/09/2024	$2,188.75	2891	01/30/2024	$3,707.89
2832	01/04/2024	$38,859.88	2871	01/17/2024	$4,117.20	2892	01/30/2024	$43,286.97
2833	01/04/2024	$7,943.61	2872	01/12/2024	$290.15	2895*	01/16/2024	$6,321.84
2834	01/04/2024	$556.90	2873	01/08/2024	$11,901.03	2963*	01/30/2024	$26.81
2835	01/05/2024	$281.55	2874	01/12/2024	$1,449.30			
2836	01/05/2024	$4,537.09	2875	01/09/2024	$2,800.98			

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/02/2024	$3,711,021.82	01/11/2024	$3,313,216.36	01/23/2024	$3,963,960.07
01/03/2024	$3,208,104.47	01/12/2024	$4,891,741.17	01/26/2024	$4,002,314.82
01/04/2024	$2,816,962.12	01/16/2024	$4,400,403.89	01/29/2024	$3,377,462.11
01/05/2024	$3,516,530.98	01/17/2024	$4,385,462.74	01/30/2024	$3,300,671.15
01/08/2024	$3,507,749.63	01/18/2024	$4,150,983.59	01/31/2024	$3,307,068.81
01/09/2024	$3,417,002.94	01/19/2024	$4,103,503.29		
01/10/2024	$3,345,516.14	01/22/2024	$3,960,214.74		

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL
Customer Number: XXXXXXXX4870

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX4870	$0.00

Business Checking - Analysis-XXXXXXXX4870

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$0.00**
	1 Credit(s) This Period	$229.06
	2 Debit(s) This Period	$229.06
01/31/2024	**Ending Balance**	**$0.00**

Other Credits

Date	Description	Amount
01/05/2024	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXX0595	$229.06

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount
430	01/05/2024	$114.53	431	01/05/2024	$114.53

* Indicates skipped check number

Daily Balances

Date	Amount
01/05/2024	$0.00

FDIC

EAST WEST BANK your financial bridge

9300 Flair Dr., 1St FL
El Monte, CA. 91731

Direct inquiries to:
888 761-3967

ACCOUNT STATEMENT
Page 1 of 1
STARTING DATE: January 12, 2024
ENDING DATE: January 31, 2024
Total days in statement period: 20
97-02000498
(0)

BK EST/MONTEBELLO COMMUNITY HLTH DEBTOR
HOWARD M EHRENBERG, CH 11 TRUSTEE 200
CASE #23-12360
1875 CENTURY PARK E STE 1900
LOS ANGELES CA 90067-2519

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Trustee-Vendor Checking

Account number	97-02000498	Beginning balance		$0.00
Low balance	$0.00	Total additions	(0)	.00
Average balance	$0.00	Total subtractions	(0)	.00
		Ending balance		$.00

** No activity this statement period **

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL **Page 1 of 2**

Customer Number: XXXXXXXX8953

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX8953	$21,818.85

Business Checking - Analysis-XXXXXXXX8953

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$21,818.85**
	0 Credit(s) This Period	$0.00
	0 Debit(s) This Period	$0.00
01/31/2024	**Ending Balance**	**$21,818.85**

FDIC

BMO Bank N.A.
P.O. Box 94033
Palatine, IL 60094-4033
Toll Free: 1-888-340-2265

ACCOUNT NUMBER: [redacted]7284

Statement Period
01/01/24 TO 01/31/24
IM0099002900000000

91 05710

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
GENERAL CHECKING ACCOUNT
309 W BEVERLY BLVD
0 MONTEBELLO CA 90640-4308

0000

EFFECTIVE 3/17/24 ("EFFECTIVE DATE"): "AAA" AND "AAA RULES" ARE DELETED FROM THE GLOSSARY OF THE BMO HANDBOOK. SECTION 7.EE ARBITRATION PROVISION OF THE DEPOSIT ACCOUNT AGREEMENT IS DELETED AND REPLACED IN ITS ENTIRETY WITH A NEW SECTION 7.EE, A COPY OF WHICH IS EITHER ENCLOSED WITH THIS STATEMENT OR AVAILABLE AT BMO.COM/CHANGEINTERMS UNTIL 6/30/24. PLEASE REVIEW THESE CHANGES CAREFULLY. WITHIN 60 DAYS OF THE EFFECTIVE DATE, YOU CAN CHOOSE TO NOT AGREE TO THE ARBITRATION PROVISION BY SENDING US A SIGNED, WRITTEN OPT OUT NOTICE MEETING THE REQUIREMENTS IN THE NEW SECTION 7.EE.

IF YOU HAVE QUESTIONS ABOUT ANY OF YOUR BMO ACCOUNTS, PLEASE CALL US TOLL-FREE AT 1-888-340-2265. BMO BANK N.A. MEMBER FDIC EQUAL HOUSING LENDER. NMLS 401052 VISIT US ONLINE AT WWW.BMO.COM.

CHECKING ACCOUNTS

SMALL BUS INTEREST CKG — BEVERLY COMMUNITY HOSPITAL ASSOCIATION
ACCOUNT NUMBER [redacted]284 (Checking)

Interest Paid YTD	3.39
Interest Paid Previous Year	116.86

DEPOSIT ACCOUNT SUMMARY

Previous Balance as of December 31, 2023		272,594.47
53 Deposits	(Plus)	196,383.52
2 Withdrawals	(Minus)	4,556.77
Interest Paid	(Plus)	3.39
Ending Balance as of January 31, 2024		464,424.61

Deposits and Other Credits

Date	Amount	Description
Jan 02	81.45	EDI/EFT CCD+ CREDIT CCD BSC Promise HCCLAIMPMT
Jan 02	191.76	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 02	212.10	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 02	215.77	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 02	5,608.29	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP

P2

BMO Bank N.A.
P.O. Box 94033
Palatine, IL 60094-4033
Toll Free: 1-888-340-2265

ACCOUNT NUMBER: [redacted]7284

Statement Period
01/01/24 TO 01/31/24

91 05710 IM0099002900000000

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

0

Jan 02	28,643.33	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Jan 03	79.39	EDI/EFT CCD+ CREDIT CCD BSC Promise HCCLAIMPMT
Jan 03	117.91	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 03	190.40	CURRENCY DEPOSIT CURRENCY DEPOSIT 2258047628 LOC 0000000000
Jan 03	446.44	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 03	1,447.42	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 04	100.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 04	188.25	EDI/EFT CCD+ CREDIT CCD BSC Promise HCCLAIMPMT
Jan 04	52,576.31	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Jan 05	404.66	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 08	50.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 08	243.03	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 09	521.22	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 09	[redacted]272.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 09	5,362.00	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Jan 09	11,533.82	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Jan 09	20,148.14	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 10	131.67	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Jan 10	205.00	CURRENCY DEPOSIT CURRENCY DEPOSIT 2258051284 LOC 0000000000
Jan 10	837.29	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Jan 10	3,210.00	EDI/EFT CCD+ CREDIT CCD UnitedHealthcare HCCLAIMPMT
Jan 10	10,444.28	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 11	50.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 12	65.00	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 16	100.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 16	203.74	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 16	250.49	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Jan 17	10.00	CURRENCY DEPOSIT CURRENCY DEPOSIT 2258055065 LOC 0000000000
Jan 17	125.44	CURRENCY DEPOSIT

MEMBER FDIC

BMO Bank N.A.
P.O. Box 94033
Palatine, IL 60094-4033
Toll Free: 1-888-340-2265

ACCOUNT NUMBER: [redacted]7284

Statement Period
01/01/24 TO 01/31/24
IM0099002900000000

91 05710

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

0

Date	Amount	Description
		CURRENCY DEPOSIT 2258055066 LOC 0000000000
Jan 17	559.41	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 17	617.60	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 18	1,532.72	EDI/EFT CCD+ CREDIT
		CCD BLUE SHIELD CA HCCLAIMPMT
Jan 19	130.27	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 22	50.00	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 22	150.00	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 22	197.00	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 23	125.00	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 23	188.45	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 24	38.27	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 24	270.00	CURRENCY DEPOSIT
		CURRENCY DEPOSIT 2281050919 LOC 0000000000
Jan 25	63.67	EDI/EFT CCD+ CREDIT
		CCD UnitedHealthcare HCCLAIMPMT
Jan 25	[redacted]535.71	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 26	643.82	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 29	20,112.98	EDI/EFT CCD+ CREDIT
		CCD BLUE SHIELD CA HCCLAIMPMT
Jan 30	6.00	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 30	200.00	EDI/EFT CCD+ CREDIT
		CCD MERCHANT SERVICE MERCH DEP
Jan 30	644.32	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 30	22,051.70	EDI/EFT CCD+ CREDIT
		CCD BLUE CROSS CA5C HCCLAIMPMT
Jan 31	3.39	INTEREST PAID

Withdrawals and Other Debits

Date	Amount	Description
Jan 02	1,153.00	ACH DEBIT
		CCD MERCHANT SERVICE MERCH FEE
Jan 23	3,403.77	ACCT ANALYSIS SERV CHG

MEMBER FDIC

BMO Bank N.A.
P.O. Box 94033
Palatine, IL 60094-4033
Toll Free: 1-888-340-2265

ACCOUNT NUMBER: [redacted]7284

Statement Period
01/01/24 TO 01/31/24
IM0099002900000000

91 05710

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

0

Daily Balance Summary

Date	Balance	Date	Balance
Dec 31	272,594.47	Jan 17	417,885.08
Jan 02	306,394.17	Jan 18	419,417.80
Jan 03	308,675.73	Jan 19	419,548.07
Jan 04	361,540.29	Jan 22	419,945.07
Jan 05	361,944.95	Jan 23	416,854.75
Jan 08	362,237.98	Jan 24	417,163.02
Jan 09	401,075.16	Jan 25	420,762.40
Jan 10	415,903.40	Jan 26	421,406.22
Jan 11	415,953.40	Jan 29	441,519.20
Jan 12	416,018.40	Jan 30	464,421.22
Jan 16	416,572.63	Jan 31	464,424.61

Statement Period Rates

Effective	Jan 01, 2024	Balance			Rate
		ZERO	to	99,999,999,999	0.010 %

[redacted]

MEMBER FDIC

EAST WEST BANK your financial bridge

9300 Flair Dr., 1St FL
El Monte, CA. 91731

Direct inquiries to:
888 761-3967

ACCOUNT STATEMENT
Page 1 of 1
STARTING DATE: January 03, 2024
ENDING DATE: January 31, 2024
Total days in statement period: 29
97-02000491
(0)

BK EST/BEVERLY COMMUNITY HOSPITAL ASSOC
HOWARD M EHRENBERG CH 11 TRUSTEE 200
CASE #23-12359
1875 CENTURY PARK E STE 1900
LOS ANGELES CA 90067-2519

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Trustee-Vendor Checking

Account number	[redacted]0491	Beginning balance		$0.00
Low balance	$0.00	Total additions	(0)	.00
Average balance	$0.00	Total subtractions	(0)	.00
		Ending balance		$.00

** No activity this statement period **

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year to date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

EAST WEST BANK your financial bridge

9300 Flair Dr., 1St FL
El Monte, CA. 91731

Direct inquiries to:
888 761-3967

ACCOUNT STATEMENT
Page 1 of 1
STARTING DATE: January 01, 2024
ENDING DATE: January 31, 2024
Total days in statement period: 31
97-02000449
(0)

BK EST/BEVERLY COMMUNITY HOSPITAL ASSOC
HOWARD M EHRENBERG CH 11 TRUSTEE 200
CASE #23-12359
1875 CENTURY PARK E SUITE 1900
LOS ANGELES CA 90067-2519

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Trustee-Vendor Money Market

Account number	[redacted]0449	Beginning balance		$9,139,452.77
Low balance	$9,139,452.77	Total additions	(1)	21,346.26
Average balance	$9,139,452.77	Total subtractions	(0)	0.00
Interest paid year to date	$21,346.26	Ending balance		$9,160,799.03

CREDITS

Number	Date	Transaction Description	Additions
	01-31	Interest Credit	21,346.26

DAILY BALANCES

Date	Amount	Date	Amount	Date	Amount
12-31	9,139,452.77	01-31	9,160,799.03		

INTEREST INFORMATION

Annual percentage yield earned	2.79%	Interest-bearing days	31
Average balance for APY	$9,139,452.77	Interest earned	$21,346.26

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

EAST WEST BANK your financial bridge

9300 Flair Dr., 1St FL
El Monte, CA. 91731

Direct inquiries to:
888 761-3967

ACCOUNT STATEMENT
Page 1 of 2
STARTING DATE: January 01, 2024
ENDING DATE: January 31, 2024
Total days in statement period: 31
97-02000442
(0)

BK EST/BEVERLY COMMUNITY HOSPITAL ASSOC
HOWARD EHRENBERG CH 11 TRUSTEE 200
CASE #23-12359
1875 CENTURY PARK E STE 1900
LOS ANGELES CA 90067-2519

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Trustee-Vendor Money Market

Account number	[redacted]0442	Beginning balance		$15,300,935.65
Low balance	$14,389,720.65	Total additions	(3)	33,679.16
Average balance	$14,419,115.78	Total subtractions	(3)	911,216.62
Interest paid year to date	$33,677.54	Ending balance		$14,423,398.19

CREDITS

Number	Date	Transaction Description		Additions
	01-08	Pre-Auth Credit	GREENLIGHT ACCTVERIFY 240108 ACCTVERIFY	.73
	01-08	Pre-Auth Credit	GREENLIGHT ACCTVERIFY 240108 ACCTVERIFY	.89
	01-31	Interest Credit		33,677.54

DEBITS

Date	Transaction Description		Subtractions
01-02	Transfer Debit	TFR TO XXX0435	-911,215.00
01-29	Debit Memo	FRB OFFSET FOR ACH DISPUTE CLAIM 012424-014	-0.73
01-29	Debit Memo	FRB OFFSET FOR ACH DISPUTE CLAIM 012424-014	-0.89

DAILY BALANCES

Date	Amount	Date	Amount	Date	Amount
12-31	15,300,935.65	01-08	14,389,722.27	01-31	14,423,398.19
01-02	14,389,720.65	01-29	14,389,720.65		

INTEREST INFORMATION

Annual percentage yield earned	2.79%	Interest-bearing days	31
Average balance for APY	$14,419,115.78	Interest earned	$33,677.54

EAST WEST BANK your financial bridge

9300 Flair Dr., 1St FL
El Monte, CA. 91731

Direct inquiries to:
888 761-3967

ACCOUNT STATEMENT
Page 1 of 1
STARTING DATE: January 01, 2024
ENDING DATE: January 31, 2024
Total days in statement period: 31
97-02000435
(0)

BK EST/BEVERLY COMMUNITY HOSPITAL ASSOC
HOWARD EHRENBERG CH 11 TRUSTEE 200
CASE #23-12359
1875 CENTURY PARK E SUITE 1900
LOS ANGELES CA 90067

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Trustee-Vendor Money Market

Account number	[redacted]0435	Beginning balance		$210,233.72
Low balance	$210,233.72	Total additions	(3)	969,905.91
Average balance	$1,142,655.29	Total subtractions	(0)	0.00
Interest paid year to date	$2,668.81	Ending balance		$1,180,139.63

CREDITS

Number	Date	Transaction Description		Additions
	01-02	Transfer Credit	TFR FROM XXX0442	911,215.00
10003	01-04	Image Cl Deposi		56,022.10
	01-31	Interest Credit		2,668.81

DAILY BALANCES

Date	Amount	Date	Amount	Date	Amount
12-31	210,233.72	01-04	1,177,470.82		
01-02	1,121,448.72	01-31	1,180,139.63		

INTEREST INFORMATION

Annual percentage yield earned	2.79%	Interest-bearing days	31
Average balance for APY	$1,142,655.29	Interest earned	$2,668.81

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

Western Alliance Bank™

Member FDIC

PO Box 26237 • Las Vegas, NV 89126-0237

Return Service Requested

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DBA BEVERLY HOSPITAL
CH. 11 DIP CASE 2:23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Last statement: December 31, 2023
This statement: January 31, 2024
Total days in statement period: 31

Page 1 of 1
XXXXXX0520
(0)

Direct inquiries to:
877-476-2265

Western Alliance Bank
450 B Street Ste 150
San Diego CA 92101

NEW PRICING WILL GO INTO EFFECT FEBRUARY 1, 2024 FOR SELECT SERVICES. YOU MAY OR MAY NOT SEE A CHANGE IN FEES DEPENDING ON THE SERVICES YOU USE. FOR QUESTIONS, PLEASE CONTACT YOUR RELATIONSHIP MANAGER OR TREASURY MANAGEMENT ADVISOR OR CLIENT CARE AT 888-995-2265.

Analyzed Business Checking

Account number	XXXXXX0520	Beginning balance	$1,551.61
Low balance	$1,551.61	Total additions	.00
Average balance	$1,551.61	Total subtractions	.00
Avg collected balance	$1,551	Ending balance	$1,551.61

**** No activity this statement period ****

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	$0.00	$0.00
Total Returned Item Fees	$0.00	$0.00

Thank you for banking with Western Alliance Bank

Hanmi Bank
3660 Wilshire Blvd Ste PH-A
Los Angeles, CA 90010

Statement Ending 01/31/2024

BEVERLY COMMUNITY HOSPITAL

Customer Number: XXXXXXXX5095

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DEBTOR-IN-POSSESSION
CASE # 2 23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Managing Your Accounts

Branch Name	Headquarters
Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
Call Center (9AM-6PM, M-F)	(855) 773-8778
Online Banking	www.Hanmi.com
Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX5095	$1,605,707.99

Business Checking - Analysis-XXXXXXXX5095

Account Summary

Date	Description	Amount
12/30/2023	**Beginning Balance**	**$1,725,120.07**
	0 Credit(s) This Period	$0.00
	39 Debit(s) This Period	$119,412.08
01/31/2024	**Ending Balance**	**$1,605,707.99**

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
1842	01/02/2024	$247.24	18419	01/09/2024	$183.23	18433	01/22/2024	$49.60
18359*	01/23/2024	$1,501.61	18420	01/17/2024	$64.43	18434	01/24/2024	$9,473.23
18384*	01/05/2024	$15.08	18421	01/18/2024	$49.60	18435	01/26/2024	$818.07
18401*	01/02/2024	$54,523.04	18422	01/18/2024	$39.80	18436	01/23/2024	$24.80
18408*	01/02/2024	$55.60	18423	01/25/2024	$49.60	18437	01/24/2024	$252.94
18409	01/03/2024	$16,298.80	18424	01/30/2024	$481.46	18438	01/22/2024	$146.21
18411*	01/05/2024	$17.67	18425	01/16/2024	$123.26	18440*	01/30/2024	$118.20
18413*	01/04/2024	$18,193.71	18426	01/17/2024	$145.51	18441	01/24/2024	$89.96
18414	01/03/2024	$128.85	18427	01/17/2024	$98.53	18442	01/30/2024	$65.26
18415	01/08/2024	$875.23	18428	01/16/2024	$135.28	18443	01/31/2024	$416.02
18416	01/09/2024	$28.00	18429	01/19/2024	$383.55	18444	01/30/2024	$37.20
18417	01/10/2024	$159.96	18430	01/17/2024	$2,709.68	18445	01/30/2024	$1,137.13
18418	01/10/2024	$49.60	18432*	01/25/2024	$9,902.56	18446	01/30/2024	$322.58

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
01/02/2024	$1,670,294.19	01/10/2024	$1,634,344.06	01/23/2024	$1,628,872.20
01/03/2024	$1,653,866.54	01/16/2024	$1,634,085.52	01/24/2024	$1,619,056.07
01/04/2024	$1,635,672.83	01/17/2024	$1,631,067.37	01/25/2024	$1,609,103.91
01/05/2024	$1,635,640.08	01/18/2024	$1,630,977.97	01/26/2024	$1,608,285.84
01/08/2024	$1,634,764.85	01/19/2024	$1,630,594.42	01/30/2024	$1,606,124.01
01/09/2024	$1,634,553.62	01/22/2024	$1,630,398.61	01/31/2024	$1,605,707.99

FDIC

PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is 1875 Century Park East, Suite 1900, Los Angeles, CA 90067.

A true and correct copy of the foregoing document entitled (*specify*): MONTHLY OPERATING REPORT will be served or was served **(a)** on the judge in chambers in the form and manner required by LBR 5005-2(d); and **(b)** in the manner stated below:

1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On (*date*) March 11, 2024 I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below:

Megan M Adeyemo on behalf of Creditor Aya Healthcare, Inc.
madeyemo@grsm.com, asoto@grsm.com

David E Ahdoot on behalf of Creditor United Nurses Associations of California/Union of Health Care Professionals
dahdoot@bushgottlieb.com, kprestegard@bushgottlieb.com

David E Ahdoot on behalf of Interested Party Courtesy NEF
dahdoot@bushgottlieb.com, kprestegard@bushgottlieb.com

Joseph M Ammar on behalf of Creditor Stryker Corporation
ammar@millercanfield.com

Scott E Blakeley on behalf of Creditor Baxter Healthcare Corporation
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Joseph P Buchman on behalf of Creditor Montebello Land and Water Company
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Adrian Butler on behalf of Interested Party Courtesy NEF
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Augustus Curtis on behalf of Creditor United States of America, on behalf of HHS and CMS
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Howard M Ehrenberg (TR)
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David K Eldan on behalf of Interested Party Attorney General of California
David.Eldan@doj.ca.gov

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Amanda N Ferns on behalf of Interested Party Courtesy NEF
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Faisal Gill on behalf of Other Professional Cal-Med Health Center
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Brian T Harvey on behalf of Creditor T.R.L. Systems Incorporated
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Stella A Havkin on behalf of Creditor Lung Chung M.D.
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Kevin Walsh on behalf of Defendant U.S. Bank, National Association
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Roye Zur on behalf of Interested Party Courtesy NEF
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☐ Service information continued on attached page.

2. SERVED BY UNITED STATES MAIL:
On (*date*) _____, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed.

☐ Service information continued on attached page.

3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (state method for each person or entity served): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on (*date*) _____, I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed.

☐ Service information continued on attached page.

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

March 11, 2024	Denise Walker	*/s/ Denise Walker*
Date	*Printed Name*	*Signature*