300 SOUTH GRAND AVENUE, 14TH FLOOR LOS ANGELES, CALIFORNIA 90071-3124 (213) 688-1000

I.

GENERAL GLOBAL NOTES AND STATEMENT OF LIMITATIONS, IETHODOLOGY AND DISCLAIMERS REGARDING THE DEBTORS' SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS

On August 31, 2018 (the "Petition Date"), Verity Health System Of California, Inc. ("VHS") and the above-referenced affiliated debtors (collectively, the "Debtors"), the debtors and debtors in possession in the above-captioned chapter 11 bankruptcy cases (collectively, the "Cases"), each filed a voluntary case under chapter 11 of title 11, United States Code (the "Bankruptcy Code"). The Debtors continue to operate their businesses and manage their properties as debtors and debtors in possession, pursuant to §§ 1107(a) and 1108 of the Bankruptcy Code. The Debtors' Cases are being jointly administered under lead case number 18-20151-ER in the United States Bankruptcy Court for the Central District of California, Los Angeles Division (the "Bankruptcy Court").

The Schedules of Assets and Liabilities and Statements of Financial Affairs (the "Schedules and SOFAs") filed by the Debtors in the Bankruptcy Court were prepared pursuant to § 521 of the Bankruptcy Code and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules") by management of the Debtors with unaudited information available as of the Petition Date. The Schedules and SOFAs do not purport to represent financial statements prepared in accordance with generally accepted accounting principles in the United States ("GAAP") and they are not intended to be fully reconciled to the Debtors' financial statements.

The Schedules and SOFAs have been signed by an authorized representative of each of the Debtors. In reviewing and signing the Schedules and SOFAs, these representatives relied upon the efforts, statements and representations of the Debtors' other personnel and professionals. These authorized representatives have not (and could not have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors and their addresses.

These General Global Notes and Statement of Limitations, Methodology and Disclaimer Regarding Debtors' Schedules and SOFAs (the "General Notes") are incorporated by reference in,

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and comprise an integral part of, each of the Debtors' Schedules and SOFAs, and should be referred to and reviewed in connection with any review of the Schedules and SOFAs.

II.

GENERAL NOTES

- 1. Reservation of Rights. The Debtors' chapter 11 cases are large and complex. Although management of the Debtors have made every reasonable effort to ensure that the Schedules and SOFAs are as accurate and complete as possible, based on the information that was available to them at the time of preparation, subsequent information or discovery may result in material changes to these Schedules and SOFAs, and inadvertent errors or omissions may have occurred. Because the Schedules and SOFAs contain unaudited information, which is subject to further review, verification, and potential adjustment, these Schedules and SOFAs may be inaccurate and/or incomplete.
- 2. No Waiver. Nothing contained in the Schedules and SOFAs or these General Notes shall constitute an admission or a waiver of any of the Debtors' rights to assert any claims or defenses. For the avoidance of doubt, listing a claim on Schedule D as "secured," on Schedule E/F as "priority," on Schedule E/F as "unsecured nonpriority," or listing a contract or lease on Schedule G as "executory" or "unexpired," does not constitute an admission by the Debtors of the legal rights of the claimant, or a waiver of the Debtors' right to recharacterize or reclassify such claim or contract. Failure to designate a claim on a given Debtor's Schedules as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtor that such amount is not "disputed," "contingent" or "unliquidated."
- **Reporting Date.** All asset and liability information, except where otherwise noted, 3. is provided as of the Petition Date.
- 4. Confidentiality. Specific disclosure of certain claims, names, addresses or amounts may be subject to certain disclosure restrictions contained in the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), or otherwise, and in any event, are of a particularly personal and private nature. To the extent the Debtors believe a claim, name, address or amount falls under the purview of HIPAA or includes information that is personal or private in nature,

SOFAs.

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5. Estimates and Assumptions. The preparation of the Schedules and SOFAs required the Debtors to make estimates and assumptions that affected the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities and the reported amounts of

such claims, name, address or amount (as applicable) is not included in these Schedules and

revenue and expense. Actual results could differ materially from these estimates.

- 6. Asset Presentation and Valuation. The Debtors do not have current market valuations for all of their assets. It would be prohibitively expensive, unduly burdensome and an inefficient use of estate assets, for the Debtors to obtain current market valuations for all of their assets. Wherever possible, unless otherwise indicated, net book values and fair market value as of the Petition Date are presented. When necessary, the Debtors have indicated that the value of certain assets is "Unknown" or "Undetermined." Amounts ultimately realized may vary from whatever value was ascribed and such variance may be material. Accordingly, the Debtors reserve all of their rights to amend, supplement, or adjust the value of each asset set forth herein.
- 7. Liabilities. Certain of the liabilities are scheduled unknown, contingent and/or unliquidated at this time. Accordingly, the Schedules and the SOFAs do not accurately reflect the aggregate amount of the Debtors' total liabilities.
- 8. Accounts Payable and Disbursements System. The financial affairs and business of the Debtors are complex. The Debtors use a centralized cash management system to (a) collect and transfer funds from numerous sources and accounts, (b) disburse funds to satisfy obligations arising from the daily operation of their business, (c) invest funds pursuant to the Debtors' investment guidelines, and (d) make payments on behalf of each other and their nondebtor subsidiaries and affiliates through cash accounts in the cash management system. Generally, these payments will result in an intercompany balance on the Debtors' books and records.
- 9. Intercompany Transactions. Prior to the Petition Date (and subsequent to the Petition Date pursuant to Bankruptcy Court approval), the Debtors routinely engaged (and continue to engage) in intercompany transactions with both Debtor and nondebtor subsidiaries and affiliates. The respective intercompany accounts payable and receivable as of the Petition Date, if

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any, are reflected in the respective Debtor entities' Schedules and SOFAs, as discussed in Note 7. The Debtors each reserve all rights with respect to claims against and debts owed to other Debtors.

- **10.** Recharacterization. The Debtors have made reasonable efforts to characterize, classify, categorize or designate the claims, assets, executory contracts, unexpired leases and other items reported in the Schedules and SOFAs correctly. Due to the complexity and size of the Debtors' business, however, the Debtors may have improperly characterized, classified, categorized or designated certain items. Further, the designation of a category is not meant to be wholly inclusive or descriptive of the rights or obligations represented by such item.
- 11. Claim Description. Any failure to designate a claim on the Debtors' Schedules and SOFAs as "contingent," "unliquidated" or "disputed" does not constitute an admission by the Debtors that such claim is not "contingent," "unliquidated" or "disputed." The Debtors reserve all of their rights to dispute, or to assert offsets or defenses to, any claim reflected on the Schedules and SOFAs as to amount, liability, priority, secured or unsecured status, classification or any other grounds or to otherwise subsequently designate any claim as "contingent," "unliquidated" or "disputed." The Debtors reserve all of their rights to amend their Schedules and SOFAs as necessary and appropriate, including, but not limited to, with respect to claim description and designation.
- **12.** Undetermined or Unknown Amounts. The description of an amount as "Undetermined" or "Unknown" is not intended to reflect upon the materiality of such amount. Certain amounts may be clarified over the period of the bankruptcy proceedings and certain amounts may depend on contractual obligations to be assumed or rejected as part of a sale in a bankruptcy proceeding under § 363 of the Bankruptcy Code.
- 13. Bankruptcy Court First-Day Orders. The Bankruptcy Court has entered certain orders (the "Orders") authorizing the Debtors to pay various outstanding prepetition claims, including, but not limited to, payments relating to employee compensation, benefits, and reimbursable business expenses and critical vendors. In general, claims paid pursuant to the Orders are not reflected in the Schedules and SOFAs.

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- 14. <u>Contingent Assets and Causes of Action.</u> Despite their reasonable efforts to identify all known assets, the Debtors may not have listed all of their causes of action or potential causes of action against third parties as assets in their Schedules and SOFAs, including, but not limited to, avoidance actions arising under chapter 5 of the Bankruptcy Code and actions under other relevant non-bankruptcy laws to recover assets. The Debtors reserve all of their rights with respect to any claims, causes of action, or avoidance actions they may have, and neither these General Notes nor the Schedules and SOFAs shall be deemed a waiver of any such claims, causes of actions, or avoidance actions or in any way prejudice or impair the assertion of such claims.
- donations and grants, testamentary or otherwise, which were provided subject to restrictions (contractual or otherwise) on the use of such funds. These funds may not be property of the Debtors' estates, and, as a consequence, the Debtors have not listed any of the donors or grantors that may have an interest in these funds as creditors of their estates in the Schedules and Statements.

In the ordinary course of operating its skilled nursing facility, Seton Coastside (operating under the same license as Debtor Seton Medical Center) offers certain long-term patients the ability to fund patient trust accounts to have convenient access to funds they can use while in residence. The funds in the patient trust accounts are not property of the Debtors' estates. Accordingly, the Debtors have not listed the long-term care patients that may have an interest in the patient trust accounts as creditors in the Schedules and SOFAs.

16. <u>Unknown Addresses</u>. The Debtors have made and continue to make their best efforts to collect all addresses for all parties in interest; not all addresses for parties on these Schedules and SOFAs have been obtained. The Debtors continue to pursue complete notice information and will provide updated information as reasonable practicable.

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III.

SCHEDULES AND SOFAs

17. Assumptions Used to Prepare Specific Schedules or SOFA Questions:

- <u>SOFA Question #1</u>. Gross revenues for hospital foundation Debtors (O'Connor Hospital Foundation, Saint Louise Regional Hospital Foundation, St. Francis Medical Center of Lynwood Foundation, St. Vincent Foundation, and Seton Medical Center Foundation (each, a "<u>Foundation Debtor</u>")) exclude donor-restricted contributions received by such Debtors. Donor-restricted contributions are recorded as temporarily or permanently restricted net assets at each Foundation Debtor and are recorded as gross revenues (contribution revenues) by the respective Debtor hospital affiliate in the period that such amounts are released from restriction and contributed to such hospital affiliate. Please refer to SOFA Question #9 for a listing of contributions made by each Foundation Debtor to its respective hospital affiliate in the two years preceding the Petition Date.
- <u>SOFA Question #2</u>. Interest income includes interest earned on loans, investment securities, escrow balances, and other interest-earning assets.
- <u>SOFA Question #3</u>. Debtor St. Francis Medical Center and Debtor St. Vincent Medical Center have entered into contracts with health plans where the hospital assumes the risk for all hospital services to a defined patient population, whether those hospital services are rendered at St. Francis Medical Center, St. Vincent Medical Center, an "out of network" hospital or other healthcare provider. Third-party management companies administer those payments through a risk pool account. The risk pool account is funded by the applicable Debtor hospital. SOFA #3 sets forth the aggregate amount Debtor St. Francis Medical Center and Debtor St. Vincent Medical Center have paid into such risk pool accounts, which are identified as "Risk Pool Claims." The amounts the individual "out of network" hospitals or healthcare providers were paid are not listed, as those records are maintained by the applicable third party management company.
- <u>SOFA Question #4</u>. Each Debtor has included all known payroll distributions and travel and entertainment expense reimbursement made over the twelve months preceding the filing to any individual the Debtors have determined to be an Insider. To the extent that the Debtors have determined that former officers do not qualify as Insiders as defined above, such benefits and payments are not included in the Schedules and SOFAs. The listing of a party as an "Insider," however, is not intended to be, nor shall be, construed as a legal characterization or determination of such party as an actual insider and does not act as an admission of any fact, claim, right or defense, and all such rights, claims, and defenses are hereby expressly reserved.

Intercompany transfers between Debtors are not reflected in SOFA #4.

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- <u>SOFA Question #11</u>. All payments related to bankruptcy were made by Debtor VHS on behalf of itself and its Debtor affiliates and are reflected in VHS's response.
- <u>SOFA Question #14</u>. Addresses for ancillary facilities, such as storage facilities and clinics are not included in this response.
- <u>SOFA Question #21</u>. As generally discussed above in General Note #14 and SOFA #1, each Foundation Debtor receives certain donor-restricted contributions. Each Foundation Debtor holds these contributions in trust, and, thus, have indicated the same in SOFA #21. These funds may not be property of the Debtors' estates. Consequently, the Debtors have not listed any of the donors or grantors that may have an interest in these funds in SOFA #21.

Seton Coastside (operating under the same license as Debtor Seton Medical Center) has two patient trust accounts. The patients' names and information are not being disclosed because of the confidentiality concerns explained in Global Note #3.

- <u>SOFA Question #26(d)</u>. As many of the Debtors are nonprofit organizations and tax exempt as described in 26 U.S.C. § 501, the Debtors' financial statements and Forms 990 as filed with the Internal Revenue Service are available online at www.Guidestar.org. Consequently, the Debtors do not have records of the parties who requested or obtained copies of their financial statements. These reports were also provided to various counterparties of the Debtors as required under various contractual arrangements (e.g., lenders under certain of the Debtors' debt arrangements) and are publicly reported at https://emma.msrb.org.
- <u>Schedule A/B, Part 1</u>. Cash accounts are presented at book value, unless otherwise noted.
- <u>Schedule A/B #25</u>. The Debtors' § 503(b)(9) of the Bankruptcy Code reconciliation process is still in progress. Accordingly, no responses are provided to this question for any Debtor.
- <u>Schedule A/B #55</u>. Where available, the Debtors listed the "Current value of debtor's interest" using that available in the most recent appraisal or broker opinion of value.
- <u>Schedule A/B #74</u>. In the ordinary course of business, the Debtors routinely request reversals of, or changes to, various Medicare and Medi-Cal policies that impact payment, such as hospital "disproportionate share" payment calculations. These so-called "appeals" may be made by individual Debtor hospitals alone or, more likely, as part of a national group of hospitals. If successful, the Debtors may realize additional revenue but outcomes related to such appeals are speculative.
- <u>Schedule A/B #77</u>. Included in the response to #77 are "Construction in Progress" assets. Construction in progress assets represent costs associated with ongoing

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capital projects that have not yet been completed and placed into service. These projects are primarily associated with in progress software development and implementation-related costs, building improvements, and other costs incurred prior to medical equipment being placed into service.

- Schedule D. Except as otherwise agreed pursuant to a stipulation or agreed order or general order entered by the Bankruptcy Court, the Debtors reserve their rights to dispute or challenge validity, perfection or immunity from avoidance of any lien purported to be granted or perfected in any specific asset to a secured creditor listed Moreover, although the Debtors may have on Schedule D of any Debtor. scheduled claims of various creditors as secured claims, the Debtors reserve all rights to dispute or challenge the secured nature of any such creditor's claim or the characterization of the structure of any such transaction or any document or instrument (including, without limitation, any intercompany agreement) related to such creditor's claim. In certain instances, a Debtor may be a co-obligor, comortgagor or guarantor with respect to scheduled claims of other Debtors, and no claim set forth on Schedule D of any Debtor is intended to acknowledge claims of creditors that are otherwise satisfied or discharged by other entities. descriptions provided in Schedule D are intended only as a summary. Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent and priority of any liens. Nothing in the General Notes or the Schedules and SOFAs shall be deemed a modification or interpretation of the terms of such agreements.
- <u>Schedule E/F</u>. Pursuant to orders of the Bankruptcy Court, the Debtors were permitted to pay certain prepetition wages and salaries and to honor and pay employee benefits and other workforce obligations. The Debtors made the aforementioned payments, and, thus, the respective employee claims are not listed in Schedule E.

The Debtors scheduled only claims and executory contracts for which the Debtors may be contractually and/or directly liable. No claims have been scheduled for which a Debtor may have benefited indirectly from a contractual relationship to which a Debtor was not a named party.

The Debtors have used their best efforts to report all general unsecured claims against each Debtor on Schedule F based upon the Debtors' existing books and records. The following is a non-exhaustive list of items which were among those included in the population disclosed for this schedule: unsecured debt outstanding, accounts payable outstanding, travel and entertainment expenses, bonuses earned but yet not paid to employees, lease obligations, litigation, guarantees and vendors with whom we have executory contracts under which amounts may be due. Schedule F does not include certain deferred liabilities, accruals or general reserves. Such amounts are, however, reflected on the Debtors' books and records as required in accordance with GAAP. Such accruals are general estimates of liabilities and do not represent specific claims as of the Petition Date.

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To the extent any amounts in respect of prepetition claims have been paid through the date hereof pursuant to Orders of the Bankruptcy Court, such amount have been excluded. No claim set forth on Schedule E/F of any Debtor is intended to acknowledge claims of claimholders that are or may be otherwise satisfied or discharged.

Patient Refund Claims: In accordance with patient information confidentiality restrictions, see Note #3 above, each Debtor has aggregated all patient refund claims in a single response. Detail is available upon request, provided such request may be complied with in a manner compliant with all applicable patient privacy laws and regulations.

Insurance Refund Claims: As part of the Debtors' normal business operations, insurance companies from time to time overpay amounts due to the Debtors. Only the estimated amount of such overpayments are recorded in the Debtors' accounting records because determination of the exact amount of such overpayments is a time consuming manual process. The Debtors only calculate the exact amount of the insurance company overpayments if and when the payer requests a refund.

SEIU Employees: The Service Employees International Union Collective Bargaining Agreement (the "SEIU CBA") provides for a full time employment commitment for certain member nurses. This commitment resets every six months. As of the Petition Date, the Debtors party to the SEIU CBA have potential liability in respect of the full time employment commitment for July and August 2018. The amount of this liability is not calculated until December 2018 and, as such, claims in respect of July and August 2018 are contingent and unliquidated as of the Petition Date.

Schedule G. The businesses of the Debtors are complex. While the Debtors' existing records and information systems have been relied upon to identify and schedule executory contracts at each of the Debtors and every effort has been made to ensure the accuracy of the Schedule of Executory Contracts and Unexpired Leases, inadvertent errors or omissions may have occurred. The Debtors hereby reserve all of their rights to dispute the validity, status, or enforceability of any contracts, agreements or leases set forth in Schedule G and to amend or supplement such Schedule as necessary. The contracts, agreements and leases listed on Schedule G may have expired or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters, conduct/course of business, memoranda and other documents, instruments and agreements which may not be listed therein. Certain of the real property leases listed on Schedule G may contain renewal options, guarantees of payments, options to purchase, rights of first refusal, rights to lease additional space and other miscellaneous rights. Such rights, powers, duties and obligations are not set forth on Schedule G. Certain of the agreements listed on Schedule G may be in the nature of conditional sales agreements or secured financings. The presence of a contract or agreement on Schedule G does not

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constitute an admission that such contract or agreement is an executory contract or unexpired lease. The Debtors reserve all of their rights, claims and causes of action with respect to the contracts and agreements listed on the Schedule, including the rights to dispute or challenge the characterization or the structure of any transaction document or instrument. Certain executory agreements may not have been memorialized and could be subject to dispute. Generally, executory agreements that are oral in nature have not been included in the Schedule.

Schedule H. In the ordinary course of their business, the Debtors may be involved in pending or threatened litigation and claims. These matters may involve multiple plaintiffs and defendants, some or all of whom may assert cross-claims and counterclaims against other parties. Because all such claims are "contingent," "unliquidated" or "disputed", such claims have not been set forth individually on Schedule H. The Debtors may not have identified certain Guarantees that are embedded in the Debtors' executory contracts, unexpired leases, secured financings, debt instruments and other such agreements. The Debtors reserve their rights to amend the Schedules to the extent that additional Guarantees are identified or such Guarantees are discovered to have expired or unenforceable.

IV.

CONCLUSION

18. Limitation of Liability. The Debtors and their officers, employees, agents, attorneys, and financial advisors do not guarantee or warrant the accuracy, completeness, or currentness of the data that is provided herein and shall not be liable for any loss or injury arising out of or caused, in whole or in part, by the acts, errors, or omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating, or delivering the information contained herein. The Debtors and their officers, employees, agents, attorneys, and financial advisors expressly do not undertake any obligation to update, modify, revise, or re-categorize the information provided herein or to notify any third party should the information be updated, modified, revised or recategorized. In no event shall the Debtors or their officers, employees, agents, attorneys, and financial advisors be liable to any third party for any direct, indirect, incidental, consequential, or special damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtors or damages to business reputation, lost business, or lost profits), whether foreseeable or not and however caused.

	Case	2:18-bk-20151-ER	Doc 513 Filed 10/15/1 Main Document Pag	.8 Entered 10/15/18 16:07:25 De ge 12 of 139	SC
	1 2	Dated: October 15, 20	018	DENTONS US LLP SAMUEL R. MAIZEL TANIA M. MOYRON	
	3				
	4			By /s/Tania M. Moyron Tania M. Moyron	_
	5			Proposed Attorneys for the Chapter 1 and Debtors In Possession	1 Debtors
	6 7			and Debtors In Possession	
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Fill in this information to identify the case:	
Debtor Name: In re: Verity Health System of California, Inc.	
United States Bankruptcy Court for the: Central District of California	☐ Check if this is an
Case number (if known): 18-20151 (EMR)	amended filing
Official Form 206Sum	
Summary of Assets and Liabilities for Non-Individuals	12/15
Part 1: Summary of Assets	
Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)	
1a. Real property:	
Copy line 88 from Schedule A/B	\$
1b. Total personal property:	
Copy line 91A from Schedule A/B	\$ 597,741,862.11
1c. Total of all property:	
Copy line 92 from Schedule A/B	\$ 597,741,862.11
Part 2: Summary of Liabilities	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$ 461,593,868.65
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of Schedule E/F	\$959,007.83
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+\$218,104,803.95
4. Total liabilities	

Lines 2 + 3a + 3b

680,657,680.43

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Fill in this information to identify the case:	1	
Debtor Name: In re: Verity Health System of California, Inc.	I	
United States Bankruptcy Court for the: Central District of California		
Case number (if known): 18-20151 (EMR)	I	_

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

art 1F Cash and cash equiva	lents			
1. Does the debtor have any cash or	cash equivalents?			
☐ No. Go to Part 2.				
✓ Yes. Fill in the information below				
All cash or cash equivalents ow	ned or controlled by the debto	r	Current va	alue of debtor's interest
2. Cash on hand				
2.1 <u>None</u>			\$	
3. Checking, savings, money market	, or financial brokerage accounts	s (Identify all)		
Name of institution (bank or brokerage	irm) Type of account	Last 4 digits of account number		
3.1 See Schedule A/B 3 Attac	chment		 \$	31,954,980.24
4. Other cash equivalents (Identify a	J)			
4.1 Certificate of Deposit - Ba	nk of America		\$	125,000.00
5. Total of Part 1				
Add lines 2 through 4 (including am	ounts on anv additional sheets).	Copy the total to line 80.	\$	32,079,980.24

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 Doc 513
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 Verity Health System of California, Inc.
 Main Document
 Page 15 of 139 number (if known):
 18-20151

Debtor: Verity I

oar	t 2: Deposits and prepayments		
6.	Does the debtor have any deposits or prepayments?		
	□ No. Go to Part 3.		
	✓ Yes. Fill in the information below.		
		Curren	t value of debtor's interest
7.	Deposits, including security deposits and utility deposits		
	Description, including name of holder of deposit		
	7.1 See Schedule A/B 7 Attachment	\$	875,948.77
8.	Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent		
	Description, including name of holder of prepayment		
	8.1 See Schedule A/B 8 Attachment	\$	5,055,473.11
9.	Total of Part 2.		
	Add lines 7 through 8. Copy the total to line 81.	\$	5,931,421.88

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Name

Part 3: Accounts receival	ole
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10.	Doe	s the debtor have any	accounts receivable	≘?						
		No. Go to Part 4.								
	\checkmark	Yes. Fill in the informati	on below.							
									Current va interest	lue of debtor's
11.	Acc	ounts receivable								
			Description	face amount		doubtful or uncollectible acc	ounts			
	11a.	90 days old or less:	See Schedule A/B 11a Attachment	\$	30,461,608.23	- \$	0.00	= →	\$	30,461,608.23
	11b.	Over 90 days old:	See Schedule A/B 11b Attachment	\$	490,088,741.00	-\$	0.00	= →	\$	490,088,741.00
12.	Tota	al of Part 3.								
	Curi	rent value on lines 11a -	+ 11b = line 12. Copy	the total to lin	ie 82.				\$	520,550,349.23

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Verity Health System of California, Inc.

Main Document Page 17 of 139 number (if known):

18-20151

Name

17. Total of Part 4.

Add lines 14 through 16. Copy the total to line 83.

Part 4: **Investments** 13. Does the debtor own any investments? □ No. Go to Part 5. ✓ Yes. Fill in the information below. Valuation method used Current value of debtor's interest for current value 14. Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock: 14.1 None 15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture Name of entity: % of ownership: 8,470,171.00 15.1 See Schedule A/B 15 Attachment Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1 Describe: 16.1 None

8,470,171.00

Desc

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Part 5:

Inventory, excluding agriculture assets

18.	Does the dector own any inventory (excluding agriculture assets)? ☑ No. Go to Part 6. ☐ Yes. Fill in the information below.							
	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest			
19.	Raw materials		\$		\$			
20.	Work in progress		\$\$		\$			
21.	Finished goods, including goods held for re-	sale	\$\$		\$			
22.	Other inventory or supplies		_ \$. \$			
23.	Total of Part 5. Add lines 19 through 22. Copy the total to line 8	34.			\$			
24.	Is any of the property listed in Part 5 perisha ☐ No ☐ Yes	ble?						
25.	Has any of the property listed in Part 5 been	purchased within 20 (days before the bankruptcy was	s filed?				
	□ No □ Yes. Description Book value	ue\$	Valuation method	Current value	\$			
26.	Has any of the property listed in Part 5 been □ No □ Yes	appraised by a profe	ssional within the last year?					

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4.0	Familian and Californ valated accords	(-4141414144
rt 6:	rarming and fishing-related assets ((other than titled motor vehicles and land)

27.	Does the debtor own or lease any farming and fishing-related	assets (other than titled motor	vehicles and land)?	
	☑ No. Go to Part 7.			
	☐ Yes. Fill in the information below.			
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28.	Crops—either planted or harvested			
		\$		\$
29.	Farm animals Examples: Livestock, poultry, farm-raised fish	\$\$		\$\$
30.	Farm machinery and equipment (Other than titled motor vehicles		-	\$
31.	Farm and fishing supplies, chemicals, and feed	\$\$	-	\$
32.	Other farming and fishing-related property not already listed i	n Part 6 - \$		\$
33.	Total of Part 6. Add lines 28 through 32. Copy the total to line 85.			\$
34.	Is the debtor a member of an agricultural cooperative? ☐ No			
	☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes			
0.5	Has any of the property listed in Part 6 been purchased within	20 days hefers the hankrunter	, was filed?	
35.		20 days before the bankrupicy	was meu :	
	□ No □ Yes. Description Book value \$	Valuation method	I Curr	rent value \$
36.	Is a depreciation schedule available for any of the property lis □ No □ Yes	eted in Part 6?		
37.	Has any of the property listed in Part 6 been appraised by a pr □ No □ Yes	ofessional within the last year?	•	

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Part 7: Office furniture, fixtures, and equipment; and collectibles

38.	Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?							
	□ No. Go to Part 8.							
	$oxed{arphi}$ Yes. Fill in the information below.							
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest				
39.	Office furniture							
	39.1 Office Furniture	\$1,696.70	Net Book Value	\$\$,				
40.	Office fixtures							
	40.1 Office Fixtures	\$0.00	Net Book Value	\$\$				
41.	Office equipment, including all computer equipment and communication systems equipment and software							
	41.1 Office Equipment	\$ 645,599.00	Net Book Value	\$ 645,599.00				
42.	Collectibles <i>Examples:</i> Antiques and figurines; paintings,prints books, pictures, or other art objects; china and crystal; stamp, c card collections; other collections, memorabilia, or collectibles							
	42.1 Artwork	\$0.00	Net Book Value	\$ 0.00				
40	T. I. (B. (T		Г					
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$647,295.70_				
44.	Is a depreciation schedule available for any of the property	listed in Part 7?	_					
	□ No							
	✓ Yes							
45.	Has any of the property listed in Part 7 been appraised by a	a professional within the last y	/ear?					
	☑ No							
	□ Yes							

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Part 8:	Machinery,	equipment,	and vehicles

46.	Does the debtor own or lease any machinery, equipment, o	or vehicles?		
	□ No. Go to Part 9.			
	☑ Yes. Fill in the information below.			
	General description	Net book value of debtor's interest	Valuation method used	Current value of debtor's interest
	Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	(Where available)	for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled	farm vehicles		
	47.1 None	\$		\$
48.	Watercraft, trailers, motors, and related accessories Examp floating homes, personal watercraft, and fishing vessels 48.1 None	les: Boats, trailers, motors,		\$
49.	Aircraft and accessories			
	49.1 None	\$		5
50.	Other machinery, fixtures, and equipment (excluding farm i	machinery and equipment)		
	50.1 Medical Equipment	0.00	Net Book Value	0.00
51.	Total of Part 8.			
	Add lines 47 through 50. Copy the total to line 87.		9	0.00
52.	Is a depreciation schedule available for any of the property	listed in Part 8?		
	☑ No			
	Yes			
53.	Has any of the property listed in Part 8 been appraised by a	a professional within the last	year?	
	☑ No			
	☐ Yes			

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Part 9: Real pr	opertv
-----------------	--------

54. Does the debtor own or lease any real property?

	☐ No. Go	to Part 10.							
	✓ Yes. Fi	Il in the information below.							
55.	Any buildir								
	Include stree	et address or other description such as arcel Number (APN), and type of property (for ereage, factory, warehouse, apartment or office available.	debtor's interest in		Valuation method used for current value	Current value of debtor's interest			
	55.1	Office - 2222 Oceanview, Los Angeles, CA 90057	Lease	\$	0.00		\$	Unknown	
	55.2	Office - 1500 Southgate, Daly City, CA 94015	Lease	\$	0.00		\$_	Unknown	
	55.3	Office - 455 O'Connor, San Jose, CA 95128	Lease	\$	0.00		\$	Unknown	
	55.4	Office - 2200 W 3rd St., Los Angeles, CA 90057	Lease	\$	0.00		\$	Unknown	
	66. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88. \$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								
57.	Is a deprec	iation schedule available for any of the prope	erty listed in Part 9?`			_			
	☑ No								
	□ Yes								
58.	Has any of	the property listed in Part 9 been appraised b	oy a professional withi	n th	ne last year?				
	☑ No								
	□ Yes								

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Part 10:	Intangibles	and intellectua	I property

59.	 □ No. Go to Part 11. ☑ Yes. Fill in the information below. 	property:		
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
	60.1 None	\$		\$
61.	Internet domain names and websites			
	61.1 See Schedule A/B 61 Attachment	\$ Unknown		\$ Unknown
62.	Licenses, franchises, and royalties			
	62.1 None	\$		\$
00	Out and the second seco			
63.	Customer lists, mailing lists, or other compilations 63.1 None	\$		\$
	OS.1 NOTE	Ψ		Ψ
64.	Other intangibles, or intellectual property			
	64.1 None	\$		\$
65.	Goodwill			
	65.1 None	\$		\$
66.	Total of Part 10.			
	Add lines 60 through 65. Copy the total to line 89.			\$0.00
			L	
67.	Do your lists or records include personally identifiable information.	ion of customers (as defined in	11 U.S.C. §§ 101(41A) an	d 107) ?
	□ No ☑ Yes			
60	Is there an amortization or other similar schedule available for a	ny of the property listed in Par	102	
υο.	Is there an amortization or other similar schedule available for a ✓ No	my of the property listed in Par	LIUf	
	□ Yes			
69.	Has any of the property listed in Part 10 been appraised by a pro	ofessional within the last year?		
	☑ No	•		
	□ Yes			

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Part 11:	All oth	ier assets

70.	Does the de Include all in	ebtor own any other assets that have terests in executory contracts and une	e not yet been reported o xpired leases not previous	n this form? ly reported on this	form.		
	□ No. Go	to Part 12.					
	✓ Yes. Fill	in the information below.					
							Current value of debtor's interest
71.	Notes rece	ivable					
	Description (include name of obligor)	Total face amount	doubtful or unc	ollectible accounts		
	71.1	None	\$	- \$		= →	\$
72.	Tax refunds	s and unused net operating losses (NOLs)				
	Description	(for example, federal, state, local)	_				
	72.1	Federal NOL per 990-T Filing (Unrela	ted Business Income)	Tax year Fi	scal Year 2017 (6/3	30/17)	\$ 757,657.00
73.	Interests in	insurance policies or annuities					
	73.1	None					\$
74.	has been f	None	r or not a lawsuit				\$
		Nature of claim					
		Amount requested	\$				
75.	every natur	None	auses of action of ebtor and rights to				\$
		Nature of claim			_		
		Amount requested	\$		_		
					_		
76.		itable or future interests in property None	,				\$
	70.1	TTOTO					
	Other prope	erty of any kind not already listed Emembership	xamples: Season tickets,				
	77.1	Deferred Rent Asset			_		\$ 1,358,617.51
	77.2	Deferred Rent Asset			_		\$ 9,665.54
	77.3	Deferred System Implementation Cost	rs .		_		\$ 4,121,532.23
	77.4	Construction in Progress - See Global	Notes		_		\$ 23,815,171.78
78	Total of Pa	rt 11.					
10.		1 through 77. Copy the total to line 90.					\$ 30,062,644.06

Name

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

⊻ No

☐ Yes

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Part 12: **Summary**

Debtor:

In Part 12 copy all of the totals from the earlier parts of the form.

	Type of property	 ent value of onal property		Current value of real property	
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 32,079,980.24	_		
81.	Deposits and prepayments. Copy line 9, Part 2.	\$ 5,931,421.88	-		
82.	Accounts receivable. Copy line 12, Part 3.	\$ 520,550,349.23	_		
83.	Investments. Copy line 17, Part 4.	\$ 8,470,171.00	_		
84.	Inventory. Copy line 23, Part 5.	\$ 0.00	_		
85.	Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	-		
86.	Office furniture, fixtures, and equipment; and collectibles.	\$ 647,295.70	-		
	Copy line 43, Part 7.				
87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 0.00	_		
88.	Real property. Copy line 56, Part 9	 		\$0.0	00
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	_		
90.	All other assets. Copy line 78, Part 11.	\$ 30,062,644.06	_		
91.	Total. Add lines 80 through 90 for each column91a.	\$ 597,741,862.11	+ 91b.	\$0.0	00
92.	Total of all property on Schedule A/B. Lines 91a + 91b = 92	 			

Fill in this information to identify the case: Debtor Name: In re: Verity Health System of California, Inc. United States Bankruptcy Court for the: Central District of Califo Case number (if known): 18-20151 (EMR)	ornia		Check if this is an amended filing
Official Form 206D	ave Claims Sequeed by Bro	n o why	
Schedule D: Creditors Who Ha	ave Claims Secured by Pro	perty	12/15
Be as complete and accurate as possible. 1. Do any creditors have claims secured by debtor's pro ☐ No. Check this box and submit page 1 of this form to ☐ Yes. Fill in all of the information below. Part 1: List Creditors Who Have Secured Claims		thing else to report on	this form.
. List in alphabetical order all creditors who have secure secured claim, list the creditor separately for each claim.	ed claims. If a creditor has more than one	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1 Creditor's name ASD Specialty Healthcare Inc. Creditor's Name	Describe debtor's property that is subject to a lien Inventory and all personal property	\$Unknow	vn\$Unknown
Notice Name 3101 Gaylord Parkway Street	Describe the lien UCC-1 #167552156200 Is the creditor an insider or related party?		
Frisco TX 75034 City State ZIP Code	✓ No ☐ Yes		
Country Creditor's email address, if known Date debt was incurred 10/21/2016	Is anyone else liable on this claim? ☑ No ☐ Yes. Fill out Schedule H: Codebtors(Official Form	n 206H).	
Last 4 digits of account number Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply. ☑ Contingent ☑ Unliquidated ☑ Disputed		
 ✓ No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. ☐ Yes. The relative priority of creditors is specified on lines 			

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Column A

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Name

Debtor:

Part 1:

Additional Page

Column B the previous page. Amount of claim Value of collateral that Do not deduct the supports this claim value of collateral. 2.2 Creditor's name Describe debtor's property that is subject to a lien Cardinal Health 110 LLC, as Agent Unknown Unknown Supplies Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #187558796229 7700 Cardinal Place Street Is the creditor an insider or related party? ☑ No Dublin 43017 OH ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known $\overline{\mathbf{V}}$ Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 7/12/2018 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent $\sqrt{}$ Do multiple creditors have an interest in the Unliquidated $\overline{\mathbf{V}}$ same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Part 1: **Additional Page**

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Column A Amount of claim
Do not deduct the value of collateral.

2.3 Creditor's name		Describe debtor's property that is subject to a lien						
		•	California, Inc.	Inv	entory	\$	Unknown	\$ Unknown
Credit	tor's Name							
Cred	ditor's m	ailing addres	SS					
				De	scribe the lien			
Notice	e Name			UC	:C-1 #187658796229			
Med	ical Prod	ucts And Serv	vices			-		
Street	t			_				
P.O.	Box 100	316		ls t	the creditor an insider or related party?			
					No			
Pasa	adena	CA	91189		Yes			
City		State	ZIP Code	_				
Count	try			ls a	anyone else liable on this claim?			
Cred	ditor's e	nail address,	if known	\checkmark	No			
					Yes. Fill out Schedule H: Codebtors(Official Form	m 206H).		
Date	e debt w	as incurred	7/12/2018	-				
Last num		of account		Che	of the petition filing date, the claim is: eck all that apply.			
D			ra am intanaat in tha	\checkmark	Contingent			
	nuitipie e propei		e an interest in the	\checkmark	Unliquidated			
Juin	о р. оро.	٠,٠		$\overline{\checkmark}$	Disputed			
\checkmark	No							
		ave you alread priority?	dy specified the					
	 No. Specify each creditor, in creditor, and its relative prior 							
		s. The relative	priority of creditors is					

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Column A Amount of claim
Do not deduct the value of collateral.

2.4 Creditor's name				Des	scribe debtor's property that is subject to a lie	n		
Dell	Financial	Services, L.	L.C.	Ea	uipment	\$	Unknown	\$ Unknown
Creditor's Name								
Cred	ditor's ma	iling addre	ess					
				De	scribe the lien			
Notice	e Name			UC	C-1 #187664384411	_		
	stop-PS2	DF-23		_		_		
Street								
One	One Dell Way			_ Is t	the creditor an insider or related party?			
				\checkmark	No			
Rour	nd Rock	TX	78682		Yes			
City		State	ZIP Code					
Count	Country			ls a	anyone else liable on this claim?			
Cred	Creditor's email address, if known			\checkmark	No			
					Yes. Fill out Schedule H: Codebtors(Official For	m 206H).		
Date	e debt wa	s incurred	8/16/2018	_				
	Last 4 digits of account number			Che	of the petition filing date, the claim is: eck all that apply.			
	Do multiple creditors have an interest in the same property?			✓✓✓	Contingent Unliquidated Disputed			
\checkmark	No				Disputed			
	Yes. Ha relative		ady specified the					
			n creditor, including this relative priority.					
	☐ Yes.	The relative	e priority of creditors is	-				
				-				

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Part 1:

Additional Page

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Amount of claim
Do not deduct the value of collateral.

2.5 Creditor's name				Des	scribe debtor's property that is subject to a lie	n		
GE HFS, LLC				Ea	uipment	\$	Unknown	\$ Unknown
Creditor's Name								
Cred	ditor's m	ailing addres	ss					
				De	scribe the lien			
	e Name			UC	CC-1 #167559861280	_		
	Box 414,	W-490		_				
Stree	t							
				-	the creditor an insider or related party?			
NATI-		10/1	50004	_	No			
	aukee	WI	53201		Yes			
City		State	ZIP Code					
Coun	itry			ls a	anyone else liable on this claim?			
	Creditor's email address, if known			П	No			
				$\overline{\checkmark}$	Yes. Fill out Schedule H: Codebtors(Official For	m 206H).		
Date	e debt wa	as incurred	12/7/2006	_				
	Last 4 digits of account number		Che	of the petition filing date, the claim is: eck all that apply.				
	multiple le propei		re an interest in the	✓	Contingent Unliquidated			
V	No			V	Disputed			
	Yes. H	ave you alread priority?	dy specified the					
			creditor, including this elative priority.					
	☐ Yes	s. The relative	priority of creditors is	-				
				-				

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Column A

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Name

Debtor:

Additional Page Part 1:

> Column B the previous page. Amount of claim Value of collateral that Do not deduct the supports this claim value of collateral. 2.6 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien UCC-1 #167551304800 UCC-3 (Amend.) Notice Name #1675608030 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee WI 53201 ☐ Yes City ZIP Code State Is anyone else liable on this claim? Country Creditor's email address, if known □ No Yes. Fill out Schedule H: Codebtors(Official Form 206H). \checkmark Date debt was incurred 10/17/2016 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated $\sqrt{}$ same property? Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Column A

Amount of claim
Do not deduct the

value of collateral.

Column B

Value of collateral that supports this claim

Name

Part 1: **Additional Page**

the previous page.

Crec	ditor's na	me		Des	scribe debtor's property that is s	ubject to a lien		
GE H	HFS, LLC			Eq	uipment	\$	Unknown	\$ Unknowr
Credit	itor's Name							
Crec	ditor's ma	ailing addres	s					
				De	scribe the lien			
	e Name			UC	CC-1 #167554013280			
	Box 414, '	W-490		_				
Street	ı			1-	the eveliter on incider or related			
				_	the creditor an insider or related	party?		
				_ 🗹	No			
	aukee	WI	53201		Yes			
City		State	ZIP Code					
Count	itry			- Is	anyone else liable on this claim?			
	Creditor's email address, if known			П	No			
		····· ,		□	Yes. Fill out Schedule H: Codebt	ors(Official Form 206H).		
Date	e debt wa	s incurred	11/7/2016			,		
		of account			of the petition filing date, the cla	im is:		
num	nber				eck all that apply.			
Do n	multiple o	reditors hav	e an interest in the	\checkmark	Contingent			
	e proper			\checkmark	Unliquidated			
				\checkmark	Disputed			
\checkmark	No							
		eve you alread priority?	dy specified the					
	□ No. : cred	Specify each itor, and its re	creditor, including this lative priority.	;				
		. The relative cified on lines	priority of creditors is	=				

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Column B

Value of collateral that supports this claim

Column A

Amount of claim
Do not deduct the

value of collateral.

Name

the previous page.

Part 1: **Additional Page**

LLC Value Valu	53201 ZIP Code	Des UC	uipment scribe the lien C-1 #167556847988 the creditor an insider or related party	\$\$	Unknown	\$	Unknown
re WI	53201	UC Is t	C-1 #167556847988	/?			
ee <u>WI</u>	53201	UC Is t	C-1 #167556847988	/?			
414, W-490 ee <u>WI</u>		UC Is t	C-1 #167556847988	n?			
414, W-490 ee <u>WI</u>		_ _ Is t	the creditor an insider or related party	y?			
ee WI		_ _ _	, ,	1?			
<u> </u>		_ _ _	, ,	ı?			
<u> </u>		_ _ _	, ,				
<u> </u>		_					
State	ZIP Code		Yes				
			163				
		_ Is a	anyone else liable on this claim?				
Creditor's email address, if known			No				
		\checkmark	Yes. Fill out Schedule H: Codebtors(O	Official Form 206H).			
ot was incurred	11/17/2016	_					
igits of account			of the petition filing date, the claim is	:			
			eck all that apply.				
ple creditors have	ve an interest in the		· ·				
operty?		_	·				
		V	Disputed				
s. Have you alrea ative priority?	dy specified the						
		8					
		-					
•	s. Have you alreative priority? No. Specify each creditor, and its r	s. Have you already specified the ative priority? No. Specify each creditor, including this creditor, and its relative priority.	ple creditors have an interest in the operty? S. Have you already specified the ative priority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is	ple creditors have an interest in the perty? Contingent Unliquidated Disputed S. Have you already specified the ative priority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is	ple creditors have an interest in the operty? Contingent Unliquidated Disputed S. Have you already specified the ative priority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is	ple creditors have an interest in the perty? Contingent Unliquidated Disputed Light Disputed Contingent Unliquidated Disputed The periority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is	ple creditors have an interest in the perty? Contingent Unliquidated Disputed S. Have you already specified the ative priority? No. Specify each creditor, including this creditor, and its relative priority. Yes. The relative priority of creditors is

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Column A Amount of claim
Do not deduct the value of collateral.

2.9 Creditor's name					scribe debtor's property that is subject to a lie	n		
GE HFS, LLC					uipment	\$	Unknown	\$ Unknown
Creditor	r's Name							
Credit	tor's mailing	addres	s					
				De	scribe the lien			
Notice N	Name			UC	CC-1 #167561733807	_		
PO Bo	PO Box 414, W-490					_		
Street				_				
				ls t	the creditor an insider or related party?			
				$\overline{\mathbf{V}}$	No			
Milwa	ukee W	Ί	53201		Yes			
City	Sta	ate	ZIP Code					
Country	,			ls a	anyone else liable on this claim?			
	tor's email a	ddress	if known	П	No			
0.00				_		m 206H)		
				<u> </u>	Yes. Fill out Schedule H: Codebtors(Official For	III 200H).		
Date o	debt was inc	urred	12/16/2016					
	Last 4 digits of account number				of the petition filing date, the claim is: eck all that apply.			
				\checkmark	Contingent			
		ors hav	e an interest in the	abla	Unliquidated			
same	property?			_ ✓	Disputed			
	No			ت	2.op atou			
_ '								
	Yes. Have yo relative priori		dy specified the					
			creditor, including this lative priority.					
	Yes. The specified	relative on lines	priority of creditors is	-				

Name

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the previous page.

Part 1: Additional Page

Additional Page

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Column A

Column B

Column A

Amount of claim

Do not deduct the value of collateral.

10 Creditor's name	Describe debtor's property that is subject to a lie	า			
GE HFS, LLC	_Equipment	\$	Unknown	\$\$	Unknown
Creditor's Name					
Creditor's mailing address					
	Describe the lien				
Notice Name	UCC-1 #177573963614	_			
PO Box 414, W-490	_				
Street					
	Is the creditor an insider or related party?				
	_ ☑ No				
Milwaukee WI 53201	□ Yes				
City State ZIP Code					
Country	Is anyone else liable on this claim?				
Creditor's email address, if known	□ No				
	✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).			
Date debt was incurred 3/6/2017	_				
Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.				
Do multiple creditors have an interest in the	✓ Unliquidated				
same property?	✓ Disputed				
☑ No					
Yes. Have you already specified the relative priority?					
No. Specify each creditor, including this creditor, and its relative priority.	s				
Yes. The relative priority of creditors is specified on lines	_ 3				
	_				

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Column A

Amount of claim
Do not deduct the

Column B

Value of collateral that

Name

the previous page.

Part 1: **Additional Page**

2.

				value c	of collateral.	Сирр	
1 Cred	ditor's name		Describe debtor's property that is subject to a lie	1			
GE I	HFS, LLC		Equipment	\$	Unknown	\$	Unknown
Credi	itor's Name		Equipment	- '		- '	
Cred	ditor's mailing addre	SS					
	Ū		Describe the lien				
Notice	e Name		UCC-1 #177576173973	-			
PO E	Box 414, W-490			-			
Stree	t		_				
			Is the creditor an insider or related party?				
			☑ No				
Milw	aukee WI	53201	_ □ Yes				
City	State	ZIP Code					
Coun	trv		Is anyone else liable on this claim?				
	ditor's email address	if known	□ No				
0.00	ano. o oman ada oo	,,	✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H)			
Date	e debt was incurred	3/20/2017		20011).			
Last num	t 4 digits of account		As of the petition filing date, the claim is: Check all that apply.				
D		!					
	multiple creditors ha	ve an interest in the	Unliquidated				
oum	io proporty :		✓ Disputed				
\checkmark	No						
	Yes. Have you alrea relative priority?	ady specified the					
	☐ No. Specify each creditor, and its r	n creditor, including this relative priority.	S				
	Yes. The relative specified on line	e priority of creditors is s	-				

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the previous page.

Part 1: **Additional Page**

> Column A Amount of claim
> Do not deduct the value of collateral.

12 Creditor's name		Describe debtor's property that is subject to a lien							
GE HFS,		Equipment	\$	Unknown	\$	Unknown			
Creditor's Na	ame								
Creditor's	s mailing address								
		Describe the lien							
Notice Name		UCC-1 #177582381163							
PO Box 4	14, W-490	_							
Street									
		Is the creditor an insider or related party?							
		_ ☑ No							
Milwaukee		□ Yes							
City	State ZIP Code								
Country		Is anyone else liable on this claim?							
Creditor's	email address, if known	□ No							
		☑ Yes. Fill out Schedule H: Codebtors(Official For	rm 206H).						
Date debt	was incurred 4/26/2017	_							
Last 4 dig	gits of account	As of the petition filing date, the claim is: Check all that apply.							
		✓ Contingent							
same pro	le creditors have an interest in the	Unliquidated							
ounio pro	porty.	✓ Disputed							
✓ No									
☐ Yes	. Have you already specified the tive priority?								
1 🗆	No. Specify each creditor, including this reditor, and its relative priority.	5							
	Yes. The relative priority of creditors is specified on lines	_							
		-							

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Name

Part 1: **Additional Page**

2.

the previous page.

Column A Amount of claim
Do not deduct the value of collateral.

3 Cre	ditor's name	Describe debtor's property that is subject to a lier	n			
GE	HFS, LLC	Equipment	\$	Unknown	\$	Unknown
Cred	itor's Name		-		_	
Cre	ditor's mailing address					
		Describe the lien				
Notio	e Name	UCC-1 #177582381789	-			
PO	Box 414, W-490		_			
Stree	et	_				
		Is the creditor an insider or related party?				
		_ ☑ No				
Milv	vaukee WI 53201	_ □ Yes				
City	State ZIP Code					
Cour	ntry	Is anyone else liable on this claim?				
Cre	ditor's email address, if known	□ No				
		✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).			
Dat	e debt was incurred 4/26/2017	-				
	t 4 digits of account	As of the petition filing date, the claim is:				
nur	nber	Check all that apply. ☐ Contingent				
Do	multiple creditors have an interest in the					
	ne property?	✓ Unliquidated				
		✓ Disputed				
\checkmark	No					
	Yes. Have you already specified the relative priority?					
	☐ No. Specify each creditor, including this creditor, and its relative priority.					
	Yes. The relative priority of creditors is specified on lines	-				
		-				

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Column A

Amount of claim

Column B

Name

the previous page.

Additional Page Part 1:

> Value of collateral that Do not deduct the supports this claim value of collateral. 2.14 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177582382295 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 4/26/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Column A

Amount of claim
Do not deduct the

Column B

Value of collateral that supports this claim

Name

Additional Page

			of collateral.	suppor	rts this claim				
	Describe debtor's property that is subject to	a lien							
	Equipment	\$	Unknown	\$	Unknown				
	Lquipment	*		_ *					
	Describe the lien								
	UCC-1 #177586329341								
	-								
	La the anaditan an inciden an nalated mante								
	Is the creditor an insider or related party?								
53201	☑ No								
ZIP Code	□ Yes								
ZIP Code									
	Is anyone else liable on this claim?								
own	□ No								
	✓ Yes. Fill out Schedule H: Codebtors(Official Form 206H).								
9/2017									
	As of the petition filing date, the claim is: Check all that apply.								
interest in the	☑ Contingent								
	✓ Unliquidated								
	✓ Disputed								
ecified the									
tor, including this e priority.									
ity of creditors is									
prior	ity.	ity.		ity.	ity.				

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Column A

Column B

Name

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2.16 Cre o	ditor's name			Des	scribe debtor's property that is subject to a li	en					
GE I	HFS, LLC			Ea	uipment	\$		Unknown	\$	1	Unknown
Credi	itor's Name										
Cred	ditor's mailir	ng addres	s								
				De	scribe the lien						
	e Name			UC	C-1 #177586357261						
	Box 414, W-4	190		_							
Stree	et										
				-	the creditor an insider or related party?						
				√	No						
		WI	53201		Yes						
City	:	State	ZIP Code								
Coun	ntr./			ls a	anyone else liable on this claim?						
	Creditor's email address, if known			.o.	No						
Cie	uitoi 5 eiliali	auuress,	ii kiiowii								
				✓	Yes. Fill out Schedule H: Codeptors(Oπicial Fo	orm 2	206H).				
Date	e debt was ir	ncurred	5/19/2017								
	t 4 digits of a	account		Che	of the petition filing date, the claim is: eck all that apply.						
Do.	multiple ered	litara bay	e an interest in the	\checkmark	Contingent						
	ne property?	iitors nav	e an interest in the	\checkmark	Unliquidated						
	,			\checkmark	Disputed						
\checkmark	No										
	Yes. Have relative price		dy specified the								
			creditor, including this lative priority.								
	☐ Yes. The specifie	e relative d on lines	priority of creditors is								

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Column A

Amount of claim

Column B

Value of collateral that

Name

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Do not deduct the supports this claim value of collateral. 2.17 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177586523802 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 5/22/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Column A Amount of claim
Do not deduct the value of collateral.

3 Creditor's name	Describe debtor's property that is subject to a lien							
GE HFS, LLC	Equipment	\$\$	Unknown	\$	Unknown			
Creditor's Name								
Creditor's mailing address								
	Describe the lien							
Notice Name	UCC-1 # 177586800507							
PO Box 414, W-490	_							
Street								
	Is the creditor an insider or related party?							
	_ ☑ No							
Milwaukee WI 53201	☐ Yes							
City State ZIP Code								
Country	Is anyone else liable on this claim?							
Creditor's email address, if known	□ No							
	✓ Yes. Fill out Schedule H: Codebtors(Official Formula)	m 206H).						
Date debt was incurred 5/22/2017	_							
Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.							
	Contingent							
Do multiple creditors have an interest in the	Unliquidated							
same property?	□ Disputed							
□ No	E Diopatou							
Yes. Have you already specified the relative priority?								
 No. Specify each creditor, including this creditor, and its relative priority. 	S							
Yes. The relative priority of creditors is specified on lines	_ :							
	_							

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Column A Amount of claim
Do not deduct the value of collateral.

9 Creditor's nam	e	Describe debtor's property that is subject to a lie	n		
GE HFS, LLC		Equipment	\$	Unknown	\$ Unknown
Creditor's Name					
Creditor's mail	ling address				
		Describe the lien			
Notice Name		UCC-1 #177586564413	_		
PO Box 414, W	-490		_		
Street		_			
		Is the creditor an insider or related party?			
		_ ☑ No			
Milwaukee	WI 53201	_ □ Yes			
City	State ZIP Code	_ 166			
Country		Is anyone else liable on this claim?			
Creditor's ema	il address, if known	□ No			
	·	✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).		
Date debt was	incurred 5/22/2017	_			
Last 4 digits of	faccount	As of the petition filing date, the claim is: Check all that apply.			
number		Contingent			
Do multiple cre	editors have an interest in the	✓ Unliquidated			
same property	?				
		✓ Disputed			
✓ No					
Yes. Have relative pr	e you already specified the riority?				
	pecify each creditor, including this or, and its relative priority.				
	The relative priority of creditors is ied on lines	-			
		-			

Name

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Column A Amount of claim
Do not deduct the value of collateral.

20 Creditor's name			Describe debtor's property that is subject to a lien							
	HFS, LL			Equipment	\$\$	Unknown	\$	Unknown		
Credit	tor's Nam	ie								
Cred	ditor's ı	mailing addres	ss							
				Describe the lien						
Notice	e Name			UCC-1 #177587313022						
PO E	3ox 414	I, W-490								
Street	t									
				Is the creditor an insider or related par	rty?					
				☑ No						
Milw	aukee	WI	53201	- □ Yes						
City		State	ZIP Code							
Count	try			Is anyone else liable on this claim?						
Cred	Creditor's email address, if known		, if known	□ No						
				✓ Yes. Fill out Schedule H: Codebtors	(Official Form 206H).					
Date	e debt v	vas incurred	5/25/2017	-						
Last num		s of account		As of the petition filing date, the claim Check all that apply.	is:					
				Contingent						
	nultiple e prop		e an interest in the	✓ Unliquidated						
Saiii	e brob	ertyr								
\checkmark	No			_ '						
		Have you alread ve priority?	dy specified the							
	□ No	o. Specify each editor, and its re	creditor, including this elative priority.							
	Yes. The relative priority of creditors is specified on lines									
	_									

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Column A

Amount of claim

Column B

Name

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Additional Page Part 1:

> Value of collateral that Do not deduct the supports this claim value of collateral. 2.21 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177587523186 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 5/26/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Column A

Column B

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2.22	2 Cred	litor's nar	me		De	scribe debtor's property that is s	subject to a lien					
	GE H	IFS, LLC			Fo	uipment	:	\$	Unknown	\$	Unknown	
	Credit	or's Name				<u></u>						
	Cred	litor's ma	iling addres	ss								
					De	scribe the lien						
		Name			UC	C-1 #177587529647						
	PO E	Box 414, V	V-490		_							
	Street				la.	the creditor an insider or related	norty?					
					-		party?					
	Milyar	aukee	WI	53201	_	No						
	City	aukee	State	ZIP Code	Ш	Yes						
	City		State	ZIF Code								
	Count	rv			ls	anyone else liable on this claim?	?					
		Creditor's email address, if known		, if known	V	No						
					☐ Yes. Fill out Schedule H: Codebtors(Official Form 206H).							
	Date	debt was	s incurred	5/26/2017	- "							
				0/20/2011								
	Last num		of account			of the petition filing date, the cla eck all that apply.	nim is:					
	Hulli	Dei			⊘	Contingent						
				e an interest in the	□	Unliquidated						
	same	e propert	y?		✓	Disputed						
	\checkmark				v	Diopated						
		No										
	П	Yes. Hav	ve you alrea oriority?	dy specified the								
	No. Specify each creditor, including this creditor, and its relative priority.											
			The relative	priority of creditors is	-							

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	the previous page.	Amount of Do not dedivalue of col	uct the	Column B Value of co supports th	ollateral that nis claim	
2.23	3 Creditor's name	Describe debtor's property that is subject to a lien				
	GE HES LLC	Faviancet	\$	Unknown	\$	Unknown

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GE HFS, LLC	Equipment	\$	Unknown	\$ Unknown
Creditor's Name				
Creditor's mailing address				
	Describe the lien			
Notice Name	UCC-1 #177587559468 UCC-3 (Amend.) #1876324278			
PO Box 414, W-490	#10/03242/0			
Street	_			
	Is the creditor an insider or related party?			
	_ ☑ No			
Milwaukee WI 53201	_ □ Yes			
City State ZIP Code				
Country	Is anyone else liable on this claim?			
Creditor's email address, if known	□ No			
	✓ Yes. Fill out Schedule H: Codebtors(Office)	ial Form 206H).		
Date debt was incurred 5/26/2017	=			
Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.			
De multiple and items have an interest in the				
Do multiple creditors have an interest in the same property?	✓ Unliquidated			
	Disputed			
✓ No				
Yes. Have you already specified the relative priority?				
No. Specify each creditor, including this creditor, and its relative priority.				
Yes. The relative priority of creditors is specified on lines	-			
	-			

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Column A

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the previous page. Amount of claim Value of collateral that Do not deduct the supports this claim value of collateral. 2.24 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177588526372 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 6/2/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Column A

Amount of claim

Column B

Name

Additional Page Part 1:

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Value of collateral that Do not deduct the supports this claim value of collateral. 2.25 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177588752676 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 6/5/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

Name

the previous page.

Part 1: Additional Page

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Column A

Amount of claim

Do not deduct the value of collateral.

.26 Cre	ditor's	s name		Describe debtor's property that is subject to a lier	1			
GE	HFS, I	LLC		Equipment	\$	Unknown	\$	Unknown
Cred	litor's Na	ame					_	
Cre	ditor's	mailing addr	ess					
				Describe the lien				
	e Name			UCC-1 #177589597462				
PO		14, W-490		-				
Stree	eτ			Is the graditar an incider or related party?				
				Is the creditor an insider or related party?				
Mily	vaukee	e WI	53201	☑ No				
City	vaukee	State	ZIP Code	□ Yes				
City		State	ZIP Code					
Cour	ntry			Is anyone else liable on this claim?				
Cre	ditor's	email addres	ss, if known	□ No				
				✓ Yes. Fill out Schedule H: Codebtors(Official Formula)	m 206H).			
Date	e debt	was incurred	l 6/9/2017		200,.			
			0/3/2017					
		its of account	t	As of the petition filing date, the claim is:				
nun	nber			Check all that apply.				
Do	multin	le creditors h	ave an interest in the					
		perty?	ave an interest in the	✓ Unliquidated				
				✓ Disputed				
\checkmark	No							
	Yes relat	. Have you alre tive priority?	eady specified the					
			ch creditor, including this relative priority.					
	_ \ _ '	Yes. The relative specified on line	ve priority of creditors is es					
	_							

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Name

Main Document Page 53 of 139 number (if known):

18-20151

Column A

Amount of claim
Do not deduct the

value of collateral.

Column B

Value of collateral that supports this claim

Part 1: **Additional Page**

Creditor's	name		Describe debtor's property that is subje	ect to a lien		
GE HFS, I	LC		Equipment	\$	Unknown \$	S Unknown
Creditor's Na	ime					
Creditor's	mailing addres	ss				
			Describe the lien			
Notice Name			UCC-1 #177604192037			
PO Box 47	14, W-490		_			
Sireei			Is the creditor an insider or related par-	tv?		
			_ is the creditor all insider of related par ✓ No	ty:		
Milwaukee	e WI	53201	_			
City	State	ZIP Code	□ Yes			
Sity	Oldio	211 0000				
Country			Is anyone else liable on this claim?			
Creditor's	email address,	if known	□ No			
			✓ Yes. Fill out Schedule H: Codebtors(Official Form 206H).		
Date debt	was incurred	9/6/2017				
		0/0/2017				
	its of account		As of the petition filing date, the claim i	s:		
number			Check all that apply. ☐ Contingent			
Do multip	le creditors hav	e an interest in the	_ ·			
same pro			✓ Unliquidated			
_			Disputed			
☑ No						
	. Have you alread tive priority?	dy specified the				
	No. Specify each reditor, and its re	creditor, including this elative priority.				
	Yes. The relative specified on lines	priority of creditors is	-			

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 54 of 139 number (if known):

Column A

Amount of claim
Do not deduct the

Column B

Value of collateral that

Name

the previous page.

Part 1: **Additional Page**

								alue of collateral.	su	pports this claim
8 Cred	litor's nam	ie		Des	scribe debtor's property	that is subject to a lier	1			
GE F	IFS, LLC			Eq	uipment		\$	Unknown	\$	Unknown
Credit	or's Name				•				_	
Cred	itor's mail	ing addres	ss							
					scribe the lien					
	Name	100		UC	C-1 #177612439606		-			
Street	30x 414, W	-490		-						
Olicet				le f	the creditor an insider or	r related narty?				
				_	No	related party.				
Milws	aukee	WI	53201							
City	aunco	State	ZIP Code		Yes					
Oity		Oldio	211 0000							
Count	ry			ls a	anyone else liable on thi	s claim?				
	•	il address,	if known	\overline{V}	No					
		,		✓	Yes. Fill out Schedule H	I: Codebtors/Official For	n 20	06H).		
Date	debt was	incurred	10/24/2017	- "				/.		
Duto	ucbi wus	mounca	10/24/2017							
Last num	4 digits of	faccount			of the petition filing date eck all that apply.	e, the claim is:				
				\checkmark	Contingent					
			e an interest in the	\overline{V}	Unliquidated					
same	e property	ſ		_ ✓	Disputed					
\checkmark	No				.,					
			du anasitis datas							
	relative p		dy specified the							
			creditor, including this elative priority.							
		The relative ied on lines	priority of creditors is	-						

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Part 1:

Additional Page

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Column A Amount of claim
Do not deduct the value of collateral.

.29 Cre	ditor's	name		Describe debtor's property that is subject to a lien			
GE	HFS, LI	_C		Equipment	\$	Unknown	\$ Unknown
Cred	itor's Nan	ne					
Cre	ditor's	mailing addre	ess				
				Describe the lien			
	e Name			UCC-1 #177612442397			
		4, W-490		_			
Stree	et						
				Is the creditor an insider or related party?			
				☑ No			
	vaukee	WI	53201	☐ Yes			
City		State	ZIP Code				
Cour	ntry			Is anyone else liable on this claim?			
Cre	ditor's	email address	s, if known	□ No			
				✓ Yes. Fill out Schedule H: Codebtors(Official Form	n 206H).		
Date	e debt v	was incurred	10/24/2017				
	t 4 digi nber	ts of account		As of the petition filing date, the claim is: Check all that apply.			
			ve an interest in the	✓ Contingent✓ Unliquidated			
sam	ne prop	erty?					
$\overline{\checkmark}$				☑ Disputed			
	No						
		Have you alreave priority?	ady specified the				
			n creditor, including this relative priority.				
		es. The relative	e priority of creditors is				
	_						

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 56 of 1239 number (if known):

Column A

Amount of claim

Column B

Name

Additional Page Part 1:

tne p	previous p	age.						1	Do not deduct the value of collateral.		collateral that s this claim
2.30 Cre c	ditor's nan	ne		Des	cribe debtor	's property t	hat is subject to a l	ien			
	HFS, LLC			Eq	uipment			\$_	Unkno	wn	\$ Unknown
	tor's Name ditor's mai	iling addres	s								
		•		De	scribe the lie	n					
Notice	e Name			UC	C-1 #1776124	442539					
PO E	Box 414, W	<i>l</i> -490									
Street	t			_							
				ls :	he creditor a	ın insider or	related party?				
				\checkmark	No						
Milw	aukee	WI	53201		Yes						
City		State	ZIP Code								
Count	try			ls	anyone else l	iable on this	claim?				
Cred	ditor's em	ail address,	if known		No						
				V	Yes. Fill out	Schedule H:	Codebtors(Official F	orm 2	06H).		
Date	e debt was	incurred	10/24/2017								
Last num		of account			ck all that app		the claim is:				
_				\checkmark	Contingent						
	nuitipie cr le property		e an interest in the	\checkmark	Unliquidated	d					
•	. о р. оро,	, .		\checkmark	Disputed						
\checkmark	No										
	Yes. Hav relative p	ve you alread priority?	ly specified the								
			creditor, including this lative priority.								
		The relative ified on lines	priority of creditors is	-							

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 57 of 1239 number (if known):

Column A

Amount of claim

Column B

Value of collateral that

Name

the previous page.

Additional Page Part 1:

								collateral.	su	ipports this claim
1 Cred	ditor's nan	ne		Des	scribe debtor's property that is subject to a li	en				
GE I	HFS, LLC			Eq	uipment	\$;	Unknown	\$	Unknown
Credi	itor's Name									
Cred	ditor's mai	ling addres	ss							
					scribe the lien					
	e Name			UC	C-1 #177612442913	_				
Stree	Box 414, W	7-490		-						
000	•			ls t	the creditor an insider or related party?					
				-	No					
Milw	aukee	WI	53201	-	Yes					
City		State	ZIP Code	_						
Coun	itry			ls a	anyone else liable on this claim?					
Cred	ditor's ema	ail address,	if known		No					
				V	Yes. Fill out Schedule H: Codebtors(Official Fo	orm .	206H).			
Date	e debt was	incurred	10/24/2017							
	t 4 digits o	of account			of the petition filing date, the claim is: eck all that apply.					
Do r	multiple or	aditara hay	o an interest in the	\checkmark	Contingent					
	nultiple cr e property		e an interest in the	\checkmark	Unliquidated					
				\checkmark	Disputed					
\checkmark	No									
	Yes. Hav relative p		dy specified the							
			creditor, including this elative priority.							
		The relative fied on lines	priority of creditors is							

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Page 58 of 139 number (if known):

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the previous page.

Part 1: **Additional Page**

> Column A Amount of claim
> Do not deduct the value of collateral.

32 Cred	ditor's nam	е		Describe debtor's property that is subject to a lie	en		
GE I	HFS, LLC			Equipment	\$	Unknown	\$ Unknown
Credi	tor's Name			-			
Cred	ditor's mail	ing address					
				Describe the lien			
	e Name			UCC-1 #177612504225	_		
PO E	Box 414, W-	-490		_			
Stree	t			In the condition on invidence and to describe			
				Is the creditor an insider or related party?			
NATI		14/1	50004	_ ☑ No			
	aukee	WI	53201	□ Yes			
City		State	ZIP Code				
Coun	try			Is anyone else liable on this claim?			
Cred	ditor's emai	il address, if k	nown	□ No			
				✓ Yes. Fill out Schedule H: Codebtors(Official Fo	rm 206H).		
Date	e debt was	incurred 1	0/24/2017	-			
Last num	t 4 digits of ober	account		As of the petition filing date, the claim is: Check all that apply.			
_							
	nuitiple cre e property		n interest in the	Unliquidated			
oum	о ргорогту	•		✓ Disputed			
\checkmark	No						
	Yes. Have relative pr	e you already spiority?	pecified the				
		ecify each cred or, and its relativ	ditor, including this ve priority.				
		The relative price ied on lines	ority of creditors is				

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Part 1:

Name

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A Amount of claim
Do not deduct the value of collateral.

33 Cred	ditor's name	Describe debtor's property that is subject to a lie	n			
GE I	HFS, LLC	Equipment	\$	Unknown	\$	Unknown
Credi	itor's Name				_	
Cred	ditor's mailing address					
		Describe the lien				
Notic	e Name	UCC-1 #177612504588				
	Box 414, W-490	_	_			
Stree	ot .					
		Is the creditor an insider or related party?				
		_ ☑ No				
	vaukee WI 53201	☐ Yes				
City	State ZIP Code					
Coun	ntry	Is anyone else liable on this claim?				
Cred	ditor's email address, if known	□ No				
		✓ Yes. Fill out Schedule H: Codebtors(Official Formula)	rm 206H).			
Date	e debt was incurred 10/24/2017	_				
	t 4 digits of account	As of the petition filing date, the claim is: Check all that apply.				
	multiple creditors have an interest in the	✓ Unliquidated				
sam	ne property?	☑ Disputed				
$\overline{\checkmark}$	No	E Disputed				
	Yes. Have you already specified the relative priority?					
	☐ No. Specify each creditor, including this creditor, and its relative priority.	S				
	Yes. The relative priority of creditors is specified on lines	_				
		_				

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 60 of 139 number (if known):

Column A

Column B

Name

Additional Page Part 1:

the	previous				g,,		Amount o Do not dec value of co	duct the	1	Column B Value of coll supports this	
2.34 Cre	editor's na	ame		Des	scribe debtor's property that is subject to a lie	n					
	HFS, LLC	;		Eq	uipment	\$		Unknown	\$_		Unknown
	ditor's Name										
Cre	editor's m	ailing addres	S								
Noti	ce Name				escribe the lien	_					
	Box 414,	\ <i>\\-</i> 490		<u>UC</u>	CC-1 #187631203445	_					
Stre		VV 400		-							
				ls t	the creditor an insider or related party?						
				-	No						
Milv	waukee	WI	53201	П	Yes						
City		State	ZIP Code								
Cou	ntry			ls	anyone else liable on this claim?						
Cre	editor's en	nail address,	if known		No						
				✓	Yes. Fill out Schedule H: Codebtors(Official For	rm 2	106H).				
Dat	te debt wa	as incurred	1/13/2018								
	st 4 digits mber	of account			of the petition filing date, the claim is: eck all that apply.						
_		P. 1		\checkmark	Contingent						
	multiple o ne proper		e an interest in the	\checkmark	Unliquidated						
ou.	по ргорог	٠, .		\checkmark	Disputed						
\checkmark	No										
	Yes. Ha	ave you alread priority?	dy specified the								
			creditor, including this lative priority.								
	☐ Yes	. The relative cified on lines	priority of creditors is								

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the previous page.

Part 1: **Additional Page**

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Column A Amount of claim
Do not deduct the

value of collateral.

GE H	HFS, LLC			Equipment			\$	Unknown	\$ Unknown
Credit	or's Name			Lquipmont					
Cred	litor's mailing a	address							
				Describe the	e lien				
	Name			UCC-1 #187	627398637		_		
Street	Box 414, W-490			-					
Otreet				Is the credit	or an insider or re	lated narty?			
				_ I No		p			
Milwa	aukee WI		53201	□ Yes					
City	Stat	е	ZIP Code	□ 163					
Count	ry			Is anyone el	lse liable on this c	laim?			
Cred	litor's email ad	dress, if	known	□ No					
				✓ Yes. Fill	out Schedule H: Co	odebtors(Official For	m 206H).		
Date	debt was incu	rred	1/16/2018	-					
Last num	4 digits of acc	ount _		Check all that		ne claim is:			
	nultiple credito e property?	rs have a	an interest in the	✓ Conting✓ Unliquid✓ Dispute	dated				
\checkmark	No			E Diopato					
	Yes. Have you relative priority		specified the						
			editor, including this tive priority.						
	☐ Yes. The respective of	elative pr	riority of creditors is						

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Column A

Amount of claim

Do not deduct the

Column B

Value of collateral that

Name

the previous page.

Additional Page Part 1:

> supports this claim value of collateral. 2.36 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #187630291865 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 1/26/2018 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Column B

Value of collateral that supports this claim

Column A

Amount of claim
Do not deduct the

value of collateral.

Additional Page

<u> </u>	.=0								•		•	
	HFS, LLC			Equip	ment				\$	Unknown	_ \$	Unknow
	tor's Name											
Cred	litor's ma	ailing addres	SS	_								
Nation	e Name				ribe the lie				_			
	30x 414, \	M-490		UCC-	1 #187630	1292997			-			
Street		VV- 1 30		_								
				Is the	creditor a	an insider (or related pa	rty?				
				- ☑ No				•				
Milwa	aukee	WI	53201	_								
City		State	ZIP Code		63							
Count	try			Is any	one else	liable on th	his claim?					
Cred	litor's en	nail address,	, if known	□ N	10							
				✓ Y	es. Fill out	t S <i>chedule</i>	H: Codebtors	s(Official For	m 206H).			
Date	debt wa	s incurred	1/26/2018	_								
Last	4 digits	of account					te, the claim	is:				
num				_	all that ap							
Do n	nultinla a	roditore hav	e an interest in the		Contingent							
	e proper		e an interest in the	☑ L	Jnliquidate	ed						
				V C	Disputed							
\checkmark	No											
		ive you alread priority?	dy specified the									
			creditor, including this elative priority.	i								
	☐ Yes	. The relative	priority of creditors is	-								

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Part 1:

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.	Column A Amount of clai

iim the value of collateral.

8 Creditor's name	Describe debtor's property that is subject to a lie	n		
GE HFS, LLC	_Equipment	\$	Unknown	\$ Unknown
Creditor's Name				
Creditor's mailing address				
	Describe the lien			
Notice Name	UCC-1 # 177586800507 UCC-3 (Amend.) #1876321957			
PO Box 414, W-490				
Street				
	Is the creditor an insider or related party?			
	_ ☑ No			
Milwaukee WI 53201	□ Yes			
City State ZIP Code				
Country	Is anyone else liable on this claim?			
Creditor's email address, if known	□ No			
	✓ Yes. Fill out Schedule H: Codebtors(Official Fol	rm 206H).		
Date debt was incurred 2/5/2018	_ -	,		
Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. Contingent			
Do multiple creditors have an interest in the	✓ Unliquidated			
same property?				
	✓ Disputed			
☑ No				
Yes. Have you already specified the relative priority?				
No. Specify each creditor, including this creditor, and its relative priority.	s			
Yes. The relative priority of creditors is specified on lines				
	_			

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 65 of 1239 number (if known):

Column A

Column B

Name

Part 1: **Additional Page**

	previous p						Amount of Do not devalue of co	duct the	١	Column B Value of coll supports this	
2.39 Cre	editor's nan	ne		Des	scribe debtor's property that is subject to a lie	n					
GE	HFS, LLC			Eq	uipment	\$		Unknown	\$		Unknown
Cred	ditor's Name				•						
Cre	editor's mai	ling addres	ss								
				De	scribe the lien						
	ce Name			UC	CC-1 #187641797808						
	Box 414, W	/-490		_							
Stre	et										
				-	the creditor an insider or related party?						
1.4"		14/1	50004		No						
	waukee	WI	53201		Yes						
City		State	ZIP Code								
Cou	ntn/			ls a	anyone else liable on this claim?						
	editor's ema	ail addraee	if known		No						
Oic	untor 3 emic	an audress,	ii kilowii				00(1)				
_				✓	Yes. Fill out Schedule H: Codebtors(Official For	IIII Z	υон).				
Dat	te debt was	incurred	4/4/2018								
	st 4 digits o mber	f account		Che	of the petition filing date, the claim is: eck all that apply.						
Do	multiple or	aditors hav	e an interest in the	\checkmark	Contingent						
	ne property		e an interest in the	\checkmark	Unliquidated						
	,			\checkmark	Disputed						
\checkmark	No										
	Yes. Hav relative p		dy specified the								
			creditor, including this lative priority.								
	☐ Yes. speci	The relative fied on lines	priority of creditors is	-							

Name

Part 1:

Additional Page

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Column A

Amount of claim
Do not deduct the

value of collateral.

Column B

Value of collateral that supports this claim

GE I	HFS, LLC			Equipment	\$	Unknown	\$	Unknow
	tor's Name				·		- '	
Cred	litor's mail	ing address						
				Describe the lien				
Notice	e Name			UCC-1 #187641807072 UCC-3 (Amend.) #1876451035				
PO E	Box 414, W	-490		#1070431033				
Stree	t			-				
				Is the creditor an insider or related party?	•			
				_ ☑ No				
	aukee	WI	53201	□ Yes				
City		State	ZIP Code					
Country				Is anyone else liable on this claim?				
Creditor's email address, if known		known	□ No					
,				✓ Yes. Fill out Schedule H: Codebtors(Offi	icial Form 206H).			
Date	debt was	incurred	4/4/2018	-				
Last num	4 digits of	faccount		As of the petition filing date, the claim is: Check all that apply.				
iiuii	ibei	-		✓ Contingent				
			an interest in the					
sam	e property	ſ		✓ Disputed				
\checkmark	No			·				
		e you already riority?	specified the					
		pecify each cr or, and its rela	editor, including this tive priority.					
	☐ Yes. T	The relative poiled on lines	riority of creditors is					

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Debtor:

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Column A

Amount of claim

Do not deduct the

Column B

Value of collateral that

supports this claim

Additional Page

the previous page.

 \square Yes. The relative priority of creditors is

specified on lines

value of collateral. 2.41 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #187652835308 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 6/7/2018 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority.

Column A

Amount of claim

Column B

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Name

Debtor:

Part 1:

Name

Additional Page

the previous page.

☐ No. Specify each creditor, including this creditor, and its relative priority.

 \square Yes. The relative priority of creditors is

specified on lines

Value of collateral that Do not deduct the supports this claim value of collateral. 2.42 Creditor's name Describe debtor's property that is subject to a lien GE HFS, LLC Unknown Unknown Equipment Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #187654810353 PO Box 414, W-490 Street Is the creditor an insider or related party? ☑ No Milwaukee 53201 WI ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 6/19/2018 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed \checkmark No Yes. Have you already specified the relative priority?

Name

Part 1:

Additional Page

Main Boodment 1 age 53 of 103

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the previous page.	

Column A

Amount of claim

Do not deduct the value of collateral.

43 Creditor's name				Describe debtor's property that is subject to a lien				
Med	Med One Capital Funding, LLC			Equipment	\$	Unknown	\$	Unknown
Cred	Creditor's Name						_	
Cre	ditor'	's mailing addre	ess					
				Describe the lien				
	ce Nam			UCC-1 #177588030382				
		outh 1300 East		_				
Stree	et			In the condition on invidence related marks 0				
				Is the creditor an insider or related party?				
			0.400.4	☑ No				
San	idy	UT	84094	□ Yes				
City		State	ZIP Code					
Cour	ntry			Is anyone else liable on this claim?				
Cre	ditor'	's email address	s, if known	□ No				
				✓ Yes. Fill out Schedule H: Codebtors(Official Form)	n 206H).			
Dat	e deb	ot was incurred	5/31/2017					
	t 4 di nber	igits of account		As of the petition filing date, the claim is: Check all that apply. Contingent				
Do	multi	ple creditors ha	ve an interest in the					
		operty?		✓ Unliquidated				
				✓ Disputed				
\checkmark	No							
		s. Have you alrea ative priority?	ady specified the					
		No. Specify each creditor, and its r	n creditor, including this relative priority.					
		Yes. The relative specified on line	e priority of creditors is					

Name

ivaille

the previous page.

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Column A

Column B

Column A

Amount of claim

Do not deduct the value of collateral.

44 Cred	ditor's name	Describe debtor's property that is subject to a lie	n		
	One Capital Funding, LLC	Equipment	\$	Unknown	\$ Unknown
	tor's Name				
Cred	ditor's mailing address				
		Describe the lien			
	e Name	UCC-1 #177588030403	_		
	2 South 1300 East	_			
Stree	t				
		Is the creditor an insider or related party?			
		_ ☑ No			
San	dy UT 84094	☐ Yes			
City	State ZIP Code				
Coun	try	Is anyone else liable on this claim?			
Cred	litor's email address, if known	□ No			
		✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).		
Date	e debt was incurred 5/31/2017	-			
Last num	4 digits of account	As of the petition filing date, the claim is: Check all that apply.			
D	and the language of the state o	Contingent			
	nultiple creditors have an interest in the e property?	Unliquidated			
Juin	o proporty :	✓ Disputed			
\checkmark	No				
	Yes. Have you already specified the relative priority?				
	☐ No. Specify each creditor, including this creditor, and its relative priority.				
	Yes. The relative priority of creditors is specified on lines				
		-			

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 71 of 139 number (if known):

Name

Part 1: **Additional Page**

the previous page.

Column A Amount of claim
Do not deduct the value of collateral.

45 Creditor's name			Describe debtor's property that is subject to a lie	n		
	One Capital Funding, LLC		Equipment	\$	Unknown	\$ Unknown
	tor's Name					
Cred	ditor's mailing address					
			Describe the lien			
	e Name		UCC-1 #177588030524	_		
	12 South 1300 East		_			
Stree	t					
			Is the creditor an insider or related party?			
			_ ☑ No			
San	dy UT	84094	□ Yes			
City	State	ZIP Code				
Coun	try		Is anyone else liable on this claim?			
Cred	ditor's email address, if kn	own	□ No			
			✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).		
Date	e debt was incurred 5/3	1/2017	-			
Last	t 4 digits of account		As of the petition filing date, the claim is: Check all that apply.			
	nultiple creditors have an i e property?	interest in the	✓ Unliquidated			
Saiii	e property :		□ Disputed			
\checkmark	No		E copositi			
	Yes. Have you already sperelative priority?	ecified the				
	☐ No. Specify each credit creditor, and its relative	or, including this priority.				
	Yes. The relative priori specified on lines	ty of creditors is				

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Debtor:

Name

Additional Page Part 1:

Verity Health System of California, Inc. 18-20151 Main Document Page 72 of 139 number (if known):

Copy this page only if more space is needed. Continue numbering the lines sequentially from	Column A
the previous page.	Amount of claim
	Do not deduct the
	value of collateral.

2.46 Creditor's name Describe debtor's property that is subject to a lien NFS Leasing, Inc. Unknown Unknown **Equipment Lease** Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #167563637135 900 Cummings Center Street Suite 226-U Is the creditor an insider or related party? ☑ No 01915 Beverly MA ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 12/29/2016 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent $\sqrt{}$ Do multiple creditors have an interest in the Unliquidated $\overline{\mathbf{V}}$ same property? $\sqrt{}$ Disputed No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. People's United Bank; unknown \square Yes. The relative priority of creditors is specified on lines

Column B

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Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 73 of 139 number (if known):

Column A

Amount of claim

Column B

Name

the previous page.

Additional Page Part 1:

> Value of collateral that Do not deduct the supports this claim value of collateral. 2.47 Creditor's name Describe debtor's property that is subject to a lien NFS Leasing, Inc. Unknown Unknown Equipment Lease Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177564017179 900 Cummings Center Street Suite 226-U Is the creditor an insider or related party? ☑ No 01915 Beverly MA ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 1/3/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent $\sqrt{}$ Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed No

Official Form 206D

Yes. Have you already specified the

☐ No. Specify each creditor, including this creditor, and its relative priority. People's United Bank; unknown \square Yes. The relative priority of creditors is

relative priority?

specified on lines

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Name

Part 1: **Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A Amount of claim
Do not deduct the value of collateral.

Column B Value of collateral that supports this claim

2.48 Creditor's name	Describe debtor's property that is subject to a lie	n			
Olympus America Inc.	_Equipment	\$	Unknown	\$\$	Unknown
Creditor's Name					
Creditor's mailing address					
	Describe the lien				
Notice Name	UCC-1 #177612543430	_			
900 Cummings Center	_	_			
Street					
	Is the creditor an insider or related party?				
	_ ☑ No				
Center Valley PA 18035	_ □ Yes				
City State ZIP Code					
Country	Is anyone else liable on this claim?				
Creditor's email address, if known	No				
	☐ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).			
Date debt was incurred 10/24/2017	_				
Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.				
Do multiple and ditare have an interest in the	✓ Contingent				
Do multiple creditors have an interest in the same property?	Unliquidated				
camo proporty .	✓ Disputed				
✓ No	·				
Yes. Have you already specified the relative priority?					
No. Specify each creditor, including this creditor, and its relative priority.	s				
Yes. The relative priority of creditors is specified on lines	_				
	_				

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Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 75 of 139 number (if known):

Name

Part 1: **Additional Page**

the previous page.

Column A Amount of claim
Do not deduct the value of collateral.

Column B Value of collateral that supports this claim

9 Cred	ditor	's name		Describe debtor's property that is subject to a lie	n			
Peop	ples	United Bank		Equipment Lease	\$	Unknown	\$	Unknown
Credi	itor's N	Name					_	
Cred	ditor	's mailing ad	dress					
				Describe the lien				
Notic				UCC-1 #167563637135	_			
One		t Office Squar	re	_				
32nd		0.5		le the exaditor on incider or related narry?				
32110	a FIO	Or		Is the creditor an insider or related party?				
Bost	ton	MA	02120	☑ No				
	ion	State	ZIP Code	□ Yes				
City		State	ZIP Code					
Coun	itry			Is anyone else liable on this claim?				
Cred	ditor	's email addr	ress, if known	□ No				
				✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H).			
Date	e del	ot was incurre	red 12/29/2016					
	t 4 d nber	igits of accοι	unt	As of the petition filing date, the claim is: Check all that apply. Contingent				
Do r	multi	ple creditors	have an interest in the					
		operty?		✓ Unliquidated				
				✓ Disputed				
	No							
		s. Have you a ative priority?	already specified the					
			each creditor, including this its relative priority.					
		NFS Leasing	g, Inc.; Unknown					
		Yes. The rela	ative priority of creditors is lines					

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Name

Debtor:

the previous page.

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 76 of 139 number (if known):

Column A

Amount of claim

Column B

Value of collateral that

Additional Page Part 1:

> Do not deduct the supports this claim value of collateral. 2.50 Creditor's name Describe debtor's property that is subject to a lien Peoples United Bank Unknown Unknown Equipment Lease Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #177564017179 One Post Office Square Street 32nd Floor Is the creditor an insider or related party? ☑ No 02121 Boston MA ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 1/3/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent $\sqrt{}$ Do multiple creditors have an interest in the Unliquidated same property? $\sqrt{}$ Disputed No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. NFS Leasing, Inc.; Unknown \square Yes. The relative priority of creditors is specified on lines

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Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 77 of 139 number (if known):

Column A

Amount of claim

Desc

Column B

Name

the previous page.

Additional Page Part 1:

> Value of collateral that Do not deduct the supports this claim value of collateral. 2.51 Creditor's name Describe debtor's property that is subject to a lien SHI International Corp. Unknown Unknown Equipment lien Creditor's Name Creditor's mailing address Describe the lien Notice Name UCC-1 #167502033158 1111 Old Eagle School Road Street Is the creditor an insider or related party? ☑ No Wayne 19087 PA ☐ Yes City State ZIP Code Is anyone else liable on this claim? Country No Creditor's email address, if known $\overline{\mathbf{V}}$ Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 1/4/2016 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. \square Yes. The relative priority of creditors is specified on lines

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Part 1:

Name

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from

the previous page.

Column A Amount of claim
Do not deduct the value of collateral.

Column B Value of collateral that supports this claim

52 Cred	litor's n	ame		Describe debtor's property that is subject to a lie	n		
		Sons Electric,	Inc.	OCH Pharmacy Job#18243 O'Connor Hospital project, located at 2105 Forest Avenue, San Jose, CA 95128, in the county of Santa Clara	\$	8,025.95	\$ Unknown
	tor's Name						
Cred	ditor's n	nailing addres	ss				
				Describe the lien			
	e Name			County of Santa Clara Mechanic's Lien			
		ry Avenue					
Street	t						
				Is the creditor an insider or related party?			
				☑ No			
San	Jose	CA	95131	☐ Yes			
City		State	ZIP Code				
Count	try			Is anyone else liable on this claim?			
Cred	ditor's e	mail address	, if known	✓ No			
				☐ Yes. Fill out Schedule H: Codebtors(Official Fol	rm 206H).		
Date	debt w	as incurred	8/21/2018				
Last num		s of account		As of the petition filing date, the claim is: Check all that apply.			
	nultiple e prope		ve an interest in the	☑ Unliquidated			
		•		✓ Disputed			
\checkmark	No						
		lave you alrea e priority?	dy specified the				
			creditor, including this elative priority.				
		s. The relative	e priority of creditors is				
	_						

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Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 79 of 139 number (if known):

Column A

Column B

Name

Additional Page Part 1:

Summers & Sons Electric, Inc. Creditor's name Describe debtor's property that is subject to a lien SMG Pharmacy Job#18241 Seton Medical Center project, located at 1900 Sullivan Avenue, Daly City, CA 94105 in the County of San Francisco Creditor's mailing address	\$	17,532.70	
Summers & Sons Electric, Inc. Creditor's Name project, located at 1900 Sullivan Avenue, Daly City, CA 94105 in the County of San Francisco	\$	17,532.70	
Creditor's Name			\$ Unknown
Creditor's mailing address			
Describe the lien			
Notice Name County of Santa Clara Mechanic's Lien			
1460 Atteberry Avenue			
Street			
Is the creditor an insider or related party?			
San Jose CA 95131			
City State ZIP Code			
Country Is anyone else liable on this claim?			
Creditor's email address, if known ☑ No			
Yes. Fill out Schedule H: Codebtors(Official Form	n 206H).		
Date debt was incurred 8/21/2018			
Last 4 digits of account number As of the petition filing date, the claim is: Check all that apply.			
Contingent			
Do multiple creditors have an interest in the same property? Unliquidated			
☑ Disputed			
☑ No			
Yes. Have you already specified the relative priority?			
□ No. Specify each creditor, including this creditor, and its relative priority.			
Yes. The relative priority of creditors is specified on lines			

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Debtor:

Part 1:

Name

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from Column A Column B the previous page. Amount of claim Value of collateral that Do not deduct the supports this claim value of collateral. 2.54 Creditor's name Describe debtor's property that is subject to a lien OCH Elevator Mod Job #18123 O'Connor Hospital Project, located at 2105 Forest Avenue, san Jose, Summers & Sons Electric, Inc. 123,310.00 \$ Unknown CA 95128, in the county of Santa Clara. Creditor's mailing address Describe the lien Notice Name County of Santa Clara Mechanic's Lien 1460 Atteberry Avenue Street Is the creditor an insider or related party? ✓ No San Jose CA 95131 Yes City State ZIP Code Is anyone else liable on this claim? Country Creditor's email address, if known $\sqrt{}$ Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 8/21/2018 As of the petition filing date, the claim is: Last 4 digits of account number Check all that apply. Contingent Do multiple creditors have an interest in the Unliquidated \checkmark same property? $\overline{\mathbf{V}}$ Disputed \checkmark No Yes. Have you already specified the relative priority? \square No. Specify each creditor, including this creditor, and its relative priority. ☐ Yes. The relative priority of creditors is specified on lines

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the previous page.

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Column B

Value of collateral that supports this claim

Column A

Amount of claim
Do not deduct the

Name

Part 1: **Additional Page**

	value of collateral.	supports this claim
Describe debtor's property that is subject to a lie	n	
Collateral package described in Series 2015 California Public Revenue Notes	\$ 160,000,000.00	\$ Unknown
ealth Describe the lien		
Series 2015 California Public Revenue Notes	_	
Is the creditor an insider or related party?		
 _		
Is anyone else liable on this claim?		
 No ✓ Yes. Fill out Schedule H: Codebtors(Official Follow) 	rm 206H).	
	200. 17.	
As of the petition filing date, the claim is: Check all that apply.		
the Unliquidated		
g this		
ors is		
	Collateral package described in Series 2015 California Public Revenue Notes Describe the lien	Series 2015 California Public Revenue Notes \$ 160,000,000.00

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Debtor: Verity Health System of California, Inc. Doc 513 Filed 10/15/18 Entered 10/15/18 16:07:25 Desc 18-20151

the previous page.

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 82 of 139 number (if known):

Column A

Amount of claim
Do not deduct the

value of collateral.

Column B

Value of collateral that supports this claim

Name

2

Part 1: **Additional Page**

Creditor's name	Describe debtor's property that is subject to a lie	n		
U.S. Bank National Association, as Master Trustee for the California Public	Collateral package described in Series 2017 California Public Revenue Notes	\$	21,000,000.00	\$ Unknow
Creditor's Name	-			
Creditor's mailing address				
Finance Authority Revenue Notes (Verity Health System) Series 2017A	Describe the lien			
Notice Name	Series 2017 California Public Revenue Notes	_		
633 West Fifth Street	_			
Street				
24th Floor	Is the creditor an insider or related party?			
	☑ No			
Los Angeles CA 90071	_ □ Yes			
City State ZIP Code				
Country	Is anyone else liable on this claim?			
Creditor's email address, if known	□ No			
	✓ Yes. Fill out Schedule H: Codebtors(Official For	m 206H,).	
Date debt was incurred 9/15/2017				
Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.			
Do multiple creditors have an interest in the same property?	☐ Contingent☐ Unliquidated☐ Disputed			
☑ No				
Yes. Have you already specified the relative priority?				
 No. Specify each creditor, including this creditor, and its relative priority. 				
Yes. The relative priority of creditors is specified on lines	-			
☐ Yes. The relative priority of creditors is specified on lines Principal amount listed above	_			

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Debtor:

Verity Health System of California, Inc.

Principal amount listed above

Main Document

Copy this page only if more space is needed. Continue numbering the lines sequentially from

Page 83 of 139 number (if known):

Column A

Amount of claim

Column B

Value of collateral that

Name

Additional Page Part 1:

the previous page.

Do not deduct the supports this claim value of collateral. 2.57 Creditor's name Describe debtor's property that is subject to a lien U.S. Bank National Association, as Master Collateral package described in Series 2017 Trustee for the California Public 21,000,000.00 Unknown California Public Revenue Notes Creditor's Name Creditor's mailing address Finance Authority Revenue Notes (Verity Health System) Series 2017B Describe the lien Notice Name Series 2017 California Public Revenue Notes 633 West Fifth Street Street 24th Floor Is the creditor an insider or related party? ✓ No Los Angeles 90071 CA Yes City ZIP Code State Is anyone else liable on this claim? Country Creditor's email address, if known \checkmark Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 12/28/2017 As of the petition filing date, the claim is: Last 4 digits of account Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? Disputed \checkmark Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. ☐ Yes. The relative priority of creditors is specified on lines

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Debtor:

Part 1:

Name

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from Column A Column B the previous page. Amount of claim Value of collateral that Do not deduct the supports this claim value of collateral. 2.58 Creditor's name Describe debtor's property that is subject to a lien UMB Bank N.A., as successor Master Trustee Unknown for the California Statewide Communities 259,445,000.00 Series 2005 Bonds Creditor's Name Creditor's mailing address **Development Authority Revenue Bonds** (Daughters of Charity Health System), Series 2005A, G and H Describe the lien Series 2005 Bonds **UMB Financial Corporation** Street 1010 Grand Boulevard Is the creditor an insider or related party? ✓ No Kansas City MO 64106 ☐ Yes City ZIP Code State Is anyone else liable on this claim? Country Creditor's email address, if known Yes. Fill out Schedule H: Codebtors(Official Form 206H). Date debt was incurred 2/1/2005 Last 4 digits of account As of the petition filing date, the claim is: Check all that apply. number Contingent Do multiple creditors have an interest in the Unliquidated same property? Disputed \checkmark No Yes. Have you already specified the relative priority? ☐ No. Specify each creditor, including this creditor, and its relative priority. ☐ Yes. The relative priority of creditors is specified on lines Principal amount listed above

461,593,868.65

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional

Page, if any.

Part 2:

List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address			On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
California Public Finance Authority			Line 2.55	
Name				
Chairman			-	
Notice Name			=	
1400 Lacey Boulevard			_	
Street			-	
Hanford	CA	93230	-	
City	State	ZIP Code	-	
Country			-	
California Public Finance Authority			Line 2.56	
Name				
Chair			-	
Notice Name			-	
1400 Lacey Boulevard				
Street			-	
Hanford	CA	93230	-	
City	State	ZIP Code	-	
Country			-	
California Public Finance Authority			Line 2.57	
Name			_	
Chair				
Notice Name			-	
1400 Lacey Boulevard			-	
Street			-	
Hanford	CA	93230	-	
City	State	ZIP Code	-	
Country			-	

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Name				
California Statewide Communities Name	Development Authority		Line <u>2.58</u>	
Chairman				
Notice Name				
1100 K Street				
Street				
Sacramento	CA	95814		
City	State	ZIP Code		
Country				
Standard & Poors Ratings Service	es		Line 2.58	
Name				
Public Finance Department				
Notice Name				
55 Water Street Street				
New York	NY	10041-0003		
City	State	ZIP Code		
Country				
U.S. Bank National Association			Line 2.55	
Name				
Global Corporate Trust Services Notice Name				
633 W. Fifth Street, 24th Floor				
Street				
Los Angeles	CA	90071		
City	State	ZIP Code		
Occupation				
Country				
U.S. Bank National Association			Line <u>2.56</u>	
Name				
Global Corporate Trust Services Notice Name				
633 W. Fifth Street, 24th Floor				
Street				
Los Angeles	CA	90071 ZIP Code		
City	State	ZIP COde		
Country				

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Country

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Fill in this information to identify the case:		
Debtor Name: In re: Verity Health System of California, Inc.		
United States Bankruptcy Court for the: Central District of California		
Case number (if known): 18-20151 (EMR)		

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Dart 1	List All Creditors with PRIORITY Unsecured Claims
ı aıtı.	LIST All Greditors with PRIORITT Unsecured Claims

- 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).
 - ☐ No. Go to Part 2.
 - ✓ Yes. Go to Line 2.
- 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

				Total claim		Priority amo	unt
1 Priority credite	or's name ar	nd mailing address	As of the petition filing date, the claim is:	\$	619.56	\$	619.56
	County of San Bernardino		Check all that apply.				
Creditor Name			□ Contingent				
Office of the Tax			☐ Unliquidated				
Creditor's Notice name			✓ Disputed				
268 West Hospit	ality Lane, 1st	Floor	_				
Address			Basis for the claim:				
			Tax and Licenses	_			
			_				
San Bernardino	CA	92415	_				
City	State	ZIP Code					
Country			_				
Date or dates	debt was inc	curred					
Last 4 digits o	f account		_	Is the clain ✓ No	n subject	to offset?	
Specify Code	subsection o	of PRIORITY unsecui	red	□ Yes			
claim: 11 U.S.O	: 8 507(a) (8)						

Case 2:18-bk-20151-ER Doc 513 Filed 10/15/18 Entered 10/15/18 16:07:25 Desc Debtor: Verity Health System of California, Inc. Page 89 of 139 number (if known): Main Document 2.2 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$ 225.10 \$ 225.10 FRANCHISE TAX BOARD Check all that apply. Creditor Name □ Contingent □ Unliquidated Creditor's Notice name □ Disputed PO BOX 942857 Address Basis for the claim: Tax and Licenses **SACRAMENTO** 94257 CA State ZIP Code City Country Date or dates debt was incurred Last 4 digits of account Is the claim subject to offset? number ✓ No Specify Code subsection of PRIORITY unsecured ☐ Yes claim: 11 U.S.C. § 507(a) (8) As of the petition filing date, the claim is: \$ 2.3 Priority creditor's name and mailing address 1,040.00 \$ 1,040.00 Check all that apply. FRANCHISE TAX BOARD / 942857 Creditor Name □ Contingent □ Unliquidated Creditor's Notice name □ Disputed PO BOX 942857 Basis for the claim: Address Tax and Licenses **SACRAMENTO** CA 94257 State ZIP Code Country Date or dates debt was incurred Last 4 digits of account Is the claim subject to offset? number ✓ No Specify Code subsection of PRIORITY unsecured ☐ Yes

claim: 11 U.S.C. § 507(a) (8)

Case 2:18-bk-20151-ER Doc 513 Filed 10/15/18 Entered 10/15/18 16:07:25 Desc Debtor: Verity Health System of California, Inc. Page 90 of 139 number (if known): Main Document 2.4 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$ 3,525.39 \$ 3,525.39 FRANCHISE TAX BOARD / 942867 - PAYROLL Check all that apply. □ Contingent □ Unliquidated Creditor's Notice name □ Disputed P.O. BOX 942867 Address Basis for the claim: Tax and Licenses **SACRAMENTO** CA 94267-2021 State ZIP Code City Country Date or dates debt was incurred Last 4 digits of account Is the claim subject to offset? □ No number Specify Code subsection of PRIORITY unsecured ☐ Yes claim: 11 U.S.C. § 507(a) (8) 2.5 Priority creditor's name and mailing address 953,597.78 \$ As of the petition filing date, the claim is: \$ 953.597.78 Check all that apply. Los Angeles County Treasurer and Tax Collector Creditor Name □ Contingent □ Unliquidated Creditor's Notice name Disputed PO Box 54110 Basis for the claim: Address Tax and Licenses Los Angeles CA 90054 State ZIP Code Country Date or dates debt was incurred Last 4 digits of account Is the claim subject to offset? number ✓ No

☐ Yes

claim: 11 U.S.C. § 507(a) (<u>8</u>)

Specify Code subsection of PRIORITY unsecured

Part 2:

List All Creditors with NONPRIORITY Unsecured Claims

3.List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

				Amount of claim
Nonpriority creditor's name and mailing address See Schedule E/F, Part 2 Attachment		=	As of the petition filing date, the claim is: Check all that apply.	\$ 218,104,803.95
Creditor Name	le E/F, Fait 2 Attacrime	31IL		
			☐ Contingent	
			☐ Unliquidated	
Creditor's Notice	e name		☐ Disputed	
			Basis for the claim:	
Address				
			-	_
				
City	State	ZIP Code		
Country				
Date or dat	tes debt was incurr	ed	Is the claim subject to offset?	
			□ No	
Last 4 digits of account			□ Yes	
number				

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.
If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing add	ress		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
			Line	
Name			☐ Not Listed.Explain	
Notice Name				
Street				
City	State	ZIP Code		
Country				

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Total Amounts of the Priority and Nonpriority Unsecured Claims.

Total of claim amounts

5a. Total claims from Part 1

5b. Total claims from Part 2

5b. + \$ 218,104,803.95

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

219,063,811.78

Fill in this information to identify the case:
Debtor Name: In re: Verity Health System of California, Inc.
United States Bankruptcy Court for the: Central District of California
Case number (if known): 18-20151 (EMR)

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

- 1. Does the debtor have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 - ☑ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets Real and Personal Property* (Official Form 206A/B).

2.	List all contracts and unexpired le	ases	State the name and maili whom the debtor has an lease		
	2.1 State what the contract or lease is for and the nature		See Schedule G Attachmen	nt	
	of the debtor's interest		Name		
			Notice Name		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			City	State	ZIP Code
			Country		

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Fill in this information to identify the case:
Debtor Name: In re : Verity Health System of California, Inc.
United States Bankruptcy Court for the: Central District of California
Case number (if known): 18-20151 (EMR)

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

- Does the debtor have any codebtors?
 - □ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 - Ye
- In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

	Column 1: Codebtor				Column 2: Creditor	
	Name	Mailing address			Name	Check all schedules that apply:
2.1	See Schedule H Attachment					□D
		Street				
					-	□ E/F
						□G
					-	
		City	State	ZIP Code	-	
		Country				

Official Form 206H Schedule H: Codebtors Page 1 of 1

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Fill in this information to identify the case:

Debtor Name: In re: Verity Health System of California, Inc.

United States Bankruptcy Court for the: Central District of California

Case number (if known): 18-20151 (EMR)

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNIN connecti 1519, an

357	ith a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 71.
De	Cidiation and Signature
	the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another vidual serving as a representative of the debtor in this case.
ha	ve examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:
V	Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)
Ø	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
Z	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
Ø	Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
7	Schedule H: Codebtors (Official Form 206H)
7	Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
1	Amended Schedule
]	Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
]	Other document that requires a declaration
	clare under penalty of perjury that the foregoing is true and correct. cuted on 10/15/2018 MM / DD / YYYYY Signature of individual signing on behalf of debtor Richard G. Adcock
	Richard G. Adcock Printed name
	Chief Executive Officer
	Position or relationship to debtor

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Case No. 18-20151

Schedule A/B 3

Checking, savings, money market, or financial brokerage accounts

Name of institution (bank or		Account number	Current value of
brokerage firm)	Type of account	(last 4 digits)	debtor's interest
Bank of America	Checking	6440	\$7,083,268.79
Bank of America	Checking	1785	\$245,545.50
Bank of America	Checking	9250	\$200,272.78
Bank of America	Checking	2889	\$0.00
Wells Fargo	Checking (Restricted Funds)	0300	\$2,000,000.00
Wells Fargo	Checking (Restricted Funds)	8703	\$20,742,893.17
Wells Fargo	Checking (Restricted Funds)	8803	\$800,500.00
Wells Fargo	Checking (Restricted Funds)	8903	\$882,500.00
		TOTAL:	\$31,954,980.24

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Case No. 18-20151

Schedule A/B 7

Deposits, including security deposits and utility deposits

Description	Name of holder of deposit	Current value of debtor's interest
Initial Funding	Healthnow Prefunding	\$562,000.00
Other Operation Expenses	Daughters of Chrity Ministry Service Corp	\$7,275.09
Professional Services	Cain Brothers Retainer	\$50,000.00
Professional Services	Deloitte	\$250,000.00
Professional Services	Moss Adams LLP	\$1,673.68
Professional Services	Paul Bucha	\$5,000.00
	TOTAL:	\$875,948.77

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Case No. 18-20151

Schedule A/B 8 Prepayments

		Current value of
Description	Name of holder of prepayment	debtor's interest
Prepaid Insurance	AON Bermuda	\$952,688.74
Prepaid Purchase Services	3M	\$223,415.31
Prepaid Purchase Services	Armature	\$17,712.05
Prepaid Purchase Services	Axion	\$55,561.27
Prepaid Purchase Services	Blackbaud	\$32,727.30
Prepaid Purchase Services	Bottomline	\$13,874.14
Prepaid Purchase Services	Cirius	\$4,082.53
Prepaid Purchase Services	Citrix	\$223,460.39
Prepaid Purchase Services	Data Archiving	\$37,500.00
Prepaid Purchase Services	Dell	\$83,737.50
Prepaid Purchase Services	ECRI	\$43,216.00
Prepaid Purchase Services	Good Tech	\$2,669.97
Prepaid Purchase Services	Healthstream	\$106,998.37
Prepaid Purchase Services	Host Analytics	\$50,685.09
Prepaid Purchase Services	Huron	\$37,500.00
Prepaid Purchase Services	Infinium	\$80,507.30
Prepaid Purchase Services	Kronos	\$25,453.25
Prepaid Purchase Services	Lockton	\$140,000.00
Prepaid Purchase Services	LVM Systems	\$48,136.00
Prepaid Purchase Services	Mcafee	\$38,256.75
Prepaid Purchase Services	MCG Clinical	\$128,948.44
Prepaid Purchase Services	Mckesson	\$5,819.15
Prepaid Purchase Services	Mediware	\$83,252.80
Prepaid Purchase Services	More Direct dba Connection	\$75,227.00
Prepaid Purchase Services	Nanthealth	\$80,955.20
Prepaid Purchase Services	Navex Corp	\$20,606.67
Prepaid Purchase Services	Pharmacy One Source	\$20,362.27
Prepaid Purchase Services	Pharmacy One Source - Sentri7	\$69,785.65
Prepaid Purchase Services	Philips Healthcare Intelli Space	\$143,421.84
Prepaid Purchase Services	Phillips	\$35,855.46
Prepaid Purchase Services	Picis	\$249,253.65
Prepaid Purchase Services	Quadramed	\$218,954.11
Prepaid Purchase Services	Quest Diagnostics	\$9,814.80
Prepaid Purchase Services	RL Solutions	\$26,805.17

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Case No. 18-20151

Schedule A/B 8 Prepayments

		Current value of
Description	Name of holder of prepayment	debtor's interest
Prepaid Purchase Services	RL Solutions	\$3,655.25
Prepaid Purchase Services	Sunquest Information Systems	\$78,437.75
Prepaid Purchase Services	Surgical Information Systems	\$226,499.78
Prepaid Purchase Services	Surgical Information Systems	\$82,131.95
Prepaid Purchase Services	Truven	\$66,694.34
Prepaid Purchase Services	Verge Solutions	\$18,934.02
Prepaid Purchase Services	Vision Solutions	\$10,740.30
Prepaid Purchase Services	Voicebrook	\$16,451.75
Prepaid Purchase Services	VOX	\$46,162.96
Prepaid Purchase Services	Workday	\$199,237.50
Prepaid Service	Sedgwick	\$642.06
Prepaid Supplies	Cardinal	\$918,641.28
	TOTAL	\$5,055,473.11

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Case No. 18-20151

Schedule A/B 11a

Accounts receivable, 90 days old or less

		Doubtful or uncollectible	Current value of
Description	Face amount	accounts	debtor's interest
IC AR due from O'Connor Hospital	\$6,108,111.00	\$0.00	\$6,108,111.00
IC AR due from O'Connor Hospital Foundation	\$70,533.00	\$0.00	\$70,533.00
IC AR due from Saint Louise Regional Hospital Foundation	\$78,768.00	\$0.00	\$78,768.00
IC AR due from Seton Medical Center	\$8,359,022.00	\$0.00	\$8,359,022.00
IC AR due from Seton Medical Center Foundation	\$62,301.00	\$0.00	\$62,301.00
IC AR due from St. Francis Medical Center of Lynwood Foundation	\$116,378.00	\$0.00	\$116,378.00
IC AR due from St. Vincent Foundation	\$29,953.00	\$0.00	\$29,953.00
IC AR due from St. Vincent Medical Center	\$13,984,074.00	\$0.00	\$13,984,074.00
IC AR due from Verity Business Services	\$766,391.00	\$0.00	\$766,391.00
Other Receivables	\$886,077.23	\$0.00	\$886,077.23
TOTAL:	\$30,461,608.23	\$0.00	\$30,461,608.23

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Case No. 18-20151

Schedule A/B 11b

Accounts receivable, Over 90 days old

		Doubtful or uncollectible	Current value of
Description	Face amount	accounts	debtor's interest
IC AR due from O'Connor Hospital	\$171,006,930.00	\$0.00	\$171,006,930.00
IC AR due from O'Connor Hospital Foundation	\$493,279.00	\$0.00	
IC AR due from Saint Louise Regional Hospital	\$53,558,569.00	\$0.00	\$53,558,569.00
IC AR due from Saint Louise Regional Hospital Foundation	\$456,988.00	\$0.00	\$456,988.00
IC AR due from Seton Medical Center	\$123,650,789.00	\$0.00	\$123,650,789.00
IC AR due from Seton Medical Center Foundation	\$386,861.00	\$0.00	\$386,861.00
IC AR due from St. Francis Medical Center of Lynwood Foundation	\$634,100.00	\$0.00	\$634,100.00
IC AR due from St. Vincent Foundation	\$652,712.00	\$0.00	\$652,712.00
IC AR due from St. Vincent Medical Center	\$123,539,837.00	\$0.00	\$123,539,837.00
IC AR due from Verity Business Services	\$15,708,676.00	\$0.00	\$15,708,676.00
TOTAL:	\$490,088,741.00	\$0.00	\$490,088,741.00

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Case No. 18-20151

Schedule A/B 15

Non-publicly traded stock and interests

		Valuation method used	Current value of
Name of entity	% of ownership	for current value	debtor's interest
Beverly Hills Multispecialty Surgical Center, LLC	5.00%	Book value	\$5,000
De Paul Ventures, LLC	100.00%		Unknown
Marillac Insurance Company, Ltd.	100.00%	Book value	\$5,363,180
O'Connor Hospital	100.00%		Unknown
		Value estimated based on	
Premier, Inc.	0.28%	value of common shares	\$3,101,991
Saint Louise Regional Hospital	100.00%		Unknown
Seton Medical Center	100.00%		Unknown
St. Francis Medical Center	100.00%		Unknown
St. Vincent Medical Center	100.00%		Unknown
Verity Business Services	100.00%		Unknown
Verity Holdings, LLC	100.00%		Unknown
Verity Medical Foundation	100.00%		Unknown
		TOTAL:	\$8,470,171.00

Case No. 18-20151

Schedule A/B 61

Internet domain names and websites

	Net book value of	Valuation method	
	debtor's interest	used for current	Current value of
Description	(where available)	value	debtor's interest
acousticneuromasvmc.com	Unknown		Unknown
acousticneuromasvmc.net	Unknown		Unknown
acousticneuromasvmc.org	Unknown		Unknown
asianpacificlivercenter.com	Unknown		Unknown
asianpacificlivercenter.net	Unknown		Unknown
asianpacificlivercenter.org	Unknown		Unknown
dchsaccess.org	Unknown		Unknown
dchspacs.org	Unknown		Unknown
depaulhealthcenter.com	Unknown		Unknown
depaulhealthcenter.net	Unknown		Unknown
depaulhealthcenter.org	Unknown		Unknown
depaulurgentcare.com	Unknown		Unknown
depaulurgentcare.net	Unknown		Unknown
depaulurgentcare.org	Unknown		Unknown
depaulurgentcarecenter.com	Unknown		Unknown
depaulurgentcarecenter.net	Unknown		Unknown
depaulurgentcarecenter.org	Unknown		Unknown
dochs.net	Unknown		Unknown
dochs.org	Unknown		Unknown
jri-docs.com	Unknown		Unknown
myverity.org	Unknown		Unknown
myveritybenefits.com	Unknown		Unknown
myveritybenefits.net	Unknown		Unknown
myveritybenefits.org	Unknown		Unknown
ochdocs.com	Unknown		Unknown
ochdocs.net	Unknown		Unknown
ochdocs.org	Unknown		Unknown
ochfoundation.com	Unknown		Unknown
ochfoundation.net	Unknown		Unknown
ochfoundation.org	Unknown		Unknown
ochlibrary.org	Unknown		Unknown
oconnorhospital.com	Unknown		Unknown
oconnorhospital.net	Unknown		Unknown
oconnorhospital.org	Unknown		Unknown
organtransplant.com	Unknown		Unknown
organtransplants.com	Unknown		Unknown
saintlouisehospital.com	Unknown		Unknown
saintlouisehospital.net	Unknown		Unknown
saintlouisehospital.org	Unknown		Unknown
saintlouiseregional.com	Unknown		Unknown
saintlouiseregional.org	Unknown		Unknown
saintlouiseregionalhospital.com	Unknown		Unknown
saintlouiseregionalhospital.org	Unknown		Unknown
setoncoastside.com	Unknown		Unknown
setoncoastside.org	Unknown		Unknown
setonfoundation.org	Unknown		Unknown
setonlibrary.org	Unknown		Unknown

Case No. 18-20151

Schedule A/B 61

Internet domain names and websites

	Net book value of	Valuation method	
	debtor's interest	used for current	Current value of
Description	(where available)	value	debtor's interest
setonmedicalcenter.com	Unknown		Unknown
setonmedicalcenter.net	Unknown		Unknown
setonmedicalcenter.org	Unknown		Unknown
setonmedicalcentercoastside.com	Unknown		Unknown
setonmedicalcentercoastside.net	Unknown		Unknown
setonmedicalcentercoastside.org	Unknown		Unknown
sfmccharityball.com	Unknown		Unknown
sfmccharityball.net	Unknown		Unknown
sfmccharityball.org	Unknown		Unknown
sfmcfoundation.com	Unknown		Unknown
sfmcfoundation.net	Unknown		Unknown
sfmcfoundation.org	Unknown		Unknown
sfmclibrary.org	Unknown		Unknown
slrhfoundation.com	Unknown		Unknown
slrhfoundation.net	Unknown		Unknown
slrhfoundation.org	Unknown		Unknown
stfrancismedicalcenter.com	Unknown		Unknown
stfrancismedicalcenter.net	Unknown		Unknown
stfrancismedicalcenter.org	Unknown		Unknown
stlouisehospital.com	Unknown		Unknown
stlouisehospital.net	Unknown		Unknown
stlouisehospital.org	Unknown		Unknown
stlouiseregionalhospital.com	Unknown		Unknown
stlouiseregionalhospital.net	Unknown		Unknown
stlouiseregionalhospital.org	Unknown		Unknown
stvincentbrain.com	Unknown		Unknown
stvincentbrain.net	Unknown		Unknown
stvincentbrain.org	Unknown		Unknown
stvincentmedicalcenter.com	Unknown		Unknown
stvincentmedicalcenter.net	Unknown		Unknown
stvincentmedicalcenter.org	Unknown		Unknown
stvincentmedicalcenterkorean.com	Unknown		Unknown
stvincentmedicalcenterkorean.net	Unknown		Unknown
stvincentmedicalcenterkorean.org	Unknown		Unknown
stvincenttransplant.com	Unknown		Unknown
stvincenttransplant.net	Unknown		Unknown
stvincenttransplant.org	Unknown		Unknown
svmcfoundation.com	Unknown		Unknown
svmcfoundation.net	Unknown		Unknown
svmcfoundation.org	Unknown		Unknown
svmcmedlibrary.org	Unknown		Unknown
togetherwithverity.com	Unknown		Unknown
togetherwithverity.net	Unknown		Unknown
togetherwithverity.org	Unknown		Unknown
verity.org	Unknown		Unknown
verityhealth.net	Unknown		Unknown
TOTAL:	Unknown	TOTAL:	Unknown

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Case No. 18-20151 Schedule E/F. Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

										Subject to offset (Y/N)	Unliquidated	Amount of claim
Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country Date in	curred Basis for claim	offset (Y/N) ວັ	ם כ	Amount of claim
3.1	360 MANAGEMENT GROUP LLC		655 NORTH CENTRAL AVE		GLENDALE	CA	91203		Trade	N		\$2,100.00
3.2	360 SUPPORT SERVICES INC		P.O. BOX 801238		SANTA CLARITA	СА	91380-1238		Trade	N I		\$2,500.00
3.3	ABILITY NETWORK, INC.		P.O. BOX 856015		MINNEAPOLIS	MN	55485-6015		Trade	N		\$9,055.41
	·											
3.4	ACCESS COMMUNICATIONS INC		976 RINCON CIRCLE		SAN JOSE	CA	95131		Trade	N		\$2,200.93
3.5	ACCESS TELECOMM FORMERLY ACCESS COMMUNIC		976 RINCON CIRCLE		SAN JOSE	CA	95131		Trade	N		\$29,551.06
3.6	ACCOUNTEMPS	FILE 73484	PO BOX 6000		SAN FRANCISCO	CA	94160-3484		Trade	N		\$5,031.41
					01110165	l						
3.7	ALLSCRIPTS LLC		24630 NETWORK PLACE		CHICAGO	IL	60673-1246		Trade	N		\$4,057,624.44
3.8	ALSTON AND BIRD LLP ALTSEARCH RECRUITMENT		P.O. BOX 933124	+	ATLANTA	GA	31193-3124		Trade	N		\$37,449.18
3.9	CONSULTANTS CORP		300 EAST 56TH STREET	SUITE 16A	NEW YORK	NY	10022		Trade	N		\$32,650.00
3.10	AMAZON WEB SERVICES INC		P.O.BOX 84023	COTTE TOX	SEATTLE	WA	98124-8423		Trade	N		\$79.80
3.11	AMERICAN EXPRESS	CPC REMITTANCE PROCESSING	1801 NW 66TH AVE	STE 103C	PLANTATION	FL	33313-4571		Trade	N		\$14,257.09
0.40	AMERICAN TECHNOLOGY		4040 O NA DED DIVID	SUITE 119-	NADED) (III E	l	00540		T			0574.45
3.12	SOLUTIONS AMERICAN TOWER		1212 S NAPER BLVD 116 HUNTINGTON AVE.	201	NAPERVILLE	IL	60540		Trade	N		\$574.15
3.13	CORPORATION		11TH FLOOR 2040 EAST MARIPOSA		BOSTON	MA	02116		Trade	N		\$762.55
3.14	ARMADA ANTHONY		AVENUE	APT A	EL SEGUNDO	CA	90245		Employee Expense	N		\$1,802.03
3.15	AT & MOBILTY(FOMERLY CINGULAR WIRELESS)		PO BOX 6463		CAROL STREAM	l.,	60197-6463		Utilities	N I		\$170.80
3.16	AT T		PO BOX 105414		ATLANTA	GA	30348-5414		Utilities	N		\$147,878.92
5.10	AT T INTERSTATE DEDICATED		1 O BOX 100414		AILANIA	- OA	30340 3414		Otilides	11		ψ147,070.32
3.17	PRIVATE		PO BOX 5019		CAROL STREAM	IL	60197		Utilities	N		\$59,169.75
	AT T TELECONFERENCE											
3.18	SERVICES		P.O. BOX 5002		CAROL STREAM	IL	60197-5002		Utilities	N		\$5.60
0.40	ATHLETIC AWARDS CO INC		817 REPUBLICAN STREET		SEATTLE	WA	98109-4715		Trade	N		£4.070.05
3.19	AXION HEALTH INC		1101 W 120TH AVE	SUITE 315	BROOMFIELD	CO	80021		Trade	N		\$1,676.85 \$74,081.70
5.20	BAKER DONELSON BEARMAN		TIOT W IZOTITAVE	00112 313	DICOOMI ILLD	00	00021		Trade	14		Ψ14,001.70
3.21	CALDWELL AND BERK	BERKOWITZ, PC	100 LIGHT STREET		BALTIMORE	MD	21202		Trade	N		\$2,633.00
3.22	BARBOZA AND ASSOCIATES	A LAW CORPORATION	660 S FIGUEROA ST	SUITE 1620	LOS ANGELES	CA	90017		Trade	N		\$3,395.00
2 22	BAY AREA EVENT LIGHTS DBA HOLIDAY LIGHTS	DBA BAY AREA EVENT LIGHTS	102 MODDIS I AND		CAMPBELL	CA	95008		Trade	N I		£4.070.00
3.23	BENCH TEK SOLUTIONS LLC	LIGHTS	192 MORRIS LANE 525 ALDO AVENUE	+	SANTA CLARA	CA	95008		Trade	N N		\$1,270.00 \$2,495.81
5.27	BEYOND CONSULTING		OLO ALDO AVEITOL	+	CANTA OLAKA	JA	55054		Trade	14		Ψ2,733.01
3.25	SOLUTIONS INC		RR2		DUFFIELD	AB	TOE ONO	CANADA	Trade	N		\$60,000.00
	BLUE 22 PHOTOGRAPHY (HAENG											
3.26	IL NAM)		3871 W. 6TH STREET		LOS ANGELES	CA	90020		Trade	N		\$60.00
3.27	BROWN RUDNICK LLP		P.O. BOX 52257		BOSTON	MA	02205		Trade	N		\$25,000.00
2 20	CALIFORNIA PUBLIC FINANCE AUTHORITY		2999 OAK ROAD, SUITE 710		WALNUT ORES	CA	94597		Trado	N		\$525.00
3.28	AUTHURIT	ļ	/ 10	1	WALNUT CREEK	CA	94097	+	Trade	IN		\$5∠5.00

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Case No. 18-20151 Schedule E/F. Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

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Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)	Conting	Unliqui	Dispute	Amount of claim
			1344 MOUNT PLEASANT		T00011T0								i		
3.29	CANADIAN TRAVEL NURSES CAPTURE TECHNOLOGIES. INC		ROAD 2617 K STREET		TORONTO SACRAMENTO	ON CA	M4N 2T3 95816	CANADA		Trade Trade	N N		\vdash	Н	\$27,279.46 \$910.21
5.50	OAL TOKE TEOLINGEOGIEG, INC		3963 ENTERPRISE		OAORAWENTO	OA .	33010			Trade	14		\Box	\Box	ψ310.21
3.31	CASTLE SERVICES		AVENUE		NAPLES	FL	34104			Trade	N				\$1,200.00
			200 N. MILWAUKEE		VED.101111110	l					l		i l		
3.32	CDW COMPUTER CENTERS INC		AVENUE 200 NORTH MILWAUKEE		VERNON HILLS	IL	60061			Trade	N		\vdash	\vdash	\$42,236.11
3.33	CDW GOVERNMENT INC		AVE.		VERNON HILLS	IL	60061			Trade	N		i l		\$781,141.39
													i	\Box	,
3.34	CERESOFT		1738 ELTON ROAD	SUITE 121	SILVER SPRING	MD	20903			Trade	N		\longmapsto	igspace	\$3,440.38
3.35	CERNER HEALTH SERVICES INC FORMERLY SIEM	C/O US BANK	P.O. BOX 959167		ST LOUIS	МО	63195-9167			Trade	N		i l	ı l	\$39,471.29
3.33	FORMERLY SIEW	C/O OS BAINK	1215 K STREET SUITE		31 LOUIS	IVIO	63195-9167			Trade	IN		\vdash	ightharpoonup	\$39,471.29
3.36	CHA PUBLICATION SALES		800		SACRAMENTO	CA	95814			Trade	N		i l		\$365.00
	CHANGE HEALTHCARE FORMELY													\Box	
3.37	EMDEON		P.O. BOX 572490 400 ATLANTIC STREET.		MURRAY	UT	84157-2490			Trade	N		\vdash	$\vdash \vdash$	\$11,440.93
3.38	CHARTER COMMUNICATIONS		10TH FLOOR		STAMFORD	СТ	06901			Trade	N		i l		\$1,612.75
				1000 FOURTH STREET											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3.39	CHRISTOPHER STEELE	C/O NATHANIEL LEEDS	BRENT & FIOL LLP	SUITE 750	SAN RAFAEL	CA	94901		4/13/2017	Professional Liability	N	X	X :	Х	Unknown
3.40	CICNA HEALTHCARE		P O BOX 182223		CHATTANIOOCA	TNI	27422 7222			Trade	N		i l	ı l	¢10 221 92
3.40	CIGNA HEALTHCARE		2300 CONTRA COSTA		CHATTANOOGA	IIN	37422-7223			Trade	IN		\vdash	\vdash	\$10,231.83
3.41	CIRIUS GROUP, INC.		BLVD.	SUITE 250	PLEASANT HILL	CA	94523			Trade	N		i l		\$11,270.00
	CKR INTERACTIVE DBA C K R		399 NORTH THIRD										П	\Box	
3.42	GROUP INC		STREET		CAMPBELL	CA	95008			Trade	N		\vdash	\vdash	\$24,900.00
3.43	CLINICOMP INTL INC		9655 TOWNE CENTRE DR		SAN DIEGO	CA	92121			Trade	N		i l		\$51,932.00
3.44	CO ARCHITECTS		5055 WILSHIRE BLVD	9TH FLOOR	LOS ANGELES	CA	90036			Trade	N			\Box	\$185,940.75
			62157 COLLECTIONS										ı	П	
3.45	CONCUR TECHNOLGIES, INC.		CENTER DR.		CHICAGO	IL	60693			Trade	N		\vdash	\vdash	\$4,729.96
3.46	CONDADO GROUP INC		1321 BURLINGAME STREET	SUITE M	KANSAS CITY	МО	64116			Trade	N		i l		\$3,900.00
0.10	CONNECTION DBA MORE DIRECT		011121	552			00			11445	1			\Box	ψο,σσσ.σσ
3.47	INC		4800 T-REX AVENUE	SUITE 300	BOCA RATON	FL	33431			Trade	N		ш	\square	\$45,309.03
0.40	CUSHMAN AND WAKEFIELD CA		1350 BAYSHORE	CLUTE OOO	DUDUNGAME		04040			Totale			i l		CO 044 74
3.48	INC		HIGHWAY	SUITE 900	BURLINGAME	CA	94010			Trade	N		\vdash	\vdash	\$9,914.74
			2040 EAST MARIPOSA	1						Employee Claim (amount			i l	ı İ	l L
3.49	DAVID BAGSHAW		AVENUE		EL SEGUNDO	CA	90245			over \$12,850 cap)	N				\$886.34
			000 DEDWOOD 01105-5		·								ıΠ	П	
3.50	DE PAUL VENTURES, LLC		203 REDWOOD SHORES PARKWAY, SUITE 800		REDWOOD CITY	CA	94065			Intercompany Payable	\ <u></u>		i l	ı İ	\$2,888,000.00
3.51	DELOITTE TOUCHE LLP		P.O. BOX 844708		DALLAS	TX	75284-4708			Trade	N		\vdash	\vdash	\$137,477.50
					SAN									\Box	, ,
3.52	DELTA DENTAL CA		PO BOX 44460		FRANCISCO	CA	94144			Trade	N		ш	ш	\$441,997.04

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Case No. 18-20151 Schedule E/F, Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)	Contingent Unliquidated	Disputed	Amount of claim
	DIAMOND QUALITY PRINTING,		Tiddi 000 i	7.44.000 _			p						ī	7 till Guille Grand
3.53	INC.		1465 MONTEREY ROAD		SAN JOSE	CA	95110			Trade	N			\$7,448.62
			0040 5407 144 515004							5 I Olvin (
3.54	DONALD FROST		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N			\$2,224.60
3.54	DONALD FROST		2040 EAST MARIPOSA		EL SEGUNDO	CA	90245			over \$12,000 cap)	IN		-	\$2,224.00
3.55	DONNA LIMAR		AVENUE		EL SEGUNDO	CA	90245			Workers Compensation	N ,	x x	l _x	Unknown
3.33	DONNA LIWAN		AVENOL		LL SLGONDO	CA	30243			Workers Compensation	in /	^ /^		OTIKITOWIT
3.56	DOUGLAS L PECK PHOTOGRAPHY		P.O. BOX 689		MENLO PARK	CA	94026			Trade	N			\$225.00
					SAN	-								
3.57	DOWNEY BRAND LLP		455 MARKET STREET	SUITE 1500	FRANCISCO	CA	94105			Trade	N			\$375.00
	EAST END TRANSFER & STORAGE													
3.58	INC		5607 CAVANAUGH		HOUSTON	TX	77021			Trade	N			\$110,472.70
	EDELMAN DBA DANIEL J										l			
3.59	EDELMAN INC	JP MORGAN CHASE NA	21992 NETWORK PLACE		CHICAGO	IL	60673-1219			Trade	N			\$7,414.77
3.60	EFAXCOM		6922 HOLLYWOOD BLVD	SUITE 500	HOLLYWOOD	CA	90028			Trade	N			\$10,020.50
3.00	EFAXCOIVI		0922 HOLL I WOOD BLVD	3011E 300	HOLLTWOOD	CA	90026			Traue	IN			\$10,020.50
			2040 EAST MARIPOSA							Employee Claim (amount				
3.61	ELSPETH PAUL		AVENUE		EL SEGUNDO	CA	90245			over \$12,850 cap)	N			\$14,457.68
3.62	EMPLOYMENT DEV/826219		P.O. BOX 826219		SACRAMENTO	CA	94230-6219			Trade	N			\$7,151.00
	EPIQ SYSTEMS CORPORATE													
3.63	SERVCIES DBA EPIQ	DEPT 0286	P.O. BOX 120286		DALLAS	TX	75312-0286			Trade	N			\$497.00
			4252 SOLUTIONS											
3.64	EQUINIX INC		CENTER		CHICAGO	IL	60677-4002			Trade	N			\$30,316.18
3.65	ERNEST KHAW		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N			\$5,903.32
										. , , , ,				
3.66	EXCEL OFFICE SERVICES CORP		12031 JEFFERSON BLVD		CULVER CITY	CA	90230			Trade	N			\$1,573.21
	EXPERIAN HEALTH FORMERLY													
3.67	PASSPORT HEALTH	C/O EXPERIAN	P.O. BOX 886133		LOS ANGELES	CA	90088-6133			Trade	N			\$51,592.02
3.68	EXPERIAN INC		475 ANTON BLVD.		COSTA MESA	CA	92626			Trade	N			\$600.00
3.69	FAITH PROTSMAN MD FERNIES ELECTRIC		700 W 6TH ST C 5239 KATELLA RD		GILROY SOUTH GATE	CA	95020 90280			Trade Trade	N N			\$2,550.00 \$2,664.37
3.70		WEISSBURG &	2029 CENTURY PARK E.,		SOUTH GATE	CA	90260			Trade	IN		-	\$2,004.37
3.71	LAW	ARONSON	35TH FLR		LOS ANGELES	CA	90067-3000			Trade	N			\$5,212.55
3.72	FRANKS GARDEN FLORIST	7.1.1011.0011	401 1ST STREET		GILROY	CA	95020			Trade	N		+	\$450.00
	FRONTIER COMMUNICATIONS													,
3.73	DBA FRONTIER CAL		P.O. BOX 740407		CINCINNATI	ОН	45274-0407			Utilities	N			\$6,388.95
3.74	FTG BUILDERS INC		2975 SCOTT BLVD.	SUITE 100	SANTA CLARA	CA	95054			Trade	N			\$5,972.00
3.75	GALLUP INC		P.O. BOX 310284		DES MOINES	IA	50331-0284			Trade	N			\$67,500.00
0.70	OF MED 0//0 INIEG 750: 110: 50:	TEOLINO, 00:50 :::	5517 COLLECTIONS		01110466	l	00000			T 1	<u> </u>			
3.76		TECHNOLOGIES INC	CENTER DR		CHICAGO	IL CA	60693			Trade	N N			\$11,962.00
3.77	GILROY FLOWER SHOP		47 5TH ST	1	GILROY SAN	CA	95020		-	Trade	IN	-	-	\$64.50
3.78	GOLDSTONE JERRY P		415 EUCLID AVENUE	# 10	FRANCISCO	CA	94118			Trade	N I			\$1,070.00
5.70	COLDO, ONE CENTRAL		LOOLID / WEITOL	10		10,1	7110			1	ļ.,	-		ψ1,070.00
			2040 EAST MARIPOSA							Employee Claim (amount				
3.79	GRACE WANG		AVENUE		EL SEGUNDO	CA	90245			over \$12,850 cap)	N			\$3,145.62

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Case No. 18-20151 Schedule E/F, Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

											Subject to offset (Y/N)	ngent	Unliquidated	ited	
Line	Nonpriority Creditor's Name	Creditor Notice Name		Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)	Conti	Unliq	Dispu	Amount of claim
0.00	GRANITE TELECOMMUNICATIONS		100 NEWPORT AVE		OLUNIOV.		00474			I tere					017.004.04
3.80	LLC GRAY BRYAN LEE		EXTENSION 24206 S 183RD PLACE		QUINCY GILBERT	MA AZ	02171 85298			Utilities Trade	N N				\$17,664.31 \$23,767.43
3.01	GRM INFORMATION		24200 3 163KD FLACE		GILDENI	AZ	03290			Trade	IN				φ23,707.43
3.82	MANAGEMENT SRVS LLC		P O BOX 748814		LOS ANGELES	CA	90074-8814			Trade	N				\$14,288.33
3.83	HANSON BRIDGETT, LLC		425 MARKET ST	26TH FLR	SAN FRANCISCO	CA	94105			Trade	N				\$136.50
3.84	HEALTHNOW ADMINISTRATIVE SERVICES		801 LAKEVIEW DR	STE 301	BLUE BELL	PA	19422			Trade	N				\$2,123,516.39
5.04	GERVIOLO		OUT EARL VIEW BIX	012 301	DEOL BLLL	17	13422				14				Ψ2,123,310.33
3.85	HELEN LAM		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N				\$4,406.98
2.06	HENRY NGAIN CHOW (DECEASED) BY AND THROUGH SUSAN CHAN CHOW (SPOUSE) &		4662 4/2 CODIEZ ST		LOS ANCELES	CA	00036		44/6/0045	Drafaccional Liability	N	v	~		Hele
3.86	LINDSEY CHOW (DAUGHTER)		1662-1/2 CORTEZ ST.		LOS ANGELES	CA	90026		11/6/2015	Professional Liability	N	Х	Х	X	Unknown
	HERITAGE PROVIDER NETWORK				NORTHRIDGE,										
3.87	(REGAL MEDICAL GROUP)		8510 BALBOA BLVD. #150		CA 91325	CA	91325			Risk Sharing Liability	N		Χ	Х	\$6,198,736.00
3.88	HODGES MACE LLC		P.O. BOX 117163		ATLANTA	GA	30368-7163			Trade	N				\$47,012.00
3.89	HOOPER LUNDY BOOKMAN PC	WATT PLAZA	1875 CENTURY PARK EAST	STE 1600	LOS ANGELES	CA	90067-2799			Trade	N				\$22,335.98
3.90	HOSPITAL ASSOC OF SO CA	LISA KATO, ADMIN ASST	515 S FIGUEROA ST	SUITE 1300	LOS ANGELES	CA	91199-1361			Trade	N				\$210,355.74
3.91	HSS INC		PO BOX 17033		DENVER	CO	80217			Trade	N				\$42,480.00
	HUNTINGTON TECHNOLOGY														
3.92	FINANCE INC FORERL		L - 3708		COLUMBUS	OH	43260-3708			Trade	N				\$224,700.00
3.93	IDSHOP INC DBA LAMINEX INC		P.O. BOX 49457		GREENWOOD	SC	29649			Trade	N				\$3,400.00
3.94	IFERT LIESL		2171 SPRUCE DRIVE		HOLLISTER	CA	95023			Trade	N				\$6.50
	INSIGHT STRUCTURAL		855 NORTH DOUGLAS												
3.95	ENGINEERS INC		STREET		EL SEGUNDO	CA	90245			Trade	N				\$14,968.73
3.96	INTERCONTINENTAL LA DWNTWN DBA HANJIN IN	LOS ANGELES DOWNTOWN	900 WILSHIRE BLVD.		LOS ANGELES	CA	90017			Utilities	N				\$13,579.00
3.30	ססט בועוואווא ווא	DOWNTOWN	900 WILSHIRE BLVD.	1875 CENTURY	LOS ANGELES	CA	30017			Ounties	IN				φ13,579.00
3.97	IRIS LARA AND TANYA LARA	C/O ROBERT K FRIEDL	CAPSTONE LAW APC	PARK EAST STE. 1000	LOS ANGLESE	CA	90067		4/27/2016	Professional Liability	N	x	Х	x	Unknown
3.91	ING LANA AND TANTA LANA	C/O RENEE L.	ONE WILSHIRE	31L. 1000	LOS ANGLESE	OA .	30007		4/21/2010	Retaliation contrary to 1102.5 and Intentional Infliction of Emotional	IN .	^	^_	A	Olikilowii
3.98	IVONNE ENGELMAN	CAMPBELL	BOULEVARD SUITE 2200		LOS ANGELES	CA	90017		5/3/2018	Distress	N	х	Х	x	Unknown
			MAHONEY LAW GROUP,	249 E. OCEAN BLVD. STE											
3.99	JARMAIN JOHNS	C/O KEVIN MAHONEY	APC	814	LONG BEACH	CA	90802		5/22/2016	Professional Liability	N	Χ	Χ	Х	\$5,075,000.00
	JEFFER MANGELS BUTLER AND			1801 W OLYMPIC											
3.100	MITCHELL LLP	MITCHELL LLP	FILE 1263	BLVD.	PASADENA	CA	91199-1263			Trade	N				\$236,042.26
3.101	JK HAND AND ASSOCIATES INC		416 S SPRING STREET	SUITE 1207	LOS ANGELES	CA	90013			Trade	N				\$22,500.00

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Case No. 18-20151 Schedule E/F, Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)	Contingent	Uninquidated	Amount of claim
	JOSE HERNANDEZ, JUAN			1611 N. SAN										
	HERNANDEZ, ALMA HERNANDEZ			FERNANDO										
3.102	AND EORGINA HERNANDEZ	C/O KARITA A PADUA	L.A. INJURY ATTORNEYS	BLVD.	BURBANK	CA	91504		6/4/2015	Professional Liability	N	X X	(X	Unknown
			2040 EAST MARIPOSA							Employee Claim (amount				
3.103	KARI SKAVERN SIMMONS		AVENUE		EL SEGUNDO	CA	90245			over \$12,850 cap)	N			\$1,263.27
	KEY INFORMATION SYSTEMS,						1			тт. т.			_	71,200
3.104	INC.		30077 AGOURA ROAD	SUITE 100	AGOURA HILLS	CA	91301-2709			Trade	N			\$51,119.85
	KIMBERLINA WHETTAM AND													
3.105	ASSOCIATES INC		241 S FIGUEROA STREET	SUITE 370	LOS ANGELES	CA	90012			Trade	N		\perp	\$20,245.00
3.106	KIRCHNER PAULA DBA TRINITY ADVISORS LLC	C/O PAULA KIRCHNER	8735 OAK PARK AVENUE		NORTHRIDGE	CA	91325			Trade	N			\$15,400.00
3.100	ADVISORS ELC	C/O PAULA RIRCHINER	8733 OAK FARK AVENUE		NORTHRIDGE	CA	91323			Traue	IN		+	\$15,400.00
3.107	KNOWWARE INTERNATIONAL INC		2696 S COLORADO BLVD	STE 555	DENVER	со	80222			Trade	N			\$845.00
3.108	KRONOS INC		P.O. BOX 743208		ATLANTA	GA	30374-3208			Trade	N		\top	\$378,226.96
3.109	LANGUAGE LINE SERVICES		PO BOX 202564		DALLAS	TX	75320-2564			Utilities	N			\$863.69
2 110	LESTEVIMONO		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount	N			\$3,894.32
3.110	LESLEY WONG		AVENUE		EL SEGUNDO	CA	90245			over \$12,850 cap)	IN		+	\$3,894.32
3.111	LEVEL 3 COMMUNICATIONS LLC		PO BOX 910182		DENVER	со	80291-0182			Utilities	N		\perp	\$20,827.81
3.112	LIFE MEDIA GROUP LLC		16360 MONTEREY ROAD	SUITE 246	MORGAN HILL	CA	95037			Trade	N			\$279.00
	LIGHTHOUSE MEMORIAL DBA										l			
3.113	WHITE AND DAY IN		1016 W. 164TH STREET		GARDENA	CA	90247			Trade	N		+	\$200.00
3.114	LINKEDIN CORPORATION		62228 COLLECTION CENTER DRIVE		CHICAGO	п	60693-0622			Trade	N			\$29,748.39
3.114	LINKEDIN CORFORATION		DREYER, BABICH,	20	CHICAGO	IL	00093-0022			Traue	IN		+	\$29,740.39
		C/O JUSTIN M.	BUCCOLA, WOOD,	BICENTENNI										
3.115	LISA SWAIN	GINGERY	CAMPORA, LLC	AL CIRCLE	SACRAMENTO	CA	95826		12/24/2014	General Liability	N	x x	(X	Unknown
3.116	LOOP 1 SYSTEMS INC		PO BOX 5322		AUSTIN	TX	78763			Trade	N			\$4,300.00
3.117	M MODAL SERVICES, LTD.		5000 MERIDIAN	SUITE 200	FRANKLIN	TN	37067			Trade	N			\$1,858.64
3.118	MACHELNIL CORMIER		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N			\$3,557.52
3.119	MATERNA CABATANA		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N			\$1,820.37
3.119	IVIA I EKINA CADA I AINA		AVENUE	 	EL SEGUNDO	CA	90245			over \$12,000 cap)	IN		+	\$1,820.37
3.120	MD INSIDER INC		3015 MAIN STREET	SUITE 333	SANTA MONICA	CA	90405			Trade	N		\perp	\$24,999.99
3 121	MD RANGER INC		1601 OLD BAYSHORE HIGHWAY	# 107	BLIDLING AME	CA	94010			Trade	N			\$47,000.00
3.121 3.122	MEDCENTERDISPLAY LLC		101 WESTPARK DRIVE	# 107 SUITE 115	BURLINGAME BRENTWOOD	TN	37027			Trade	N	+	+	\$47,000.00
3.123	MEDICAL COURIERS, INC.		176 OTTO CIRCLE	001112 113	SACRAMENTO	CA	95822			Trade	N	+	+	\$51,697.70
		MEDICAL DATA	425 E. COLORADO ST			1							\neg	75.,55
3.124	MEDICAL DATA EXCHANGE	EXCHANGE (MDX)	SUITE 120		GLENDALE	CA	91205			Trade	N		\perp	\$23,656.50
3.125	MEDICITY		P.O. BOX 780708		PHILADELPHIA	PA	19178-0708			Trade	N			\$90,000.00

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Case No. 18-20151 Schedule E/F, Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

										Subject to offset (Y/N)	ontingent	Unliquidated	Of Amount of claim
Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1		City	State	Zip	Country Date incurred	Basis for claim	offset (Y/N)	<u>ദ്</u>	<u> </u>	Amount of claim
			JAKE Y. YOHAN LEE,	5681 BEACH BOULEVARD									
3.126	MEE SOOK CHO	C/O YOHAN LEE	ESQ.	#200	BEUNA PARK	CA	90621	3/31/2015	General Liability	N	x)	x	K Unknown
3.127	MERCER US INC		P.O. BOX 100260		PASADENA	CA	91189-0260	5,5,0	Trade	N		Ť	\$84,000.00
	METRO ELECTRIC				SAN								
3.128	CONSTRUCTION INC		2400 THIRD STREET		FRANCISCO	CA	94107		Trade	N			\$2,969.00
				1401 ELM STREET, 5TH									
3.129	MICROSOFT CORPORATION	C/O BANK OF AMERICA		FLOOR	DALLAS	TX	75202		Trade	N			\$71,705.81
3.130	MICROSOFT LICENSING GP		6100 NEIL ROAD		RENO	NV	89511		Trade	N			\$1,682,109.56
0.404	MILE FAVEEL	C/O ODAIO ACKEDMANI	1180 SOUTH BEVERLY		LOC ANOFLES	0.4	00005	7/00/0046	Caralana Mattara	N	, ,	, ,	\$390,000,00
3.131	MIKE FAYFEL	C/O CRAIG ACKERMAN	25800 SCIENCE PARK ,		LOS ANGELES	CA	90035	7/23/2018	Employee Matters	N	X X	X)	\$390,000.00
3.132	MIM SOFTWARE INC	1	SUITE 180		CLEVELAND	ОН	44122		Trade	N			\$19,372.00
3.133	MIT/WINCARE LLC		10 S GRAPE ST	PO BOX 39	MEDFORD	OR	97501		Trade	N			\$2,285.00
0.100	,		1500 ROSECRANS	1.0.207.00	MANHATTAN	0.1	0.00.		11000			_	Ψ2,200.00
3.134	MKM LAW GROUP, P.C.		AVENUE	SUITE 500	BEACH	CA	90266		Trade	N			\$9,213.63
3.135	MOOD MEDIA		P.O. BOX 71070		CHARLOTTE	NC	28272-1070		Trade	N			\$56.17
3.136	MOX NETWORKS LLC		9920 JEFFERSON BLVD	4311	CULVER CITY	CA	90232		Trade	N			\$171,300.00
	MYUNG SOO HAN	C/O VINCENT S. KIM	VINCENT S KIM & ASSOCIATES	WILSHIRE BLVD STE 624	LOS ANGELES	CA	90010	5/27/2015	5 Professional Liability		x >	x 2	K Unknown
3.138	NAVEX GLOBAL, INC.		PO BOX 60941		CHARLOTTE	NC	28260-0941		Trade	N			\$234.38
	NETWORK TECHNOLOGY				D. D. A. A. C. W. T.								^-
3.139	SERVICES NGUYEN NAMQUYEN		7901 SOMERSET BLVD 640 EPIC WAY	SUITE B	PARAMOUNT SAN JOSE	CA CA	90723 95134		Trade	N N			\$7,410.90 \$65.36
3.140	NGUTEN NAMQUTEN		640 EPIC WAT	UNIT 345	ORMOND	CA	95134		Trade	IN			\$00.30
3.141	NH ISAC INC		226 NORTH NOVA ROAD	NO 391	BEACH	FL	32174		Trade	N			\$7.500.00
0.141	NICE INCONTEACT DBA		220 NORTH NO VARIOUS	110 001	BEROIT	-	02174		Tiddo				ψ1,000.00
3.142	INCONTACT INC	LOCKBOX 0268	P.O. BOX 7247		PHILADELPHIA	PA	19170-0268		Utilities	N			\$4,852.36
3.143	NOBLE WILLIAMS	C/O RACHEL C. QUIMBY	DAGLIAN LAW GROUP, APLC	701 N BRAND BLVD STE 640	GLENDALE	CA	91203	11/16/2015	General Liability	N	x x	x ;	K Unknown
3.144	NORTH HIGHLAND COMPANY LLC		P.O. BOX 101353		ATLANTA	GA	30392-1353		Trade	N			\$45,054.00
5.144	NTHRIVE SOLUTIONS INC		200 NORTH POINT		ATEANTA	57	5555Z-1555		Trado	14	-+		Ψ+3,034.00
3.145	FORMERLY MEDASSETS		CENTER EAST	STE600	ALPHARETTA	GA	30022		Trade	N			\$103,737.46
	NTT DATA SERVICES LLC		-										, 11, 51110
3.146	FORMERLY DELL MARK		P.O. BOX 677956		DALLAS	TX	75267-7956		Trade	N			\$407,273.00
3.147	OFFICE DEPOT		FILE NO 81901		LOS ANGELES	CA	90074-1901		Trade	N			\$559.74
3.148	OFFICE OF STATEWIDE HEALTH PANDD		2020 WEST EL CAMINO AVENUE	SUITE 800	SACRAMENTO	CA	95833		Trade	N			\$1,533.40
3.149	OPSGENIE INC		450 W BROAD STREET	SUITE 421	FALLS CHURCH	VA	22046		Trade	N			\$30,965.23
2.450	OPTION 1 STAFFING SERVICES		4440 EL CAMINO BEAL	CUITE 440	LOCALTOS	CA	04022		Trada	l _N I			\$42.0E4.00
3.150 3.151	OUTFRONT MEDIA INC		4410 EL CAMINO REAL 2459 SUMMIT ST	SUITE 110	LOS ALTOS KANSAS CITY	CA MO	94022 64108		Trade Trade	N N			\$13,254.03 \$4,500.00
3.151	OUTSIDE GC CA LLP	1	P.O. BOX 482	1	SHARON	MA	02067		Trade	N N	\dashv	+	\$4,500.00 \$167.50
0.102	33.3.5E 33 6/(EE)	1		1	J (1.011		02001	1		1.4			ψ107.30

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Case No. 18-20151 Schedule E/F. Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

											Subject to offset (Y/N)	ntingent	Unliquidated	Omegan	
Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	offset (Y/N)	ပိ	ร	മ് Amount of clair	m
3.153	PAYLOGIX		1025 OLD COUNTY ROAD	SUITE 310	WESTBURY	NY	11590			Trade	N			\$1,16	31.16
3.154	PENSION BENEFIT GUARANTY CORPORATION	OFFICE OF THE GENERAL COUNSEL ATTN: JUDITH STARR	1200 K STREET, NW		WASHINGTON	DC	20005			Pension	N	x z	X	X Undeterm	nined
3.155	PETER OSUNA		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N			\$5,84	15.30
3.156	PHILIPS HEALTHCARE		P O BOX 100355		ATLANTA	GA	30384-0355			Trade	N			\$136,99	7.58
3.157	PHILIPS HEALTHCARE NORTH AMERICA		3000 MINUTEMAN ROAD	M/S 109	ANDOVER	MA	1810			Trade	N			\$143,42	21.84
3.158	PINES ANDREW (EXP ONLY)		76 EVERGREEN DRIVE		ORINDA	CA	94563			Trade	N				98.11
3.159	POOJA SHARMA MD		450 E ROMIE LANE		SALINAS	CA	93901		1	Trade	N			\$1,80	
3.160	PRE EMPLOY COM INC PREMIER INC DBA PREMIER		PO BOX 491570 5882 COLLECTIONS	-	REDDING	CA	96049			Trade	N	-		\$6,05	9.78
3.161	HEALTHCARE SOLUT PRICEWATERHOUSE COOPERS		CENTER DRIVE		CHICAGO	IL	60693			Trade	N			X \$2,359,49	9.52
3.162			P O BOX 514038		LOS ANGELES SHERMAN	CA	90051			Trade	N			\$503,70)0.00
3.163	PRINT MEDIA COLLECTIVE CORP		15445 VENTURA BLVD.	# 24	OAKDS	CA	91403			Trade	N			\$7,18	37 53
3.164	QUADRAMED CORP		3460 LOTUS DRIVE	SUITE 100	PLANO	TX	75075			Trade	N			\$11,73	
3.165	QUADRAMED CORPORATION		P.O. BOX 74008556		CHICAGO	IL	60674-8556			Trade	N			\$694,83	
3.166	QUICK LEONARD KIEFFER INTERNATIONAL INC		555 W JACKSON BLVD.	FL2	CHICAGO	IL	60661			Trade	N			\$3,96	36.95
3.167	REGINA THOMAS		2040 EAST MARIPOSA AVENUE		EL SEGUNDO	CA	90245			Employee Claim (amount over \$12,850 cap)	N			\$1,46	68.12
	REGISTRY OF CHARITABLE		_							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					_
3.168	TRUSTS		P.O. BOX 903447		SACRAMENTO	CA	94203-4470			Trade	N			\$30	00.00
				1315 SEVENTH	SAN										
3.169		C/O JOSEPH K. BRAVO	BRAVO LAW OFFICES	AVE	FRANCISCO	CA	94122		9/14/2016	Professional Liability	N	X 2	Χ	X Unkr	nown
3.170	ROBERT HALF MANAGEMENT RESOURCES		P.O. BOX 743295		LOS ANGELES	CA	90074-3295			Trade	N			\$12,80)8.07
3.171	ROPES GRAY LLP		MAIL CODE 11104	P.O. BOX 11839	NEWARK	NJ	07101-8138			Trade	N			\$22,92	23.29
3 172	ROSA CARCAMO	C/O ALEX PEREZ	MAHONEY LAW GROUP,	249 E. OCEAN BLVD. STE 814	LONG BEACH	CA	905802			Gen Prof Liability	N	x ;	x	X Unkı	nown
J. 112	ROSENBERG AND PICK A LAW	J. J. MELKI LIKEZ	12100 WILSHIRE	0.4	20110 02/1011	1571	330002			John Tor Elability	1			Ond	.5***
3.173	CORPORATION		BOULEVARD	SUITE 560	LOS ANGELES	CA	90025			Trade	N			\$1,52	28.00
3.174	ROTENBERG AND SZE LLP		4525 U STREET		SACRAMENTO	CA	95817			Trade	N			\$27,35	
3.175	RXINNOVATE CONSULTING LLC		7421 MONTE VERDE LANE		WEST PALM BEACH	FL	33412			Trade	N			\$73,71	10.70
3.176	RXINNOVATE CONSULTING LLC (BRAIN MANSFIE		7421 MONTE VERDE LANE		WEST PALM BEACH	FL	33412			Trade	N			\$318,00)0.00
3.177	SAGEWELL HEALTHCARE BENEFITS TRUST		1501 REEDSDALE ST SUITE 3005		PITTSBURGH	PA	15233			Trade	N			\$886,21	12.60

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Case No. 18-20151 Schedule E/F. Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

												int	ated	
Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)	Continge	Unliquidated	Solution of claim
3.178	SALEM AND GREEN A PROFESSIONAL CORP.		3604 FAIR OAKS BLVD.	SUITE 200	SACRAMENTO	CA	95864-7256			Trade	N			\$15,119.00
			800 SOUTH CLAREMONT			0.4				T I.				
3.179	SAN MATEO DAILY JOURNAL SECRETARY OF STATE CA	DOCUMENT FILING	STREET	SUITE 210	SAN MATEO	CA	94402			Trade	N		+	\$7,480.80
3.180	DOCUMENT FILING	SUPPORT UNIT	PO BOX 944260		SACRAMENTO	CA	94244-2600			Trade	N			\$21.00
	SEMB CONSULTANT (DR EARL				PACIFIC									
3.181	BRIEN)	C/O DR EARL BRIEN	1233 CORSICA DRIVE 49006 MEADOWFAIRE		PALISADES	CA	90272			Trade	N		\dashv	\$71.88
3.182	SHARMA POOJA MD (1099)		COMMONS		FREMONT	CA	94539			Trade	N			\$1,500.00
		DBA SHARP BUSINESS												
3.183	SHARP ELECTRONICS CORP	SYSTEMS	DEPT LA 21510		PASADENA	CA	91185-1510			Trade	N		\dashv	\$930.59
3.184	SHRED IT USA		28883 NETWORK PLACE		CHICAGO	IL	60673-1288			Trade	N			\$453.30
	SIMPLIFIED NETWORKS DBA													
3.185	PHOENIXSOFT INC		202 E. EARLL DRIVE	SUITE 140 50	PHOENIX	AZ	85012			Trade	N		+	\$6,079.20
3.186	SODEXO CTM LLC	C/O SUSAN J. JOO	HUNTON ANDREWS KURTH LLP	CALIFORNIA STREET, SUITE 1700	SAN FRANCISCO	CA	94111		8/21/2018	Breach of Contract	N	x >	x x	\$3,081,902.20
			2654 INVITATIONAL		0.11(1.11)									* * * * * * * * * * * * * * * * * * *
3.187	SONRAI GROUP LLC		DRIVE	3655	OAKLAND TWP	MI	48363			Trade	N		+	\$1,080.00
			LAW OFFICES OF JUDE	TORRANCE BLVD STE										
3.188	SOPHIA HOLLEY-HORTON	C/O JUDE A. AKUBUILO	A. AKUBUILO	300	TORRANCE	CA	90503		12/28/2016	General Liability	N	X)	x x	Unknown
3.189	SOUTHERN CALIFORNIA EDISON POB 300		PO BOX 300		ROSEMEAD	CA	91772-0001			Utilities	N			\$2,223.24
3.190	SPARKLETTS		PO BOX 660579		DALLAS	TX	75266-0579			Trade	N		+	\$4,627.95
3.191	SPECTOR LLC		5593 CORONADO CT		CLAYTON	CA	94517			Trade	N		士	\$8,400.00
0.400	SPERTUS LANDES AND UMHOFER		4000 O DI INIDIV DDIIVE	01 1175 705	100 11051 50		90025			T				050 500 04
3.192	LLP		1990 S BUNDY DRIVE 10400 YELLOW CIRCLE	SUITE 705	LOS ANGELES	CA	90025			Trade	N		+	\$58,580.81
3.193	SPOK INC		DRIVE		EDEN PRAIRIE	MN	55343			Trade	N		\dashv	\$92.52
3.194	SQUIRE PATTON BOGGS (US) LLP		P.O. BOX 643051		CINCINNATI	ОН	45264			Trade	N			\$5,621.05
3.195	ST. FRANCIS MEDICAL CENTER		3630 EAST IMPERIAL HIGHWAY		LYNWOOD	CA	90262			Intercompany Payable	Υ			\$114,960,451.00
	ST. VINCENT DIALYSIS CENTER,		201 SOUTH ALVARADO							, , , , , , , , , , , , , , , , , , , ,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3.196	INC.		STREET		LOS ANGELES	CA	90057			Intercompany Payable	Υ		_	\$929,840.00
		C/O MARK A.	CARLTON FIELDS	2000 AVENUE OF THE STARS SUITE 530										
3.197	ST. VINCENT IPA MEDICAL CORPORATION	NEUBAUER STEPHANIE G. CHAU	JORDEN BURT, LLP	NORTH TOWER	LOS ANGELES	CA	90067-4707		8/22/2010	Enforcement of arbitration agreement		x x	x x	(Unknown
3. 191	SUNQUEST INFORMATION	OTETTANIE G. CHAU	250 SOUTH WILLIAMS	IOWER	LOS ANGELES	107	+		0/22/2010	agreement	114	^ 	`+_^	Ulikilowii
3.198	SYSTEMS INC	WILLIAMS CENTRE	BLVD		TUCSON	AZ	85711-3609			Trade	N	\perp	\perp	\$386,175.23
3.199	SURGICAL INFORMATION SYSTEMS, INC.		P.O. BOX 535226		ATLANTA	GA	30353-5226			Trade	N			\$15,015.00

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Case No. 18-20151 Schedule E/F. Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

												int		
Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)	Contingent	Disputed	Amount of claim
							Ţ.,							
0.000	OLIZANINI MEQUANI		2040 EAST MARIPOSA		EL OFOLINDO		00045			Employee Claim (amount				0007.40
3.200	SUZANN MESKAN		AVENUE	-	EL SEGUNDO	CA	90245			over \$12,850 cap)	N			\$387.40
3.201	SYMONS MICHAEL T		14220 EL TOPO DRIVE 4076 PAYSPHERE	+	POWAY	CA	92064			Trade	N		-	\$3,080.00
3.202	TALX CORPORATION		CIRCLE		CHICAGO	li .	60674			Trade	N			\$29,653.18
0.202	TAEX COR CIVITOR		OIITOLL		OT II OT ICO	-	00074			Trade				Ψ20,000.10
3.203	TCPRINCE LLC		1233 EVERGREEN WAY		WOODLAND	CA	95695			Trade	N			\$9,598.38
	TELE TRACKING TECHNOLOGIES			THE TIMES										
3.204	INC		336 FOURTH AVENUE	BUILDING	PITTSBURGH	PA	15222			Trade	N			\$4,413.78
0.005	TELETRACKING TECHNOLOGIES		000 FOURTH AVENUE	771151000	DITTODUDOU	D.	45000			T				000.070.40
3.205	INC	C/O JENNIFER T.	336 FOURTH AVENUE	7TH FLOOR	PITTSBURGH	PA	15222			Trade	N			\$22,978.48
3.206	THOMAS CONSULTING	GRAVOIS	2068 STEVELY AVENUE		LONG BEACH	CA	90815			Trade	N			\$4,118.40
3.200	THOMAS CONSULTING	GRAVOIS	2006 STEVELT AVENUE		LONG BEACH	CA	90613			Traue	IN		+	φ4,110.40
			2040 EAST MARIPOSA							Employee Claim (amount				
3.207	TOMMY LE		AVENUE		EL SEGUNDO	CA	90245			over \$12,850 cap)	N			\$423.01
3.208	TRACTMANAGER INC	DEPT # 2632	P.O. BOX 11407		BIRMINGHAM	AL	35246-2632			Trade	N			\$29,844.90
3.209	UPTODATE INC		230 THIRD AVENUE		WALTHAM	MA	02451			Trade	N			\$6,867.00
3.210	US BANK EQUIPMENT FINANCE		P. O. BOX 790448		ST. LOUIS	MO	63179-0448			Trade	N			\$1,034.99
0.044	1177AL DAG		2040 EAST MARIPOSA		EL OFOLINDO		00045			Employee Claim (amount				0450.00
3.211	UZZAL DAS		AVENUE	-	EL SEGUNDO	CA	90245			over \$12,850 cap)	N		_	\$156.30
3.212	VAN DERMYDEN MADDUX LAW CORP		2520 VENTURE OAKS WAY	SUITE 450	SACRAMENTO	C A	95833-4227			Trade	N			\$8.334.42
3.212	VECTOR RESOURCES, INC./ DBA		VVAT	SUITE 450	SACRAIVIENTO	CA	95055-4221			Trade	IN			\$0,334.42
3.213	VECTOR USA		3530 VOYAGER ST		TORRANCE	CA	90503			Trade	N			\$8,552.60
0.210	VERGE SOLUTIONS LLC DBA		0000 101710211 01	1	MOUNT	0,1	00000			Trade	1			ψο,οσ2.οσ
3.214	VERGE HEALTH	DBA VERGE HEALTH	P.O. BOX 394		PLEASANT	sc	29465			Trade	N			\$58,000.00
		JOHN HANCOCK												
	VERITY HEALTH SYSTEM	RETIREMENT PLAN												
3.215	RETIREMENT PLAN A	SERVICES	690 CANTON STREET		WESTWOOD	MA	02090			Pension	N	X X	. X	Undetermined
	VEDITY LIE ALTIL OVOTEM	JOHN HANCOCK												
0.040	VERITY HEALTH SYSTEM	RETIREMENT PLAN	COO CANITON CEDEET		WESTWOOD		00000			Danaian	N	$\mathbf{x} \mid_{X}$	$ _{\mathbf{x}}$	l la data ancia a d
3.216	RETIREMENT PLAN B	SERVICES	690 CANTON STREET 2040 EAST MARIPOSA		WESTWOOD	MA	02090			Pension	IN	X X	^	Undetermined
3.217	VERITY HOLDINGS, LLC		AVENUE		EL SEGUNDO	CA	90245			Intercompany Payable	Y			\$64,829,535.00
3.218	VERIZON WIRELESS 660108		P.O. BOX 660108		DALLAS	TX	75266-0108			Utilities	N			\$14,026.50
			75 REMITTANCE											711,020101
3.219	VIZIENT INC		DR.,STE.1855		CHICAGO	IL	60675-1855			Trade	N			\$459,243.61
3.220	VOX NETWORK SOLUTIONS		8000 MARINA BLVD.	SUITE 130	BRISBANE	CA	94005			Utilities	N			\$8,178.00
3.221	WILSON DEBORAH		11922 BUTTERNUT WAY		NEVADA CITY	CA	95959			Trade	N			\$1,100.00
2 200	WINDSTREAM HOLDING INC		D O DOV 0004040		LOUISVALLE	L/V	40200 4040			Litilities	,,			0004.70
3.222	FORMALLY PAETEC	+	P.O. BOX 9001013		LOUISVILLE	KY	40290-1013			Utilities	N		-	\$361.73
3.223	WOLTERS KLUWER HEALTH, INC.		P.O. BOX 1610		HAGERSTOWN	MD	21741-1610			Trade	N			\$65,000.00
0.220	WORKING NURSE DBA	†	1 .O. DOX 1010		LIAGENGTOWN	שועו	-17-1-1010			Trauc	1.4	-+	+	φυσ,υσυ.υσ
	RECRUITMENT SERVICES		137 N. LARCHMONT											
3.224	INWORKING WORLD M		BLVD.	SUITE 474	LOS ANGELES	CA	90004			Trade	N			\$3,000.00
	•		•	•		•	•	•	•					

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Case No. 18-20151

Schedule E/F, Part 2 Creditors Who Have NONPRIORITY Unsecured Claims

Line	Nonpriority Creditor's Name	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	Date incurred	Basis for claim	Subject to offset (Y/N)		Disputed	Amount of claim
	XEROX FINANCIAL SERVICES DBA													
3.225	XEROX CORP		P.O. BOX 202882		DALLAS	TX	75320-2882			Trade	N			\$1,839.78
	ZAYO GROUP LLC DBA ZAYO													
3.226	GROUP HOLDING IN		P.O. BOX 952136		DALLAS	TX	75395-2136			Trade	N			\$14,625.41
3.227	ZERIVA LLC		6590 SHILOH ROAD EAST	SUITE D	ALPHARETTA	GA	30005			Trade	N			\$20,183.00
3.228	ZONES INC		1102 15TH STREET SW	SUITE 102	AUBURN	WA	98001			Trade	N			\$5,090.00
	ZOOM VIDEO COMMUNICATIONS				SAN									
3.229	INC		P O BOX 398843		FRANCISCO	CA	94139-8843			Trade	N			\$2,505.00
												-	TOTAL	.: \$218,104,803.95

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Case No. 18-20151

	Name of other parties with whom the debtor has an executory	On the Nation Name	Allered	Address	O.	01-1-	7 :	0	State what the contract or lease is for and the nature		
Line 2.1	contract or unexpired lease 314E	Creditor Notice Name	Address 1 47102 MISSION FALLS CT	Address 2 SUITE 219	City FREMONT	State CA	94539	Country	of the debtor's interest SERVICES-CONSULTING	remaining	contract
	3M (FKA SOFTMED SYSTEMS,			SUITE 219	SILVER					Evergreen	
2.2	INC.)		12215 PLUM ORCHARD		SPRINGS	MA	20904		LICENSE-SOFTWARE	1/1/2069	
	3M HEALTH INFORMATION				SILVER						
2.3	SYSTEMS		12215 PLUM ORCHARD		SPRINGS	MA	20904		LICENSE-SOFTWARE	6/30/2023	
	A CARLOCAL ACCOCIATED IN C		595 EAST COLORADO	OLUTE OOF	DAGADENIA	0.4	04404		OFFICION CONTOUR TIME	4/00/0045	
2.4	A. CARLSON ASSOCIATES, LLC		BLVD.	SUITE 205 200 ABBOTT	PASADENA	CA	91101		SERVICES-CONSULTING	4/29/2015	
2.5	ADDOTT LADS INC		DEDT 264 LECD 4		ADDOTT DADK		00004 0000		CLIDDLIES VCD	0/24/2045	
2.5	ABBOTT LABS, INC.		DEPT 361 LFCP-4	PARK ROAD	ABBOTT PARK NORTH	IL	60064-6226		SUPPLIES-VCD DISCOUNT PRICING	8/31/2015	(
2.6	ABBVIE US LLC		1 N. WAUKEGAN ROAD		CHICAGO	IL	60064		AGREEMENT	3/31/2019	
2.0	ABILITY NETWORK (FORMERLY		I N. WAUKEGAN KOAD		CHICAGO	IL.	00004		NETWORK SERVICES	3/31/2019	
2.7	KNOWN AS VISIONSHARE)		P.O. BOX 856015		MINNEAPOLIS	MN	55485-6015		AGREEMENT	1/8/2019	
<u></u>	INTOVITAD VIDIONOLIANE)		401 NORTH MICHIGAN		IVIII VIIVEAI OLIO	IVIIN	00400-0010		PROFESSIONAL SERVICES	1/0/2013	
2.8	ACCRETIVE HEALTH, INC.		AVENUE	SUITE 2700	CHICAGO	IL	60611		AGREEMENT	4/23/2015	
	7.CORETIVE HEALTH, IIIO.		401 NORTH MICHIGAN	00112 2700	011107100	-	00011		/ CITELINEIT	1/20/2010	
2.9	ACCRETIVE HEALTH, INC.		AVENUE	SUITE 2700	CHICAGO	IL	60611		SERVICES-CONSULTING	4/22/2015	
	ACUSIS (FKA DIGITAL RECORDS			P.O. BOX					SERVICES-		
2.10	CORP)		DRC LLC DBA ACUSIS	931541	CLEVELAND	ОН	44193		TRANSCRIPTION	5/8/2015	
	AKIN GUMP STRAUSS HAUER &										
2.11	FELD LLP		2001 MARKET ST #4100		PHILADELPHIA	PA	19170-6827		SERVICES-LEGAL	12/21/2016	
	AKIN GUMP STRAUSS HAUER &										
2.12	FELD LLP		2001 MARKET ST #4100		PHILADELPHIA	PA	19170-6827		SERVICES-LEGAL	3/16/2019	
									MASTER PURCHASING		
2.13	ALEVIO, LLC		200 CAHABA PARK CIRCLE	SUITE 100	BIRMINGHAM	AL	35242		AGREEMENT	6/14/2019	
									PHYSICIANS-CONSULTING		
2.14	ALICAWAY, EDGARDO G. MD		1800 SULLIVAN AVENUE	SUITE 508	DALY CITY	CA	94015		SERVICES	4/30/2019	
l			1345 AVENUE OF						PROFESSIONAL SERVICES	_	
2.15	ALLIANCE BERNSTEIN		AMERICAS		NEW YORK	NY	10105		AGREEMENT	Evergreen	
l	ALLIANT INSURANCE SERVICES,			0== 000	NEWPORT				PROFESSIONAL SERVICES	4.4/00/004	
2.16	INC.	ATTN BETH CASTRO	1301 DOVE STREET	SUITE 200	BEACH	CA	92660		AGREEMENT	11/20/2018	
2.17	ALLSCRIPTS HEALTHCARE, LLC		24630 NETWORK PLACE		CHICAGO	IL	60673-1246		MASTER AGREEMENT	8/2/2027	
2 40	ALTECDA LIEALTIL INC	ATTN.: PRESIDENT	2445 C CEDITIVEDA DI VID	0TU EL 00B	LOC ANCELES	C 4	00004		PROFESSIONAL SERVICES	F	
2.18	ALTEGRA HEALTH, INC.	ATTN.: PRESIDENT	3415 S. SEPULVEDA BLVD.	SITIFLOOK	LOS ANGELES	CA	90034		AGREEMENT CONFIDENTIALITY & NON-	Evergreen	
2.19	AMAZON WEB SERVICES		P.O.BOX 84023		SEATTLE	WA	98124-8423		DISCLOSURE	2/28/2019	
۲.۱۶	AWAZON WED SERVICES	CPC REMITTANCE	1 .0.007 04023	1	SLATTLE	VVA	30124-0423		ADMINISTRATIVE	2/20/2019	1
2.20	AMERICAN EXPRESS	PROCESSING	1801 NW 66TH AVE	STE 103C	PLANTATION	FL	33313-4571		SERVICES	6/30/2019	
2.20	AMERICAN MEDICAL	1.100200110	1.001 IVV COTITAVE	O1L 1000	LANTATION	-	00010-4011		OLIVIOLO .	0/30/2019	
2.21	ASSOCIATION		75 REMITTANCE DRIVE	SUITE 1413	CHICAGO	IL	60675-1413		LICENSE-SOFTWARE	Evergreen	
2.22	AMERICAN RED CROSS	1	PO BOX 37839	2320	BOONE	IA	50037-0839		BLOOD/ORGAN/TISSUE	6/30/2015	
2.23	AMERICAN RED CROSS		PO BOX 37839		BOONE	IA	50037-0839		BLOOD/ORGAN/TISSUE	6/30/2016	
					_				MASTER PURCHASING		
2.24	AMERICAN RED CROSS		PO BOX 37839		BOONE	IA	50037-0839		AGREEMENT	12/14/2018	
	AMERICAN REGISTRY FOR										
2.25	INTERNET NUMBERS (ARIN)		P.O. BOX 759477		BALTIMORE	MD	21275-9477		MASTER AGREEMENT	1/1/2065	
	. ,								SERVICES-		
2.26	AMERICAN TOWERS, LLC		LOCKBOX 7501	P. O. BOX 7247	PHILADELPHIA	PA	19170-7501		TELECOMMUNICATIONS	6/30/2020	

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	Name of other parties with whom the debtor has an executory	0 15 N 2 N				a	- :		State what the contract or lease is for and the nature		List the contract number of any government
2.27	contract or unexpired lease AMPLUS GROUP, LLC	Creditor Notice Name	Address 1 438 AMAPOLA AVENUE	Address 2 SUITE 210	City	State CA	2ip 90501	Country	of the debtor's interest SERVICES-CONSULTING	remaining 7/24/2019	contract
2.21	AMPLUS GROUP, LLC	SATCHEL KIEFER	438 AMAPOLA AVENUE	SUITE 210	TORRANCE	CA	90501		PHYSICIANS-CONSULTING	7/24/2019	
2.28	ANDERSON, JEFFREY MD		333 OCONNOR DRIVE		SAN JOSE	CA	95128		SERVICES	4/30/2019	
2.20	ANDERSON, JEFFRET WID		333 OCONNOR DRIVE		SAN JUSE	CA	93120		SERVICES	4/30/2019	
2.29	ANDERSON, MAXINE MD		3737 MARTIN LUTHER KING JR. BLVD. STE. # 404		LYNWOOD	CA	90262-2646		PHYSICIANS-CONSULTING SERVICES	4/30/2019	
2.30	ANKURA CONSULTING GROUP		P.O. BOX 32185		NEW YORK	NY	10087-2185		LETTER OF AGREEMENT	Evergreen	
	APPLIED MANAGEMENT								CONFIDENTIALITY & NON-		
2.31	SYSTEMS, INC.		25 MALL ROAD - SUITE 325		BURLINGTON	MA	01803		DISCLOSURE	9/27/2018	
	APPLIED STATISTICS &								TECHNOLOGY SERVICES		
2.32	MANAGEMENT, INC.		P.O. BOX 2738		TEMECULA	CA	92593-2738		AGREEMENT	6/20/2020	
2.33	ARENT FOX		555 WEST FIFTH STREET	48TH FLOOR	LOS ANGELES	CA	90013-1065		SERVICES-LEGAL	Evergreen	
									MASTER PURCHASING		
2.34	ARTHREX, INC.		1370 CREEKSIDE BLVD		NAPLES	FL	34108		AGREEMENT	6/30/2019	
		BAYLOR COLLEGE OF							PHYSICIANS-CONSULTING		
2.35	ARTINYAN, AVO, M.D.	MEDICINE	6620 MAIN STREET	SUITE 1350	HOUSTON	TX	77030-2348		SERVICES	4/30/2019	
									PROFESSIONAL SERVICES		
2.36	ARUP LABORATORIES		PATHOLOGISTS INC	PO BOX 27964	SALT LAKE CITY	UT	84127		AGREEMENT	9/30/2016	
									PROFESSIONAL SERVICES		
2.37	ASCENSION HEALTH		4600 EDMUNDSON ROAD		ST. LOUIS	MO	63134		AGREEMENT	3/26/2019	
									SERVICES-CASH		
2.38	ASCENSION HEALTH		4600 EDMUNDSON ROAD		ST. LOUIS	MO	63134		MANAGEMENT	3/26/2019	
		JOSEPH R. IMPICCICHE,	=	0= .=0					CONFIDENTIALITY & NON-		
2.39	ASCENSION HEALTH ALLIANCE	ESQ.	101 S. HANLEY ROAD	SUITE 450	ST. LOUIS	MO	63105		DISCLOSURE	4/10/2019	
	ASCOM WIRELESS - VECTOR		3428 COLLECTIONS							0///00/	
2.40	RESOURCES, INC		CENTER DRVIE		CHICAGO	IL	60693		TELECOMMUNICATIONS	3/1/2019	
2.41	(==::==============================	D/B/A ONESOURCE DOCUMENT MANAGEMENT SERVICES	1800 EAST 900 SOUTH		SALT LAKE CITY	UT	84108		SUBSCRIPTIONS	3/21/2018	
				3188 AIRWAY							
2.42	BIOMET ORTHOPAEDICS, LLC		TLG MEDICAL	AVE #B	COSTA MESA	CA	92626		SUPPLIES-TOTAL JOINTS	8/31/2018	
2.43	BIOTRONIK, INC.		6024 JEAN RD.		LAKE OSWEGO	OR	97035		SUPPLIES-CRM	3/31/2019	
2.44	BLACKROCK INSTITUTIONAL TRUST COMPANY (FKA BARCLAYS GLOBAL INVESTORS)		3525 LOMITA BLVD	SUITE 200	TORRANCE	CA	90505		PROFESSIONAL SERVICES AGREEMENT	Evergreen	
					SAN				ADMINISTRATIVE		
2.45	BLUE SHIELD OF CALIFORNIA		50 BEALE STREET		FRANCISCO	CA	94105		SERVICES	12/31/2014	
2.46	BNY MELLON		1201 THIRD AVENUE	SUITE 5010	SEATTLE	WA	98101		PROFESSIONAL SERVICES AGREEMENT	Evergreen	
I			161 LEVERINGTON							1	
2.47	BOARDEFFECT LLC		AVENUE	SUITE 1001		PA	19127		LICENSE-SOFTWARE	1/30/2019	
2.48	BOSTON SCIENTIFIC CORP.		47201 LAKEVIEW BLVD		FREMONT	CA	94537-5120	ļ	SUPPLIES-CATH LAB	8/6/2019	
2.49	BOSTON SCIENTIFIC CORP.		47201 LAKEVIEW BLVD		FREMONT	CA	94537-5120		SUPPLIES-CRM	Evergreen	

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	Name of other parties with whom								State what the contract or		List the contract number of any
	the debtor has an executory								lease is for and the nature	State the term	_
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
	BOTTOMLINE TECHNOLOGIES								SERVICES-SOFTWARE MAINTENANCE AND		
2.50	(FKA OPTIO SOFTWARE)		P.O. BOX 83050		WOBURN	MA	01813-3050		SUPPORT	6/25/2019	
2.51	BROWN RUDNICK LLP		P.O. BOX 52257		BOSTON	MA	02205		SERVICES-LEGAL	4/30/2015	
			NO ADDRESS ON						PHYSICIANS-CONSULTING		
2.52	BURKE, CHRIS MD		CONTRACT						SERVICES	Evergreen	
0.50	CALIFORNIA IDA INIO		0.400 N. FIDOT OT	OLUTE 400	04111005		05404		CONFIDENTIALITY & NON-	0/04/0040	
2.53	CALIFORNIA IPA, INC.		2480 N. FIRST ST. C/O OCEANSIDE LAUNDRY	SUITE 160	SAN JOSE LA SELVA	CA	95131		DISCLOSURE	8/31/2019	
2.54	CAMPUS LAUNDRY		LLC	DRIVE	BEACH	CA	95076-1907		SERVICES-LINEN SUPPLY	5/31/2017	
2.54	CANNI CO EXCINENT			DITIVE	BEAGIT	0/1	33070 1307		SERVICES-	3/31/2017	
2.55	CAPITAL TOWER GROUP, LLC		301 N. LAKE AVENUE	SUITE 800	PASADENA	CA	91101		TELECOMMUNICATIONS	6/30/2023	
		0 0 0 - 0		WEST CAMPUS,		۵			556550	0/00/00/0	
2.56	CARDINAL HEALTH 110, INC.	LEASING SERVICES DEPT.	7000 CARDINAL PLACE	1ST FLOOR	DUBLIN	ОН	43017		PHARMACEUTICAL	2/28/2019	
				WEST CAMPUS,					DISCOUNT PRICING		
2.57	CARDINAL HEALTH 110, INC.	LEASING SERVICES DEPT.	7000 CARDINAL PLACE	1ST FLOOR	DUBLIN	ОН	43017		AGREEMENT	12/8/2019	
	CARDINAL HEALTH PHARMACY										
	SERVICE LLC (AKA CARDINAL										
2.58	HEALTH SOLUTIONS, INC.)		1330 ENCLAVE PARKWAY		HOUSTON	TX	77077		PHARMACEUTICAL	9/28/2018	
0.50	CARDIO MEDICAL PRODUCTS,		OOF FDANKI IN AVE	OLUTE I	DOOKAMAN		07000		OLIDBUIEG GATULAB	40/04/0047	
2.59	INC.		385 FRANKLIN AVE	SUITE L 25082	ROCKAWAY	NJ	07866		SUPPLIES-CATH LAB	10/31/2017	
				NETWORK					MASTER PURCHASING		
2.60	CAREFUSION SOLUTIONS, LLC		PYXIS PRODUCTS	PLACE	CHICAGO	IL	60673-1250		AGREEMENT	Evergreen	
	,			25082						Ŭ	
	CAREFUSION SOLUTIONS, LLC			NETWORK					DISCOUNT PRICING		
2.61	(PYXIS)		PYXIS PRODUCTS	PLACE	CHICAGO	IL	60673-1250		AGREEMENT	7/31/2017	
2.62	CARPENTER, THOMAS J. MD		NO ADDRESS ON CONTRACT						SERVICES-CONSULTING	Evergreen	
2.02	CART ENTER, THOMAS 3. MD		CONTRACT						SERVICES-SOFTWARE	Lvergreen	
									MAINTENANCE AND		
2.63	HEALTHCARESOURCE HR, INC.		P.O. BOX 783577		PHILADELPHIA	PA	19178-3577		SUPPORT	12/11/2017	
			17085 CAMINO SAN						LICENSE-SOFTWARE		
2.64	HEALTHLINE SYSTEMS,INC.		BERNARDO		SAN DIEGO	CA	92127		SUBSCRIPTION	12/18/2018	
2.65	HEALTHSOURCE GLOBAL STAFFING, INC		39270 PASEO PADRE PKWY.	SUITE # 138	FREMONT	CA	94538		ADMINISTRATIVE SERVICES	2/23/2019	
2.66	HEALTHSTREAM, INC.		PO BOX 102817	JUITE # 130	ATLANTA	GA	30368-2817		MASTER AGREEMENT	12/1/2021	
			. 5 25% 102011			5, (2000 2011		PROFESSIONAL SERVICES	12,1,2021	
2.67	HEALTHSTREAM, INC.		PO BOX 102817		ATLANTA	GA	30368-2817		AGREEMENT	Evergreen	
									SERVICES-SOFTWARE		
				D 0 D0V 1 1==		L			MAINTENANCE AND	0/00/5	
2.68	HELP SYSTEMS, INC.		NW 5955	P.O. BOX 1450	MINNEAPOLIS	MN	55485-5955		SUPPORT	6/30/2019	
2.69	HENDERSON GLOBAL INVESTORS		737 N. MICHIGAN AVE.	SUITE 1700	CHICAGO	IL	60611		INVESTMENT	Evergreen	
2.03	HENDERSON INTERNATIONAL ALL		707 N. WIIOTHOAN AVE.	5511L 1700	OI NOAGO	iL.	00011		III V LOTIVILINI	Lvergreen	
2.70	CAP EQUITY, LP		1 FINANCIAL PLAZA	19TH FLOOR	HARTFORD	СТ	06103		PARTNERSHIP	Evergreen	

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Case No. 18-20151 Schedule G **Executory Contracts and Unexpired Leases**

	Name of other parties with whom the debtor has an executory										List the contract number of any government
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest MASTER PURCHASING	remaining	contract
2.71	HILL ROM COMPANY		1069 STATE RT 46 EAST		BATESVILLE	IN	47006-9167		AGREEMENT	5/30/2020	
2.7 1	THEE ROW COMM ANT		1009 STATE KT 40 EAST		DATESVILLE	II V	47000-3107		PROFESSIONAL SERVICES	3/30/2020	'
2.72	HODGES MACES		P.O. BOX 117163		ATLANTA	GA	30368-7163		AGREEMENT	11/3/2018	
				12490							
				COLLECTION							
2.73	HONEYWELL INTERNATIONAL		BUILDING SOLUTIONS	CENTER DRIVE	CHICAGO	IL	60693		SERVICES-CONSTRUCTION	6/1/2019	
				SUITE218							
	HOOPER HEALTHCARE			ATTN: BRYAN							
2.74	CONSULTING LLC		1370 BREA BLVD.	HOOPER	FULLERTON	CA	92835		SERVICES-CONSULTING	7/25/2020	
0.75	HOOPER, LUNDY & BOOKMAN,		1875 CENTURY PARK	OLUTE 4000	LOCANOFIES		00007 0700		050)/1050 5041	0/00/0040	
2.75	P.U.		EAST	SUITE 1600	LOS ANGELES	CA	90067-2799		SERVICES-LEGAL SERVICES-SOFTWARE	9/30/2018	
									MAINTENANCE AND		
2.76	HOST ANALYTICS		555 TWIN DOLPHIN DRIVE	4TH FLOOR	REDWOOD CITY	CA	94065		SUPPORT	12/11/2019	
2.70	HURON CONSULTING SERVICES		OSS TWIN BOLLTIN DRIVE	TITI LOOK	INEDWOOD CITT	<u>-</u> ΟΛ	3-1003		00.10101	12/11/2013	
	LLC (DBA										
	WELLSPRING+STOCKAMP,										
2.77	HURON HEALTHCARE)		3005 MOMENTUM PLACE		CHICAGO	IL	60689-5330		SERVICES-CONSULTING	8/31/2014	
	,		2215 PINNALCE CIRCLE								
2.78	IDEA CONSULTING GROUP		NORTH		PALM HARBOR	FL	34684		SERVICES-CONSULTING	9/6/2019	
									EQUIPMENT-		
2.79	IKON FINANCIAL SERVICES		1738 BASS RD		MACON	GA	31210-1043		LEASE/RENTAL	11/11/2015	
	IMAGEFIRST OF SAN FRANCISCO,				KING OF					0/0/0000	
	LLC		900 E. EIGHTH AVENUE	SUITE 300	PRUSSIA	PA	19406		MASTER AGREEMENT	8/8/2022	
2.81	INCONTACT, INC.		LOCKBOX 0268	P.O. BOX 7247	PHILADELPHIA	PA	19170-0268		LICENSE-SOFTWARE SERVICES-SOFTWARE	12/3/2018	
			25 COMMUNICATIONS						MAINTENANCE AND		
2.82	INFOR WORLD (INFINIUM)		WAY		HYANNIS	MA	02601		SUPPORT	9/30/2018	
2.02	IN ON WORLD (IN INION)		1133 AVENUE OF THE		TTAINIO	IVIA	02001		PROFESSIONAL SERVICES	3/30/2010	
2.83	ING INVESTMENT MANAGEMENT		AMERICAS		NEW YORK	NY	10036		AGREEMENT	11/30/2018	
	INNOVASAFE		1256 CABRILLO AVENUE	SUITE 250	TORRANCE	CA	90501-2811		ESCROW-SOFTWARE	8/14/2019	
									SERVICES-SOFTWARE		
									MAINTENANCE AND		
2.85	INPRIVA		2625 REDWING ROAD	SUITE 330	FORT COLLINS	CO	80526		SUPPORT	6/10/2019	
				9920							
l				JEFFERSON							
2.86	INTEGRITY HEALTHCARE, LLC		C/O NANTWORKS LLC	BLVD.	CULVER CITY	CA	90232		MASTER AGREEMENT	7/17/2025	
2 07	INTERCYCTEMS CORRORATION		D O BOY 84 5000		DOCTON	N 4 A	00004 5000		LICENSE-SOFTWARE	6/00/0010	J
2.87	INTERSYSTEMS CORPORATION		P. O. BOX 84-5809		BOSTON	MA	02284-5809		SUBSCRIPTION	6/30/2019	
	INTRALEARN SOFTWARE								SERVICES-SOFTWARE MAINTENANCE AND		
2.88	CORPORATION		276 WEST MAIN STREET		NORTHBORO	MA	01532		SUPPORT	12/11/2018	
2.00	CON ONATION		270 WEST WAIN STREET		NOKTIBORO	IVIA	01002		JOI I OK I	12/11/2010	
	ISU INSURANCE SERVCIES (FKA				WALNUT				MASTER PURCHASING		
2.89	PINNACLE BROKER'S, INC.)		1330 N BROADWAY	SUITE #240	CREEK	CA	94596		AGREEMENT	Evergreen	

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Case No. 18-20151 Schedule G

Executory Contracts and Unexpired Leases

	Name of other parties with whom the debtor has an executory	Condition Notice Name	Albana	Address 0	O'm	01-1-	71	0	State what the contract or lease is for and the nature	State the term	List the contract number of any government
Line	contract or unexpired lease JAMES R. LAHANA, A	Creditor Notice Name	Address 1	Address 2	City	State	ZIP	Country	of the debtor's interest	remaining	contract
	PROFESSIONAL LAW		31255 CEDAR VALLEY		WESTLAKE						
2.90	CORPORATION		DRIVE	SUITE 206	VILLAGE	CA	91362		LETTER OF AGREEMENT	Evergreen	ı
	JEFFER MANGELS BUTLER &		1900 AVENUE OF THE							, and the second	
2.91	MITCHELL LLP		STARS, 7TH FLOOR		LOS ANGELES	CA	90067-4308		SERVICES-LEGAL	Evergreen	1
	JENNIFER GRAVOIS DBA THOMAS								INDEPENDENT		
	CONSULTING		2068 STEVELY AVENUE		LONG BEACH	CA	90815		CONTRACTOR	9/30/2018	
2.93	JOSEPH S. DE TRANE, CPA		191 CALLE LA MESA		MORAGA	CA	94556		SERVICES-CONSULTING	2/5/2016	5
0.04	LOVA MOTOR AND		35964 KILLORGLIN		EDEMONIT		0.4500		050,4050,000,01,70,0	4/4/0040	
2.94	JOY VICTOR, MD		COMMON		FREMONT	CA	94536		SERVICES-CONSULTING LICENSE-SOFTWARE	1/1/2019)
2.95	KAUFMAN HALL		8610 SOLUTION CENTER		CHICAGO	IL	60677-8006		SUBSCRIPTION	1/10/2017	,
	KAUFMAN HALL		8610 SOLUTION CENTER		CHICAGO	IL	60677-8006		SERVICES-CONSULTING	Evergreen	
2.30	INAU WANTALL		333 W. SAN CARLOS		CHICAGO	112	00077-0000		SERVICES-CONSULTING	Lvergreen	
2.97	KENYON & KENYON LLP		STREET	SUITE 600	SAN JOSE	CA	95110-2731		SERVICES-LEGAL	Evergreen	
			0.1121	ATTN: VP	G/ II 1 0 0 0 2	071	001102101		02.11.020.2207.2	210.9.00.	
				NORTH							
	KIMBERLY-CLARK GLOBAL SALES,		1400 HOLCOMB BRIDGE	AMERICA					MASTER PURCHASING		
2.98	LLC		RD.	SALES	ROSWELL	GA	30076		AGREEMENT	9/28/2018	3
2.99	KIRCHNER, PAULA		8735 OAK PARK AVENUE		NORTHRIDGE	CA	91325		SERVICES-CONSULTING	12/31/2015	5
									LICENSE-SOFTWARE		
2.100	KRONOS, INC.		P.O. BOX 743208		ATLANTA	GA	30374-3208		SUBSCRIPTION	6/14/2023	3
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								SERVICES-EQUIPMENT	0/00/00	
2.101	KRONOS, INC.		P.O. BOX 743208		ATLANTA	GA	30374-3208		MAINTENANCE	3/30/2019)
									SERVICES-HARDWARE		
2 102	KRONOS, INC.		P.O. BOX 743208		ATLANTA	GA	30374-3208		AND SOFTWARE MAINTENANCE	12/31/2018	,
2.102	RKONOS, INC.		F.O. BOX 743208		ATLANTA	GA	30374-3200		WAINTENANCE	12/31/2010	•
2 103	KURT SALMON ASSOCIATES INC		120 SOUTH SIXTH STREET	SUITE 1600	MINNEAPOLIS	MN	55402		SERVICES-CONSULTING	Evergreen	
2.100	TOTAL OF EMOTIFICACION TEO INTO		1055 W. 7TH STREET,	00112 1000	WINTING CEIC		00 102		ADMINISTRATIVE	Lvorgroon	•
2.104	LA CARE HEALTH PLAN		10TH FLOOR		LOS ANGELES	CA	90017		SERVICES	3/31/2018	3
									SERVICES-SOFTWARE		
	LANE TELECOMMUNICATIONS,								MAINTENANCE AND		
2.105			10 LANIDEX PLAZA WEST	SUITE 213	PARSIPPANY	NJ	07054		SUPPORT	10/17/2018	
	LANGUAGE LINE SERVICES		PO BOX 202564		DALLAS	TX	75320-2564		SERVICES-INTERPRETER	4/8/2019	
2.107	LANGUAGE LINE SERVICES		PO BOX 202564		DALLAS	TX	75320-2564		TELECOMMUNICATIONS	4/8/2019)
0.400	LEAN TRANSFORMATIONS		0500 DL VMCUTU DC 45	" 000	ANINI ABBOD		10101		0ED/40E0 00101 # 7110	0/04/06:-	.
2.108	GROUP, LLC LIGHTHOUSE DOCUMENT		3588 PLYMOUTH ROAD	# 320	ANN ARBOR	MI	48104		SERVICES-CONSULTING	3/21/2017	
2 100	TECHNOLOGIES, INC.		51 UNIVERSITY STREET	SUITE 400	SEATTLE	WA	98101		MASTER AGREEMENT	Evergreen	
2.109	I LOI INOLOGILO, INC.		62228 COLLECTION	3011L 400	SLATTLE	VVA	30101	1	IVIAGILI AGREEIVIENI	Evergreen	!
2 110	LINKEDIN		CENTER DRIVE		CHICAGO	IL	60693-0622		SALES ORDER	1/31/2020)
	LIPTON, ROBERT		21 IDAHO STREET		RICHMOND	CA	94801	1	SERVICES-CONSULTING	2/15/2018	
	LOCKTON COMPANIES, LLC			P.O. BOX		J.,	12.00.			2, 13,2010	
2.112	(KANSAS CITY SERIES)		DEPT 3042	123042	DALLAS	TX	75312-3042		INSURANCE COVERAGE	7/1/2020)
	,								PHYSICIANS-CONSULTING		
2.113	LONG WILLIAM M.D.		637 LUCAS AVE.		LOS ANGELES	CA	90017		SERVICES	4/30/2019)

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	Name of other parties with whom								State what the contract or		List the contract number of any
	the debtor has an executory									State the term	government
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zin	Country	of the debtor's interest	remaining	contract
Lillo	Contract of unexpired leads	Creditor Notice Hairio	Address 1	ATTN: LAUREN	Oity	Otato	ip	Journary	PROFESSIONAL SERVICES	Tomaming	Contract
2.114	LOOMIS SAYLES		ONE FINANCIAL CENTER	PITALIS	BOSTON	MA	02211		AGREEMENT	Evergreen	
	LYSLE BUCHBINDER		19 TULIP LANE		PALO ALTO	CA	94303		SERVICES-LEGAL	3/16/2016	
	M*MODAL FKA MEDQUIST		1000 BISHOPS GATE						SERVICES-		
2.116	TRANSCRIPTIONS, LTD.		BOULEVARD	SUITE 300	MT. ALUREL	NJ	08-54-4215		TRANSCRIPTION	4/30/2019	
	,								SERVICES-EQUIPMENT		
2.117	M.J. MECHANICAL SERVICES, INC.		1043 E. SAN CARLOS AVE.		SAN CARLOS	CA	94070		MAINTENANCE	1/1/2050	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.118	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	11/27/2014	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.119	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	8/31/2014	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.120	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	10/31/2014	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.121	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	12/14/2014	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.122	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	12/30/2014	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.123	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	11/30/2015	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.124	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	3/1/2016	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.125	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	4/30/2016	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.126	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	9/1/2016	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.127	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	9/27/2016	
	MACQUARIE EQUIPMENT				BLOOMFIELD				EQUIPMENT-		
2.128	FINANCE, INC.		2285 FRANKLIN ROAD	PO BOX 2017	HILLS	MI	48303-2017		LEASE/RENTAL	4/30/2017	
2.129	MAGVIEW		3915 NATIONAL DRIVE	SUITE 200	BURTONSVILLE	MD	20866		LICENSE-SOFTWARE	1/19/2019	
	MANATT, PHELPS AND PHILLIPS		11355 WEST OLYMPIC								
2.130	LLP		BOULEVARD		LOS ANGELES	CA	90064-1614		SERVICES-LEGAL	Evergreen	
		ANESTHESIA MEDICAL									
2.131	MANOOCHEHRIAN, ALI MD	GROUP	NO ADDRESS						SERVICES-CONSULTING	Evergreen	
					WOODLAND						
2.132	MATHEW ABRAHAM - SMARTMED		5850 CANOGA AVE	SUITE #400	HILLS	CA	91367		SERVICES-CONSULTING	10/6/2018	
	MATTEONI O'LAUGHLIN &										
2.133	HECHTMAN		848 THE ALAMEDA		SAN JOSE	CA	95126		SERVICES-LEGAL	Evergreen	
				2151 RIVER							
				PLAZA DR.,STE.							
	MAZARS USA LLP		C/O WEISERMAZARS LLP	205	SACRAMENTO	CA	95833		SERVICES-CONSULTING	12/31/2017	
2.135	MCG HEALTH, LLC		P.O. BOX 742350		ATLANTA	GA	30374-2350		LICENSE-SOFTWARE	2/19/2023	
	MCKESSON INFORMATION		5995 WINDWARD								
2.136	SOLUTIONS, INC.		PARKWAY		ALPHARETTA	GA	30005		LICENSE-SOFTWARE	12/11/2018	
	MCKESSON INFORMATION				SAN						
2.137	SOLUTIONS, INC.		ONE POST STREET		FRANCISCO	CA	94104		LICENSE-SOFTWARE	12/31/2018	

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	Name of other parties with whom the debtor has an executory	2 % N. W.			27	.			State what the contract or lease is for and the nature		List the contract number of any government
Line	contract or unexpired lease MCKESSON INFORMATION	Creditor Notice Name	Address 1 5995 WINDWARD	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
2 138	SOLUTIONS, INC.	ATTN.: GENERAL COUNSEL			ALPHARETTA	GA	30005		LICENSE-SOFTWARE	12/31/2018	
2.100	MCKESSON INFORMATION	MITH.: GENERAL GOONGEE	5995 WINDWARD		ALITAGETTA	O/ C	30003		EIGEINGE GGI TWYARE	12/01/2010	
2.139	SOLUTIONS, INC.	ATTN.: GENERAL COUNSEL			ALPHARETTA	GA	30005		LICENSE-SOFTWARE	6/2/2065	
	MCKESSON INFORMATION		5995 WINDWARD						MEMORANDUM OF		
2.140	SOLUTIONS, INC.	ATTN.: GENERAL COUNSEL	PARKWAY		ALPHARETTA	GA	30005		UNDERSTANDING	2/19/2065	
2 1/1	MCKESSON INFORMATION SOLUTIONS, INC.	ATTN.: GENERAL COUNSEL	5995 WINDWARD		ALPHARETTA	GA	30005		SERVICES-SOFTWARE MAINTENANCE AND SUPPORT	8/26/2019	
2.171	MCKESSON INFORMATION	ATTN.: GENERAL COONSEL	I ANNVAT		SAN	OA.	30003		3011 01(1	0/20/2013	
2 142	SOLUTIONS, INC.		ONE POST STREET		FRANCISCO	CA	94104		LICENSE-SOFTWARE	9/28/2018	
									TECHNOLOGY SERVICES	5,25,2010	
2.143	MD INSIDER		3015 MAIN STREET	SUITE 333	SANTA MONICA	CA	90405		AGREEMENT	6/28/2019	
2.144	MEDACTA USA, INC.		4725 CALLE QUETZAL #B		CAMARILLO	CA	93012		SUPPLIES-TOTAL JOINTS	5/31/2019	
	MEDICAL COURIER, INC.		176 OTTO CIRCLE		SACRAMENTO	CA	95822		SERVICES-COURIER	8/31/2015	
			MEDICAL DATA	425 E. COLORADO ST					SERVICES-SOFTWARE MAINTENANCE AND		
2.146	MEDICAL DATA EXCHANGE		EXCHANGE (MDX)	SUITE 120	GLENDALE	CA	91205		SUPPORT	10/1/2018	
2.147	MEDICAL INNOVATIONS, INC.	C/O MEDIVATORS	N.W.9841	P.O. BOX 1450	MINNEAPOLIS	MN	55485		PROFESSIONAL SERVICES AGREEMENT	6/30/2018	
2.148	MEDICITY, INC.		P.O. BOX 780708		PHILADELPHIA	PA	19178-0708		SERVICES-SOFTWARE MAINTENANCE AND SUPPORT	7/31/2019	
2.149	MEDICLEAN LINEN AND LAUNDRY		4500 DUNHAM ST		COMMERCE	CA	90040		SERVICES-LINEN SUPPLY	12/6/2017	
	MEDLINE INDUSTRIES, INC.		PO BOX 92301		CHICAGO	IL	60675-2301		SUPPLIES-LINEN	11/1/2018	
	MEDLINE INDUSTRIES, INC.		PO BOX 92301		CHICAGO	IL.	60675-2301		SUPPLIES-LINEN	11/30/2018	
	MEDLINE INDUSTRIES, INC.		PO BOX 92301		CHICAGO	IL	60675-2301		SUPPLIES-LINEN	5/14/2022	
	MEDLINE INDUSTRIES, INC.		PO BOX 92301		CHICAGO	IL	60675-2301		SUPPLY DISTRIBUTION AGREEMENT	12/31/2017	
2.154	MEDPLUS, INC.		P O BOX 691169		CINCINNATI	ОН	45269-1169		SERVICES-EQUIPMENT MAINTENANCE	9/30/2018	
2.155	MEDPLUS, INC.		P O BOX 691169		CINCINNATI	ОН	45269-1169		SERVICES-SOFTWARE MAINTENANCE AND SUPPORT	9/30/2018	
	MEDTRONIC SOFAMOR DANEK	ATTN.: LEGAL DEPT	2600 SOFAMOR DANEK						SUPPLIES-SPINAL		
2.156	USA, INC.	PRICING AGREEMENTS	DRIVE		MEMPHIS	TN	38132		HARDWARE	9/8/2016	
2.157	MEDTRONIC SOFAMOR DANEK USA, INC.	ROGER BAKER, DIRECTOR OF CORPORATE SALES	2600 SOFAMOR DANEK DRIVE		MEMPHIS	TN	38132		SUPPLIES-CATH LAB	9/8/2015	
2.158	MEDTRONIC USA, INC.		710 MEDTRONIC PKWY NE		MINNEAPOLIS	MN	55432-5604		MASTER PURCHASING AGREEMENT	6/11/2019	
2.159	MEDTRONIC USA, INC.		710 MEDTRONIC PKWY NE		MINNEAPOLIS	MN	55432-5604		SUPPLIES-DES MASTER PURCHASING	6/15/2019	
2.160	METREX RESEARCH, LLC	GENERAL MANAGER	1717 W. COLLINS AVENUE		ORANGE	CA	92867		AGREEMENT	9/28/2018	

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Executory Contracts and Unexpired Leases

	Name of other parties with whom the debtor has an executory	0 m N n			0.0	2 1.1	- :				List the contract number of any government
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
	THOMSON REUTERS HEALTHCARE, INC.) AKA TRUVEN				GREENWOOD				LICENSE-SOFTWARE		
2 161	HEALTH		6200 S. SYRACUSE WAY	SUITE 300	VILLAGE	CO	80111-4740		SUBSCRIPTION	12/31/2018	
	MICROPORT ORTHOPEDICS		0200 01 01111 10002 11711	00112 000	7.227.02		001111110		002001 11011	12/01/2010	
2.162	(FORMERLY WRIGHT MEDICAL)		P.O. BOX 842005		DALLAS	TX	75284-2005		SUPPLIES-TOTAL JOINTS	3/30/2019	
		LEGAL AND CORPORATE AFFAIRS, VOLUME							DISCOUNT PRICING		
2.163	MICROSOFT	LICENSING GROUP	ONE MICROSOFT WAY		REDMOND	WA	98052		AGREEMENT	7/27/2019	
2 164	MICROSOFT	LEGAL AND CORPORATE AFFAIRS, VOLUME LICENSING GROUP	ONE MICROSOFT WAY		REDMOND	WA	98052		LICENSE-SOFTWARE SUBSCRIPTION	6/26/2020	
2.101	MICROWEST SOFTWARE	LIGERONIO GIRCOI	10981 SAN DIEGO MISSION		KEDMOND	***	00002		COBCONII TICIV	0/20/2020	
2,165	SYSTEMS, INC.		RD	SUITE 210	SAN DIEGO	CA	92108		LICENSE-SOFTWARE	1/1/2065	
200	MICROWEST SOFTWARE		10981 SAN DIEGO MISSION	00.1.2.10	0, v 3.1200				SERVICES-SOFTWARE MAINTENANCE AND	1, 1,200	
2.166	SYSTEMS, INC.		RD	SUITE 210	SAN DIEGO	CA	92108		SUPPORT	3/31/2019	
2.167	MILLHOUSE, FELIX MD	RE MED DIRECTOR	1800 SULLIVAN AVE. # 302		DALY CITY	CA	94015		PHYSICIANS-CONSULTING SERVICES	4/30/2019	
			1043 E. SAN CARLOS						SERVICES-EQUIPMENT		
2.168	MJ MECHANICAL SERVICES, INC.		AVENUE		SAN CARLOS	CA	94070		MAINTENANCE	Evergreen	
									PROFESSIONAL SERVICES		
	MONDRIAN INVESTMENT GROUP	GENERAL PARTNER	1105 N. MARKET STREET	SUITE 1118	WILMINGTON	DE	19801		AGREEMENT	7/12/2019	
	MONTAGE LEGAL GROUP, LLC	ATTN LAURIE ROWEN	18 LONGSTREET		IRVINE	CA	92620		LETTER OF AGREEMENT	Evergreen	
2.171	MOSS ADAMS, LLP		P.O. BOX 101822		PASADENA	CA	91189-1822		LETTER OF AGREEMENT	Evergreen	
									PROFESSIONAL SERVICES		
2.172	MOSS ADAMS, LLP		P.O. BOX 101822		PASADENA	CA	91189-1822		AGREEMENT PROFESSIONAL SERVICES	7/6/2017	
2 173	MOSS ADAMS, LLP		P.O. BOX 101822		PASADENA	CA	91189-1822		AGREEMENT	5/4/2016	
	MOSS ADAMS, LLP		P.O. BOX 101822		PASADENA	CA	91189-1822		SERVICES-CONSULTING	Evergreen	
2.17-	INICOC ABANNO, ELI	ATTN.: PAUL SPIEGELMAN.	1 .O. BOX 101022		TAGABLIAA	O/ t	31103 1022		SERVICES-PHYSICIAN	Lvergreen	
2 175	MPB GROUP, LLC (BERYL)	CEO	3600 HARWOOD ROAD		BEDFORD	TX	76021		REFERRAL	8/31/2019	
	MUNGER, TOLLES & OLSON		P.O. BOX 515065		LOS ANGELES	CA	90051-5065		SERVICES-LEGAL	3/27/2018	
	,				SO. SAN				LICENSE-SOFTWARE		
2.177	MUZAK		383 E. GRAND AVENUE	STE. A	FRANCISCO	CA	94080-1934		SUBSCRIPTION	6/10/2023	
			9920 JEFFERSON						CONFIDENTIALITY & NON-		
	NANT CAPITAL, LLC	CHARLES KIM	BOULEVARD		CULVER CITY	CA	90232		DISCLOSURE	1/9/2020	
2.179	NANTHEALTH FKA ISIRONA, LLC		430 W. 5TH STREET	SUITE 800	PANAMA CITY	FL	32401		LICENSE-SOFTWARE	9/5/2019	
	NATIONAL HEALTH INFORMATION	· ·			ORMOND						
2.180	SHARING AND ANALYSIS CENTER	PRESIDENT	226 NORTH NOVA ROAD	#391	BEACH	FL	32174		MEMBERSHIP	6/10/2019	
	NAVEX GLOBAL (FORMERLY										
I	GLOBAL COMPLIANCE SERVICES,					1			PROFESSIONAL SERVICES		
2.181	INC.)		PO BOX 60941		CHARLOTTE	NC	28260-0941		AGREEMENT	Evergreen	
L			2 CHATUACHEE								
2.182	NEGLEY, OTT & ASSOCIATES		CROSSING		SAVANAH	GA	31411		SERVICES-CONSULTING	Evergreen	
2.183	NELSON AND ASSOCIATES		PO BOX 49195		SAN JOSE	CA	95161-9195		BUSINESS ASSOCIATE AGREEMENT	12/6/2018	

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Executory Contracts and Unexpired Le	ases

	Name of other parties with whom the debtor has an executory				5 11	•			State what the contract or lease is for and the nature	State the term	List the contract number of any government
Line	contract or unexpired lease	Creditor Notice Name	Address 1 11835 WEST OLYMPIC	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
2 18/	NELSON HARDIMAN, LLP		BLVD.	SUITE 900	LOS ANGELES	CA	90064		SERVICES-LEGAL	Evergreer	
2.104	INCESON HARDIMAN, EEI	JULIE CARLSON.	BEVB.	3011L 900	LOS ANGLELS	CA	30004		SERVICES-LEGAL	Lvergreer	
	NESTLE HEALTHCARE	CONTRACTS SENIOR	12500 WHITEWATER						COMMITTED PURCHASE		
2.185	NUTRITION, INC.	ANALYST	DRIVE		MINNETONKA	MN	55343		AGREEMENT	7/31/2017	,
		MICHAEL									
	NESTLE WATERS NORTH	BEHRENS/NATIONAL			SAN				SERVICES-BOTTLED		
2.186	AMERICA, INC.	ACCOUNT MANAGER	7 S. LINDEN AVE S.		FRANCISCO	CA	94080		WATER	11/30/2015	
2.187	NET HEALTH SYSTEMS, INC.		PO BOX 72046		CLEVELAND	OH	44192		LICENSE-SOFTWARE	12/26/2019	
		KATHLEEN WONG,							MASTER PURCHASING		
2.188	NEUROSTRUCTURES, INC.	DIRECTOR, RA AND QA	16 TECHNOLOGY DRIVE	SUITE 165	IRVINE	CA	92618		AGREEMENT	6/18/2040)
0.400	NEW YORK LIFE INVESTMENT		OOAG FARNAM OT		0144114	NE	00475 0004		PROFESSIONAL SERVICES	0/7/0040	
2.189	MANAGEMENT (NYLIM)		3316 FARNAM ST	1	OMAHA	NE	68175-0001	1	AGREEMENT MASTER PURCHASING	2/7/2019	'
2 100	NEXUS IS, INC.		1801 W OLYMPIC BLVD		PASADENA	CA	91199-1522		AGREEMENT	10/11/2018	,
2.190	NEXUS IS, INC.		1801 W OLTMPIC BLVD		PASADENA	CA	91199-1522		EQUIPMENT-	10/11/2010)
2 101	NFS LEASING, INC.		900 CUMMINGS CENTER		BEVERLY	MA	01915		LEASE/RENTAL	1/1/2020	1
2.131	IN O LEAGHNO, INC.		300 COMMINITOR CENTER		DEVERLE	1017 (01313		EQUIPMENT-	1/1/2020	'
2.192	NFS LEASING. INC.		900 CUMMINGS CENTER		BEVERLY	MA	01915		LEASE/RENTAL	2/1/2021	
	NORTHERN CALIFORNIA		18564 US HIGHWAY 18,						CONFIDENTIALITY & NON-		
2.193	PHYSICIANS NETWORK, INC.		SUITE 105		APPLE VALLEY	CA	92307		DISCLOSURE	8/31/2019)
			50 SOUTH LA SALLE								
2.194	NORTHERN TRUST COMPANY	STACY RYBAND	STREET, M-28		CHICAGO	IL	60603		TRUST AGREEMENT	Evergreer	l
	NTHRIVE REVENUE SYSTEMS,										
	LLC (FKA MEDASSESTS NET										
	REVENUE SYSTEMS, LLC FKA		200 NORTH POINT						LICENSE-SOFTWARE		
2.195	IMACS / ACCURO)		CENTER EAST	STE600	ALPHARETTA	GA	30022		SUBSCRIPTION	3/31/2019)
0.400	NTT DATA SERVICES AKA PEROT		C/O DELL USA L.P	PO BOX 910916	DACADENA	CA	91110-0916		SEDVICES CONSULTING	2/3/2020	
2.196	SYSTEMS		C/O DELL USA L.P	PO BOX 910916	PASADENA	CA	91110-0916		SERVICES-CONSULTING SUPPLIES-SPINAL	2/3/2020)
2 107	NUVASIVE, INC.		7475 LUSK BLVD		SAN DIEGO	CA	92121		HARDWARE	2/28/2016	
2.137	NOVASIVE, INC.		A PROFESSIONAL	100 LIGHT	SAN DIEGO	CA	92121		HARDWARL	2/20/2010	,
2.198	OBER KALER		CORPORATION	STREET	BALTIMORE	MD	21202		SERVICES-LEGAL	8/8/2018	3
	ONCOLOGY TECHNOLOGY						1=:		CONFIDENTIALITY & NON-	3, 3, 2010	
2.199	ASSOCIATES		4005 VERDUGO ROAD		LOS ANGELES	CA	90065		DISCLOSURE	1/14/2020)
	ONESOURCE PRINTER SERVICE		1562 CENTRE POINTE						SERVICES-PRINTER		
2.200	AND SUPPLY, INC.	PRESIDENT & CEO	DRIVE		MILPITALS	CA	95035		MAINTENANCE	9/19/2018	<u> </u>
									LICENSE-SOFTWARE		
2.201	OPSGENIE		450 W BROAD STREET	SUITE 421	FALLS CHURCH	VA	22046		SUBSCRIPTION	3/1/2019)
									SERVICES-SOFTWARE		
0.000	ODTH INIC		0445 M OTDEST 1944		MA OLUNIOTO:	DC	00007		MAINTENANCE AND	40/00/00:	
2.202	OPTILINK		2445 M STREET, NW	1	WASHINGTON	DC	20037	1	SUPPORT	12/30/2018	5
2 202	OPTUM360, LLC		1755 TELSATAR STREET	SUITE 400	COLORADO SPRINGS	СО	80920		LICENSE-SOFTWARE	8/31/2019	
2.203	OF TOWSOU, LLC		1700 TELOATAK STREET	P.O. BOX	SEKINGS	w	00920	1	LIGENSE-SUFTWARE	6/31/2019	'
2 204	ORGANOGENESIS INC.		DEPT 2542	122542	DALLAS	TX	75312-2542		LETTER OF AGREEMENT	3/25/2016	
2.204	CITCA MICOENTEGIC III.		52. 1 2072	P.O. BOX	2, (21, (0	17	70012 2042		MASTER PURCHASING	5/25/2010	
l	ORGANOGENESIS INC.		DEPT 2542	122542	DALLAS	TX	75312-2542		AGREEMENT	2/28/2018	

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Case No. 18-20151

	Name of other parties with whom the debtor has an executory				a.	.			State what the contract or lease is for and the nature		List the contract number of any government
Line	CONTRACT OF UNEXPIRED LASE	Creditor Notice Name	Address 1	Address 2	City	State	Zıp	Country	of the debtor's interest	remaining	contract
	(A JOHNSON AND JOHNSON	MANAGER, SALES									
2 206	COMPANY)	OPERATIONS	1001 US HIGHWAY 202		RARITAN	NJ	08869		BLOOD/ORGAN/TISSUE	12/8/2019	
2.200	ORTHO-CLINICAL DIAGNOSTICS	ATTN.: CONTRACT	1001 0011101111111 202		10 4 417 4 4	140	00000		DE00D/01(0/114/11000E	12/0/2010	
	(A JOHNSON AND JOHNSON	MANAGER, SALES									
2.207	COMPANY)	OPERATIONS	1001 US HIGHWAY 202		RARITAN	NJ	08869		SUPPLIES-LABORATORY	12/8/2019	
	OUTSIDE GC CA LLP		P.O. BOX 482		SHARON	MA	02067		LETTER OF AGREEMENT	Evergreen	
	OWEN, WICKERSHAM &				SAN						
2.209	ERICKSON, P.C.		455 MARKET STREET	SUITE 1910	FRANCISCO	CA	94105		SERVICES-LEGAL	Evergreen	
			FILE 1616 1801 W							Ĭ	
2.210	PACIFIC MEDICAL		OLYMPIC BLVD		PASADENA	CA	91199		EQUIPMENT-PURCHASE	7/10/2019	
									MASTER PURCHASING		
2.211	PARADIGM SPINE, LLC		505 PARK AVENUE	14TH FLOOR	NEW YORK	NY	10022		AGREEMENT	7/31/2019	
					SAN						
2.212	PARAGON LEGAL GROUP, P.C.		601 CALIFORNIA STREET	SUITE 615	FRANCISCO	CA	94108		SERVICES-LEGAL	Evergreen	
					FT						
2.213	PARO DECISION SUPPORT, LLC		PO BOX 39882		LAUDERDALE	FL	33339-9882		MASTER AGREEMENT	9/5/2020	
		GREATER LOS ANGELES							PHYSICIANS-CONSULTING		
	PARTO PARHAM M.D.	CARDIOLOGY	201 S. ALVARADO STREET	SUITE 612	LOS ANGELES	CA	90057		SERVICES	4/30/2019	
	PAYROLL EXPRESS, LLC		20398 BLAUER DRIVE		SARATOGA	CA	95070		MASTER AGREEMENT	Evergreen	
2.216	PERKINS COIE LLP		P.O. BOX 24643		SEATTLE	WA	98124-0643		SERVICES-LEGAL	Evergreen	
	PETER A. RIPPER AND ASSOCIATE, INC. DBA PARA HEALTHCARE FINANCIAL										
2.217	SERVICES		PO BOX 6885		HOLLYWOOD	FL	33021		MASTER AGREEMENT	9/19/2018	
	PETER A. RIPPER AND								CONFIDENTIALITY & NON-		
2.218	ASSOCIATES, INC.		PO BOX 6885		HOLLYWOOD	FL	33021		DISCLOSURE	8/4/2019	
									LICENSE-SOFTWARE		
2.219	PHARMACY ONESOURCE		3535 FACTORIA BLVD. SE	SUITE 440	BELLVUE	WA	98006		SUBSCRIPTION	12/29/2018	
	PHILIPS HEALTHCARE								SERVICES-SOFTWARE MAINTENANCE AND		
2.220	INFORMATICS, INC.		PO BOX 100355		ATLANTA	GA	30384-0355		SUPPORT	4/14/2019	
	Piolo		100 QUANNAPOWITT	01.1175 405),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				LIOENOE OOFTWARE	0/04/55:5	
2.221	PICIS		PARKWAY	SUITE 405	WAKEFIELD	MA	01880		LICENSE-SOFTWARE	8/31/2019	1
	PILLSBURY WINTHROP SHAW		D O DOY 740000		100 4105150	0.0	00074 0000		0507/1050 1 50 41	0/0/0040	
	PITTMAN LLP	1	P.O. BOX 742262	CLUTE 4000	LOS ANGELES	CA	90074-2262	1	SERVICES LEGAL	6/2/2016	
	POLSINELLI PC		100 S. FOURTH STREET	SUITE 1000	ST. LOUIS	MO	63102		SERVICES-LEGAL	7/19/2017 4/5/2020	
2.224	PRAXAIR		1900 LOVERRIDGE ROAD		PITTSBURG SAN JUAN	CA	94565		SUPPLIES-RESPIRATORY BUSINESS ASSOCIATE	4/5/2020	1
2.225	PREDIXON SOFTWARE		31910 DEL OBISPO	SUITE 120	CAPISTANO	CA	92675		AGREEMENT PROFESSIONAL SERVICES	Evergreen	
2 226	PRE-EMPLOY.COM. INC.		PO BOX 491570		REDDING	CA	96049		AGREEMENT	2/28/2019	
2.220	PREMIER PURCHASING	ATTN.: CHIEF EXECUTVE	13034 BALLANTYNE		INCODING	CA	30043		MASTER PURCHASING	2/20/2018	
2 227	PARTNERS. LP	OFFICER	CORPORATE PLACE		CHARLOTTE	NC	28277		AGREEMENT	Evergreen	
٢.٢٢١	PREMIER PURCHASING	ATTN.: CHIEF EXECUTVE	13034 BALLANTYNE		OHARLOTTL	INC	20211		/ CICLLIVILIVI	Lvergreen	
2 228	PARTNERS, LP	OFFICER	CORPORATE PLACE		CHARLOTTE	NC	28277		PARTNERSHIP	Evergreen	
2.220	PREMIER SOFTWARE	O. FIOLIC	ON OWNE LAGE		OI I/ II LOTTE	140	20211		LICENSE-SOFTWARE	Lvergreen	
	ASSOCIATES		997 WEST 950 NORTH	SUITE 200	CENTERVILLE	UT	84014	1	SUBSCRIPTION	7/31/2019	

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	Name of other parties with whom the debtor has an executory									State the term	List the contract number of any government
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
2 220	DDEMIED INC		13034 BALLANTYNE CORP		CHARLOTTE	NC	28277		LICENSE-SOFTWARE SUBSCRIPTION	4/14/2020	
2.230	PREMIER, INC.		13034 BALLANTYNE CORP		CHARLOTTE	INC	28211		SUBSCRIPTION	4/14/2020	
2 224	PREMIER, INC.		PLACE		CHARLOTTE	NC	28277		SERVICES-CONSULTING	Evergreen	
2.231	PREIVIER, INC.		PLACE		CHARLOTTE	INC	20211		SERVICES-CONSULTING	Evergreen	
2 222	PRESS GANEY AND ASSOCIATES		404 COLUMBIA PLACE		SOUTH BEND	IN	46601		SERVICES-SURVEY	3/31/2019	
2.232	FRESS GANET AND ASSOCIATES		404 COLONBIA FLACE		300111 BEND	IIN	40001		SERVICES-SOFTWARE	3/31/2018	'
			2809 SOUTH 160TH						MAINTENANCE AND		
2 222	PRODATA		STREET	SUITE 401	ОМАНА	NB	68130		SUPPORT	9/30/2018	
2.233	PRODIGY HEALTH SUPPLIER		SIREEI	3011E 401	OWANA	IND	00130		SUPPLY DISTRIBUTION	9/30/2010	
2 224	CORPORATION		P.O. 95429		GRAPEVINE	TX	76099-9734		AGREEMENT	8/1/2017	
2.234	PROFESSIONAL RESEARCH		1 .0. 33423		CIVAFEVINE	17	10033-3134		PROFESSIONAL SERVICES	0/1/2017	
2 225	CONSULTANTS, INC.		11326 P STREET		ОМАНА	NE	68137-2316		AGREEMENT	10/5/2016	
2.233	CONSULTANTS, INC.		11320 F SIKEET		OIVIANA	INE	00131-2310		MASTER PURCHASING	10/5/2016	'
2 226	PROGRESSIVE MEDICAL, INC.		997 HORAN DRIVE		FENTON	МО	63026		AGREEMENT	9/30/2018	
2.230	FROGRESSIVE WEDICAL, INC.		331 HORAIN DRIVE		FENION	IVIO	03020		MASTER PURCHASING	9/30/2018	
2 227	PROSIDYAN, INC.		20 TECHNOLOGY DRIVE		WARREN	NJ	07059		AGREEMENT	4/13/2019	
2.231	PROSIDYAN, INC.		30 TECHNOLOGY DRIVE		WARREN	INJ	07059		AGREEMENT	4/13/2018	
2 220	PROSKAUER ROSE LLP		650 POYDRAS STREET	SUITE 1800	NEW ORLEANS		70130-6146		SERVICES-LEGAL	F.,,,,,,,,,	
	PROSMAN, FAITH MD		700 WEST 6TH STREET	SUITE C	GILROY	CA	95020		SERVICES-LEGAL SERVICES-CONSULTING	Evergreen 1/1/2019	
	PSOMAS		P.O. BOX 51463	SUITE C	LOS ANGELES	CA	90051-5763		SERVICES-CONSULTING SERVICES-CONSULTING		
	Q-CENTRIX. LLC		1 NORTH FRANKLIN	SUITE 1800	CHICAGO	+	60606		MASTER AGREEMENT	Evergreen 4/23/2021	
	QUADRAMED CORPORATION		P.O. BOX 74008556	SUITE 1800	CHICAGO	IL IL	60674-8556		LICENSE-SOFTWARE	1/1/2065	
2.242	QUADRAMED CORPORATION		P.O. BOX 74008556		CHICAGO	IL	00074-8550			1/1/2060	
									SERVICES-HARDWARE		
0 0 40	OLIABBANED CORRODATION		D 0 D0V 74000550		01110400		00074 0550		AND SOFTWARE	5/04/0040	
2.243	QUADRAMED CORPORATION		P.O. BOX 74008556		CHICAGO	IL	60674-8556		MAINTENANCE	5/31/2019	
									SERVICES-HARDWARE AND SOFTWARE		
0 044	OLIADDAMED CODDODATION		D O DOY 74000550		01110400		00074 0550			F/04/0000	
2.244	QUADRAMED CORPORATION		P.O. BOX 74008556		CHICAGO	IL	60674-8556		MAINTENANCE	5/31/2020	
									SERVICES-SOFTWARE		
0 0 4 5	OLIADDAMED CODDODATION		D O DOY 74000550		01110400		00074 0550		MAINTENANCE AND	0/40/0040	
2.245	QUADRAMED CORPORATION		P.O. BOX 74008556		CHICAGO	IL	60674-8556		SUPPORT	3/18/2019	
l									SERVICES-SOFTWARE		
0.045	OLIABBANED CORPORATION		D O DOY 74000550		0.110.4.00	l	00074 0555		MAINTENANCE AND	F /0.4 /0.2 : 2	
2.246	QUADRAMED CORPORATION		P.O. BOX 74008556		CHICAGO	IL	60674-8556		SUPPORT	5/31/2019	
			005 0 5101155 0 555	407115:005		٠.	00047		050/4050 / 50 / 1	_	
2.247	QUINN EMANUEL		865 S. FIGUEROA STREET	101H FLOOR	LOS ANGELES	CA	90017		SERVICES-LEGAL	Evergreen	
0 6	DADIO KODEA		0700 14/11 01/12 5 5 1 1 5	OLUTE COO		٠.			MEMORANDUM OF	211125	
2.248	RADIO KOREA		3700 WILSHIRE BLVD.	SUITE 600	LOS ANGELES	CA	90010		UNDERSTANDING	8/4/2016	
									PHYSICIANS-CONSULTING		
	RAZAEE, MEHRDAD M.D.		2030 FOREST AVE	SUITE 210	SAN JOSE	CA	95128-833	1	SERVICES	4/30/2019	
2.250	REID & HELLYER		P.O. BOX 1300		RIVERSIDE	CA	92502-1300	1	SERVICES-LEGAL	7/6/2017	
l	RIGHT MANAGEMENT					l			0=5, #0=0 00,10, # =	10/0/5	
2.251	CONSULTANTS, INC.		24677 NETWORK PLACE		CHICAGO	IL	60673-1246		SERVICES-CONSULTING	10/2/2015	
l									SERVICES-SOFTWARE		
l									MAINTENANCE AND		
2.252	RL SOLUTIONS		1 YONGE STREET	SUITE 2300	TORONTO	ON	M5E 1E5	CANADA	SUPPORT	5/18/2019	

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	Name of other parties with whom the debtor has an executory									State the term	List the contract number of any government
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest ADMINISTRATIVE	remaining	contract
2 253	ROBERT HALF LEGAL		PO BOX 743295		LOS ANGELES	CA	90074-3295		SERVICES	8/10/2017	,
2.200	ROCHE DIAGNOSTICS		1 0 2007 10200	P.O. BOX	LOGYHTOLLLO		0007 1 0200		CERTIFICE	0/10/2011	
2.254	CORPORATION		MAIL CODE 5021	660367	DALLAS	TX	75266-0367		MASTER AGREEMENT	4/19/2023	3
	ROCHE DIAGNOSTICS			P.O. BOX					MASTER PURCHASING		
2.255	CORPORATION		MAIL CODE 5021	660367	DALLAS	TX	75266-0367		AGREEMENT	9/14/2021	
2.256	ROMANOFF CONSULTING		585 PINE CREEK ROAD		WALNUT CREEK	CA	94598		SERVICES-CONSULTING	6/30/2017	,
			12100 WILSHIRE								
2.257	ROSENBERG AND PICK		BOULEVARD	SUITE 560	LOS ANGELES	CA	90025		SERVICES-LEGAL	Evergreer	l
	RUBIN AND RAINE, A RMB INC.										
2.258	COMPANY		409 BERDEN PARK CIRCLE		KNOXVILLE	TN	37919		SERVICES-CONSULTING	Evergreer	1
	RUBIN AND RAINE, A RMB INC.			CRANBERRY					SERVICES-CASH		
2.259	COMPANY		446 ROUTE 35, BLDG. C	COMMONS	EATONTOWN	NJ	07724		MANAGEMENT	5/16/2019	
	RUBIN AND RAINE, A RMB INC.			CRANBERRY						0/00/00/	
2.260	COMPANY		446 ROUTE 35, BLDG. C	COMMONS	EATONTOWN	NJ	07724		SERVICES-COLLECTIONS	6/26/2019)
	D.//ANJ ABO		OO DINE OTDEET	El 00D 00	NEWYORK		40005		PROFESSIONAL SERVICES	7/04/0046	
	RYAN LABS SALEM & GREEN		88 PINE STREET 3604 FAIR OAKS BLVD.	FLOOR 32 SUITE 200	NEW YORK SACRAMENTO	NY CA	10005 95864-7256		AGREEMENT SERVICES-LEGAL	7/31/2019	
2.262	SAN MATEO HEALTH		3604 FAIR OAKS BLVD.	SUITE 200	SACRAMENTO	CA	95864-7256		SERVICES-LEGAL	Evergreer	
	COMMISSION DBA HEALTH PLAN		801 GATEWAY		SOUTH SAN						
2 262	OF SAN MATEO		BOULEVARD	SUITE 100	FRANCISCO	CA	94080		PAYOR AGREEMENT	4/1/2018	,
	SCHINDLER		16450 FOOTHILL BLVD.	SUITE 200	SYLMAR	CA	91342-1036		EQUIPMENT-PURCHASE	10/31/2016	
2.265	SEASPINE ORTHOPEDICS CORPORATION (FORMERLY INTEGRA LIFESCEIENCES)		5770 ARMADA DRIVE	ATTN: VP OF SALES, ORTHOBIOLOGI CS	CARLSBAD	CA	92008		SUPPLIES-SPINAL HARDWARE MASTER PURCHASING	3/31/2019	
2.266	SEDGWICK CMS COMPANY		PO BOX 14421		LEXINGTON	KY	40512-4421		AGREEMENT	12/31/2018	3
									MASTER PURCHASING		
2.267	SEDGWICK CMS COMPANY		PO BOX 14421		LEXINGTON	KY	40512-4421		AGREEMENT	Evergreer	l .
					MANHATTAN				PHYSICIANS-CONSULTING		
2.268	SEIDMAN, RICHARD MD		2317 PINE AVE		BEACH	CA	90266		SERVICES	Evergreer	1
2.269	SHARMA, POOJA, M.D.		255 N. WHITE ROAD	SUITE 200	SAN JOSE	CA	95127		PHYSICIANS-CONSULTING SERVICES	12/31/2018	3
2.270	SHIN, TAE M., M. D., INC.		1245 WILSHIRE BLVD.	#400	LOS ANGELES	CA	90017		PHYSICIANS-CONSULTING SERVICES SERVICES-SOFTWARE	4/30/2019)
	SIEMENS MEDICAL SOLUTIONS								MAINTENANCE AND		
2.271	USA, INC.		51 VALLEY STREAM PKWY		MALVERN	PA	19355		SUPPORT	6/30/2019)
	SIGNIFICANT CLEANING										
2.272	SERVICES		PO BOX 7702		SAN JOSE	CA	95150		LETTER OF AGREEMENT	5/14/2019)
2.273	SIMPLIFIEDNETWORKS		202 E. EARLL DRIVE	SUITE 140	PHOENIX	AZ	85012		SERVICES- TELECOMMUNICATIONS	9/11/2019)
	SINGER ASSOCIATES, INC.		47 KEARNY STREET	2ND FLOOR	SAN FRANCISCO	CA	94108		SERVICES-LEGAL	Evergreer	
2.275	SMITH & NEPHEW		P.O. BOX 205651		DALLAS	TX	75320-5651		SUPPLIES-TOTAL JOINTS	9/30/2019	

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	Name of other parties with whom								State what the contract or		List the contract number of any
	the debtor has an executory								lease is for and the nature		
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
					NEWBURY						
2.276	SMSI INC.		1168 PAN COURT	P.O. BOX	PARK	CA	91320		SERVICES-CONSULTING	12/15/2018	3
2 277	SODEVO CTM LLC		MSC 410672	415000	NASHVILLE	TN	27241 5000		MASTER AGREEMENT	10/3/2021	
2.211	SODEXO CTM LLC		MSC - 410672	P.O. BOX	INASHVILLE	IIN	37241-5000		MASTER AGREEMENT	10/3/2021	
2 279	SODEXO CTM LLC		MSC - 410672	415000	NASHVILLE	TN	37241-5000		SERVICES-CONSULTING	7/21/2019	
2.216	SODEXO CTIVILLE		WSC - 410072	413000	INASTIVILLE	IIN	37241-3000		SERVICES-CONSOLTING	1/21/2018	1
2 279	SONRAI GROUP, LLC		2654 INVITATIONAL DRIVE		OAKLAND TWP	мі	48363		SERVICES-CONSULTING	Evergreen	
2.273	CONTAIN GROOM, ELEC		2004 IIVVII/ATIOIVAE BIAIVE		O/IIIL/IIID IVVI	1011	40000		MASTER PURCHASING	Lvergreen	
2 280	SORIN GROUP USA. INC.		14401 WEST 65TH WAY		ARVADA	co	80004		AGREEMENT	6/30/2019)
	SPECTRUM HEALTH PARTNERS.		109 INTERNATIONAL		7.1.17.127.1				7.01.12.11.2.11	0,00,2010	
2.281			DRIVE	SUITE 140	FRANKLIN	TN	37067		SERVICES-CONSULTING	9/18/2015	;
									MASTER PURCHASING		
2.282	SPINE WAVE, INC.		3 ENTERPRISE DR	SUITE 210	SHELTON	CT	06484		AGREEMENT	8/31/2019	
									MASTER PURCHASING		
2.283	SPINEOLOGY, INC.		7800 3RD STREET	SUITE 600	SAINT PAUL	MN	55128-5455		AGREEMENT	5/31/2019	
	SQUIRE PATTON BOGGS (US) LLP		P.O. BOX 643051		CINCINNATI	OH	45264		SERVICES-LEGAL	7/20/2017	
	ST. JUDE MEDICAL		22400 NETWORK PLACE		CHICAGO	IL	60673-1224		SUPPLIES-CRM	12/31/2017	
	ST. JUDE MEDICAL		22400 NETWORK PLACE		CHICAGO	IL	60673-1224		SUPPLIES-VCD	7/31/2016	
2.287	STANFORD BLOOD CENTER		3373 HILLVIEW AVE		PALO ALTO	CA	94304-1204		BLOOD/ORGAN/TISSUE	8/31/2015	5
	STAT LAB MEDICAL PRODUCTS,		407 INTERCHANGE						MASTER PURCHASING		
2.288	INC.		STREET		MCKINNEY	TX	75071		AGREEMENT	1/31/2016	i
0.000	OTEMBLED DENING MD		045 00N00DD DDN/5		MENI O DADIC		0.4005		PHYSICIANS-CONSULTING	40/00/0005	
2.289	STEMPLER, DENNIS MD		315 CONCORD DRIVE		MENLO PARK	CA	94025		SERVICES	10/23/2065)
2 200	CTEDIANIE DUDY		2473 BETLO AVE		MOUNTAIN VIEW	CA	04040		SEDVICES LEGAL	F.,,,,,,,,,	
2.290	STEPHANIE RUBY		18837 BROOKHURST ST.,		FOUNTAIN	CA	94043		SERVICES-LEGAL	Evergreen	
2 201	STEVEN HIRSCH & ASSOC.		# 209		VALLEY	CA	92708-7302		SERVICES-CONSULTING	12/31/2014	
2.291	STEVENTIIRSCIT & ASSOC.		18837 BROOKHURST ST		FOUNTAIN	CA	92700-7302		SERVICES-CONSOLTING	12/31/2014	:
2 292	STEVEN HIRSCH & ASSOCIATES		# 209		VALLEY	CA	92708-7302		SERVICES-CONSULTING	12/31/2014	
	STRATEGIC HEALTH CARE		PO BOX 1346			J., (32700 7002		52.111626 551466211146	12/01/2014	
2.293	ANALYTICS				DAVIS	CA	95616		SERVICES-CONSULTING	9/30/2014	
					WOODCLIFF	1			PROFESSIONAL SERVICES	3, 55, 25, 1	
2.294	STRATEGY ASSET MANAGERS		50 TICE BOULEVARD	SUITE 130	LAKE	NJ	07677		AGREEMENT	6/16/2019)
	STRATUS		P.O. BOX 674954		DETROIT	MI	48267-4954		TELECOMMUNICATIONS	Evergreen	
	STRYKER ORTHOPAEDICS		BOX 93213		CHICAGO	IL	60673-3213		SUPPLIES-TOTAL JOINTS	5/17/2019)
2.297	STUDER GROUP, LLC		P.O. BOX 71676		CHICAGO	IL	60694-71676		SERVICES-CONSULTING	Evergreen	
			181 WEST HUNTINGTON								
2.298	SUN MICROSYSTEMS		DRIVE	SUITE #110	MONROVIA	CA	91016		LICENSE-SOFTWARE	12/1/2069)
	SUNQUEST INFORMATION										
1	SYSTEMS, INC. (FKA MISYS			250 SOUTH							
2.299	HOSPITAL SYSTEMS, INC.)		WILLIAMS CENTRE	WILLIAMS BLVD	TUCSON	ΑZ	85711-3609		LICENSE-SOFTWARE	6/30/2019)
	SUNQUEST INFORMATION										
	SYSTEMS, INC. (FKA MISYS		l	250 SOUTH		1				_	
2.300	HOSPITAL SYSTEMS, INC.)		WILLIAMS CENTRE	WILLIAMS BLVD	TUCSON	ΑZ	85711-3609		LICENSE-SOFTWARE	Evergreen	1

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Case No. 18-20151 Schedule G **Executory Contracts and Unexpired Leases**

Name of other parties with whom								State what the contract or		List the contract number of any
the debtor has an executory								lease is for and the nature	State the term	government
Line contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
SUNQUEST INFORMATION								SERVICES-SOFTWARE		
SYSTEMS, INC. (FKA MISYS			250 SOUTH					MAINTENANCE AND		
2.301 HOSPITAL SYSTEMS, INC.)		WILLIAMS CENTRE	WILLIAMS BLVD	TUCSON	ΑZ	85711-3609		SUPPORT	6/30/2019	
		234 EAST COLORADO						CONFIDENTIALITY & NON-		
2.302 SURGICAL CARE AFFILIATES, LLC		BLVD	SUITE 220	PASADENA	CA	91101		DISCLOSURE	10/19/2019	
SURGICAL INFORMATION										
2.303 SYSTEMS (SIS)		P.O. BOX 535226		ATLANTA	GA	30353-5226		LICENSE-SOFTWARE	1/1/2065	
SYMPHONY PERFORMANCE										
HEALTH, INC. DBA SPH								LICENSE-SOFTWARE		
2.304 ANALYTICS		500 E. MAIN STREET	SUITE 340	BRANFORD	CT	06405		SUBSCRIPTION	3/8/2020	
TALYST, INC. [LINK IS FOR								LICENSE-SOFTWARE		
2.305 CONTRACT #1001.6129E]		13555 SE 36TH STREET	SUITE 150	BELLEVUE	WA	98006		SUBSCRIPTION	9/22/2018	
TCG BUILDERS DBA THE CORE		890 N. MCCARTHY BLVD.								
2.306 GROUP MASTER AGREEMENT	THE CORE GROUP	#100		MILPITAS	CA	95035		SERVICES-CONSTRUCTION	4/30/2018	
THE HAYS GROUP, INC.S DBA								CONFIDENTIALITY & NON-		
2.307 HAYS COMPANIES		80 SOUTH EIGHT STREET	SUITE 700	MINNEAPOLIS	MN	55402		DISCLOSURE	Evergreen	
THE MARTIN VENTURE								CONFIDENTIALITY & NON-		
2.308 COMPANIES, LLC		40 BURTON HILLS BLVD.		NASHVILLE	TN	37215		DISCLOSURE	1/24/2019	
THE NORTH HIGHLAND COMPANY										
2.309 LLC		3333 PIEDMONT ROAD NE	SUITE 1000	ATLANTA	GA	30305		SERVICES-CONSULTING	5/30/2020	
THE OUTSOURCE GROUP (FKA										
2.310 ARM, FKA CCRS)		PO BOX 12414		NEWARK	NJ	07101-3514		SERVICES-COLLECTIONS	4/30/2019	
								PROFESSIONAL SERVICES		
2.311 THE SUPPORT GROUP, INC.		205 NEWBURY STREET	SUITE 204	FRAMINGHAM	MA	01701		AGREEMENT	9/14/2014	
TOWERS WATSON (FKA WATSON				SAN						
2.312 WYATT)		345 CALIFORNIA STREET	SUITE 1400	FRANCISCO	CA	94104-4100		SERVICES-CONSULTING	3/31/2019	
		140 GREGORY LANE,								
2.313 TOYON ASSOCIATES, INC.		SUITE 280		PLEASANT HILL	CA	94523		SERVICES-CONSULTING	4/10/2019	
		140 GREGORY LANE,								
2.314 TOYON ASSOCIATES, INC.		SUITE 280		PLEASANT HILL	CA	94523		SERVICES-CONSULTING	6/11/2019	
		140 GREGORY LANE,								
2.315 TOYON ASSOCIATES, INC.		SUITE 280		PLEASANT HILL	CA	94523		SERVICES-CONSULTING	Evergreen	
					1			LICENSE-SOFTWARE	10/01/5-:-	
2.316 TRACTMANAGER, INC.		DEPT # 2632	P.O. BOX 11407	BIRMINGHAM	AL	35246-2632		SUBSCRIPTION	12/31/2019	
				20014111	۵.				0/00/5	
2.317 TRAN DAVIS		2239 APPLE GREY COURT		ROCKLIN	CA	95765-5360		SERVICES-CONSULTING	2/28/2019	
0.040 TRIA OF OONIOLII TINO OCCUS		004 144 114 07	OLUTE 4400	SAN		04405		LETTER OF AGREEMENT	_	
2.318 TRIAGE CONSULTING GROUP		221 MAIN ST	SUITE 1100	FRANCISCO	CA	94105		LETTER OF AGREEMENT	Evergreen	
		5451 LAKEVIEW PARKWAY			l				0/00/5	
2.319 TRIMEDX, LLC		S DRIVE		INDIANAPOLIS	IN	46268		MASTER AGREEMENT	2/28/2019	
TRUVEN HEALTH ANALYTICS (AN		777 E EISENHOWER		ANN ABBOS		40400		LICENSE-SOFTWARE	10/01/02:0	
2.320 IBM COMPANY)		PARKWAY		ANN ARBOR	MI	48108		SUBSCRIPTION	12/31/2019	
DOOL TAMEDION INC		7070 014 011011444 55 000		DODT! AND	0.0	07004		OLIDBLIEG DEEIDG	0/00/00:0	
2.321 TZ MEDICAL, INC.		7272 SW DURHAM RD 800		PORTLAND	OR	97224		SUPPLIES-DEFIBS	2/28/2016	
0.000 110 001001 001/ 1110		10101 WOODLOCH		THE		77000		CONFIDENTIALITY & NON-	F/4.4/00:00	
2.322 US ONCOLOGY, INC.	l	FOREST	1	WOODLANDS	TX	77380		DISCLOSURE	5/14/2019	

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	Name of other parties with whom the debtor has an executory						_				List the contract number of any government
Line	contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	of the debtor's interest	remaining	contract
				31692 HORSESHOE							
222	VAN HALL LAW OFFICES		VAN HALL LAW OFFICES	DRIVE	EVERGREEN	СО	80439		SERVICES-LEGAL	Evergreen	
2.323	VASCULAR ASSOCIATES OF		VANTIALE LAW OFFICES	DRIVE	LVLKGKLLN	CO	00439		SERVICES-LEGAL	Lveigleen	
2 324	NORTHERN CALIF.		2512 SAMARITAN CT	SUITE E	SAN JOSE	CA	95124		SUPPLIES-CATH LAB	4/18/2017	
2.024	INOICHTIERRY GAEIL :		2312 3/10//1017/10	OOTTE E	O/ II V OOOL	O/ C	35124		MASTER PURCHASING	4/10/2017	
2.325	VASCULAR SOLUTIONS		6464 SYCAMORE CT		MINNEAPOLIS	MN	55369		AGREEMENT	3/31/2016	
			0.				00000		PROFESSIONAL SERVICES	0/01/2010	
2.326	VENDORMATE VISION		75 FIFTH STREET NW	SUITE 222	ATLANTA	GA	30308		AGREEMENT	5/13/2016	
					MOUNT					0.10,2010	
2.327	VERGE SOLUTIONS, LLC		DBA VERGE HEALTH	P.O. BOX 394	PLEASANT	SC	29465		LICENSE-SOFTWARE	3/30/2021	
	,		203 REDWOOD SHORES								
2.328	VERITY BASM HOLDCO, LLC		PKWY.	SUITE 700	REDWOOD CITY	CA	94065		PARTNERSHIP	Evergreen	
	,		2040 EAST MARIPOSA						BUSINESS ASSOCIATE	Ŭ	
2.329	VERITY BUSINESS SERVICES		AVENUE		EL SEGUNDO	CA	90245		AGREEMENT	Evergreen	
			203 REDWOOD SHORES						EQUIPMENT-		
2.330	VERITY HOLDINGS, LLC		PKWY.	SUITE 700	REDWOOD CITY	CA	94065		LEASE/RENTAL	7/1/2019	
		ATTN ACCOUNTS	75 REMITTANCE DRIVE,						PROFESSIONAL SERVICES		
2.331	VHA-UHC ALLIANCE NEWCO, INC.	RECEIVABLE	STE. 1855		CHICAGO	IL	60675-1855		AGREEMENT	12/31/2015	
			3716 SOUTH HOPE	RAN BUILDING					CONFIDENTIALITY & NON-		
2.332	VIVACE SYSTEMS, LLC		STREET	SUITE 316	LOS ANGELES	CA	90089-0001		DISCLOSURE	3/7/2019	
			75 REMITTANCE								
2.333	VIZIENT, AN MDS COMPANY	ATTN ACCTS. RECEIVABLE	DR.,STE.1855		CHICAGO	IL	60675-1855		LETTER OF INTENT (LOI)	6/15/2017	
									CONFIDENTIALITY & NON-		
2.334	VMDOC, INC.		2460 SAMARITAN DRIVE		SAN JOSE	CA	91524		DISCLOSURE	2/19/2020	
			l							_	
2.335	VOICEBROOK, INC.		1983 MARCUS AVENUE	SUITE 105	LAKE SUCCESS	NY	11042		LICENSE-SOFTWARE	Evergreen	
									SERVICES-HARDWARE		
	VOIDEDDOOK INO		1000 144 501 10 41 (51)	011175 405			11010		AND SOFTWARE	4/04/0040	
2.336	VOICEBROOK, INC.		1983 MARCUS AVENUE	SUITE 105	LAKE SUCCESS	NY	11042		MAINTENANCE	4/24/2018	
0 007	VOY NETWORK COLUTIONS		DOOD MARINA BLVD	OLUTE 400	DDIODANIE	0.4	04005		SERVICES-	4/04/0040	
2.337	VOX NETWORK SOLUTIONS		8000 MARINA BLVD.	SUITE 130	BRISBANE	CA	94005		TELECOMMUNICATIONS	1/31/2019	
2 335	VSI HEALTHCARE INC		1392 BORREGAS AVENUE		SUNNYVALE	CA	94089		MASTER AGREEMENT	10/2/2014	
۵.000	VOLUEAL ITTOAKE INC		10240 SORRENTO VALLEY		COININI VALL	UA.	37003		LICENSE-SOFTWARE	10/2/2014	
2 330	WEBSENSE		ROAD		SAN DIEGO	CA	92121		SUBSCRIPTION	12/18/2018	
	WEIS INTERNATIONAL INC.		18610 RACHEL LANE		AROMAS	CA	95004		SERVICES-CONSULTING	12/31/2015	
	WEISS. JAMIE MD		6315 W 83RD STREET		LOS ANGELES	CA	90045		SERVICES-CONSULTING	1/1/2019	
	WELLINGON TRUST COMPANY		75 STATE STREET		BOSTON	MA	02109		INVESTMENT	Evergreen	
									MASTER PURCHASING	_:::g::0:::	
2.343	WENZEL SPINE, INC.		1130 RUTHERFORD LN	SUITE 200	AUSTIN	TX	78753		AGREEMENT	4/4/2020	
2.344	WILSHIRE ASSOCIATES		1299 OCEAN AVE, STE 700		SANTA MONICA	CA	90401-1085		SERVICES-CONSULTING	5/31/2019	
									ADMINISTRATIVE		
2.345	WITT KIEFFER		1900 POWELL STREET	SUITE 840	EMERYVILLE	CA	94608		SERVICES	3/31/2017	
									PROFESSIONAL SERVICES		
2 346	WITT KIEFFER		1900 POWELL STREET	SUITE 840	EMERYVILLE	CA	94608	1	AGREEMENT	4/30/2016	

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Case No. 18-20151 Schedule G

Executory Contracts and Unexpired Leases

Line	Name of other parties with whom the debtor has an executory contract or unexpired lease	Creditor Notice Name	Address 1	Address 2	City	State	Zip	Country	State what the contract or lease is for and the nature of the debtor's interest	State the term remaining	List the contract number of any government contract
	WOLTERS KLUWER HEALTH FKA								SERVICES-SOFTWARE MAINTENANCE AND		
2.347	PHARMACY ONESOURCE, INC.		P.O. BOX 1610		HAGERSTOWN	MD	21741-1610		SUPPORT	12/31/2019	
			6230 STONERIDGE MALL						LICENSE-SOFTWARE		
2.348	WORKDAY, INC.		ROAD		PLEASANTON	CA	94588		SUBSCRIPTION	10/30/2022	
2.349	ZAYO GROUP, LLC		1821 30TH STREET, UNIT A		BOULDER	СО	80301		MASTER AGREEMENT	12/26/2019	
2.350	ZERIVA		6590 SHILOH ROAD EAST	SUITE D	ALPHARETTA	GA	30005		EQUIPMENT-WARRANTY	8/31/2019	
2.351	ZIMMER US, INC.		200 WEST OHIO AVE		DOVER	ОН	44622		SUPPLIES-TOTAL JOINTS	7/30/2020	
2.352	ZIRMED, INC.			6565 N. MACARTHUR BLVD., STE 260	IRVING	TX	75039		LETTER OF AGREEMENT	9/26/2018	
2.353	ZONES		1102 15TH STREET SW	SUITE 102	AUBURN	WA	98001		BUSINESS ASSOCIATE AGREEMENT	1/1/2060	

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	G
Name of Codebior	Address	Address 2	City	State	ΖΙΡ	Professional Research	_ D		G
O'Connor Hospital	11326 P Street		Omaha	NE	68137-2316	Consultants, Inc.			X
	140 Gregory Lane,					,			
O'Connor Hospital	Suite 280		Pleasant Hill	CA	94523	Toyon Associates, Inc.			Х
,			San						
O'Connor Hospital	150 California Street	Suite 2200	Francisco	CA	90262	Dumas & Clark LLP			Х
	1900 Avenue of the					Jeffer Mangels Butler & Mitchell			
O'Connor Hospital	Stars, 7th Floor		Los Angeles	CA	90067-4308	LLP			X
O'Connor Hospital	2105 Forest Avenue		San Jose	CA	95128	GE HFS, LLC	Х		
·						NFS Leasing, Inc.; People's			
O'Connor Hospital	2105 Forest Avenue		San Jose	CA	95128	United Bank	Χ		
O'Connor Hospital	2105 Forest Avenue		San Jose	CA	95128	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2015A, B, C and D	X		
O'Connor Hospital	2105 Forest Avenue		San Jose	CA	95128	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2017A	X		
O'Connor Hospital	2105 Forest Avenue		San Jose	CA	95128	UMB Bank N.A., as successor Master Trustee for the California Statewide Communities Development Authority Revenue Bonds (Daughters of Charity Health System), Series 2005A, G and H	X		

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Name of codebtor	Address 1	Address 2	City	Ctoto	7:n	Name of creditor	2	E/F	
Name of codeptor	Address 1	Address 2	City	State	Zip	Name of Creditor	D	E/F	G
O'Connor Hospital	22400 Network Place		Chicago	IL	60673-1224	St. Jude Medical			Х
	303 North Glenoaks		1 110			Law Offices of Stephenson,			
O'Connor Hospital	Blvd.	Suite 700	Burbank	CA	91502	Acquisto & Coleman			Χ
	333 S Hope St, Los								
O'Connor Hospital	Angeles 90071		Los Angeles	CA	90071	Bank of America			Χ
O'Connor Hospital	3373 Hillview Ave		Palo Alto	CA	94304-1204	Stanford Blood Center			Χ
- Como Hospital	DRC LLC dba	P.O. Box	1 alo Alto		34304 1204	Acusis (FKA Digital Records			
O'Connor Hospital	ACUSIS	931541	Cleveland	ОН	44193	Corp)			Х
C Common Freedpital	7100010	301041	Olevelaria	011	14100	Professional Research			
Saint Louise Regional Hospital	11326 P Street		Omaha	NE	68137-2316	Consultants, Inc.			Х
Came Ecolog Regional Freepital	140 Gregory Lane,		Omana	11-	00107 2010	Concentante, me.			
Saint Louise Regional Hospital	Suite 280		Pleasant Hill	CA	94523	Toyon Associates, Inc.			Х
3			San						
Saint Louise Regional Hospital	150 California Street	Suite 2200	Francisco	CA	90262	Dumas & Clark LLP			Χ
	1900 Avenue of the					Jeffer Mangels Butler & Mitchell			
Saint Louise Regional Hospital	Stars, 7th Floor		Los Angeles	CA	90067-4308	LLP			Χ
Saint Louise Regional Hospital	22400 Network Place		Chicago	IL	60673-1224	St. Jude Medical			Χ
Saint Louise Regional Hospital	303 North Glenoaks		Criicago	IL.	00073-1224	Law Offices of Stephenson,			
Saint Louise Regional Hospital	Blvd.	Suite 700	Burbank	CA	91502	Acquisto & Coleman			Х
Saint Louise Regional Hospital	333 S Hope St, Los	Suite 700	Bulbalik	CA	91302	Acquisto & Coleman			^
Saint Louise Regional Hospital	Angeles 90071		Los Angeles	CA	90071	Bank of America			Х
	<u> </u>		<u> </u>			NFS Leasing, Inc.; People's			
Saint Louise Regional Hospital	9400 No Name Uno		Gilroy	CA	95020	United Bank	Х		
						U.S. Bank National Association,			
						as Master Trustee for the			
						California Public Finance			
						Authority Revenue Notes (Verity			
	0400 NI NI		0.1	0.4	05000	Health System) Series 2015A, B,	,,		
Saint Louise Regional Hospital	9400 No Name Uno		Gilroy	CA	95020	C and D	Х		

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	Ð
						U.S. Bank National Association,			ĺ
						as Master Trustee for the			ĺ
						California Public Finance			
						Authority Revenue Notes (Verity			ĺ
Saint Louise Regional Hospital	9400 No Name Uno		Gilroy	CA	95020	Health System) Series 2017A	Χ		
						UMB Bank N.A., as successor			
						Master Trustee for the California			
						Statewide Communities			
						Development Authority Revenue			
						Bonds (Daughters of Charity			
						Health System), Series 2005A, G			
Saint Louise Regional Hospital	9400 No Name Uno		Gilroy	CA	95020	and H	Χ		
Can't Esaiss Regional Frespital	DRC LLC dba	P.O. Box	Cincy	1071	00020	Acusis (FKA Digital Records			
Saint Louise Regional Hospital	ACUSIS	931541	Cleveland	ОН	44193	Corp)			Х
Camin Zouros (tograma: 1 topria:	7.000.0		0.010.0	1	11100	Professional Research			
Seton Medical Center	11326 P Street		Omaha	NE	68137-2316	Consultants, Inc.			X
	140 Gregory Lane,					,			
Seton Medical Center	Suite 280		Pleasant Hill	CA	94523	Toyon Associates, Inc.			X
			San						
Seton Medical Center	150 California Street	Suite 2200	Francisco	CA	90262	Dumas & Clark LLP			X
	1900 Avenue of the					Jeffer Mangels Butler & Mitchell			
Seton Medical Center	Stars, 7th Floor		Los Angeles	CA	90067-4308	LLP			X
	1900 Sullivan								
Seton Medical Center	Avenue		Daly City	CA	94015	GE HFS, LLC	Χ		
	1900 Sullivan								
Seton Medical Center	Avenue		Daly City	CA	94015	Med One Capital Funding, LLC	Χ		
	1900 Sullivan					NFS Leasing, Inc.; People's			
Seton Medical Center	Avenue		Daly City	CA	94015	United Bank	Χ		1

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	G
Seton Medical Center	1900 Sullivan Avenue		Daly City	CA	94015	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2015A, B, C and D	X		
Seton Medical Center	1900 Sullivan Avenue		Daly City	CA	94015	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2017A	X		
Seton Medical Center	1900 Sullivan Avenue		Daly City	CA	94015	UMB Bank N.A., as successor Master Trustee for the California Statewide Communities Development Authority Revenue Bonds (Daughters of Charity Health System), Series 2005A, G and H	X		
Seton Medical Center	22400 Network Place		Chicago	IL	60673-1224	St. Jude Medical			Х
Seton Medical Center	303 North Glenoaks Blvd.	Suite 700	Burbank	CA	91502	Law Offices of Stephenson, Acquisto & Coleman			X
Seton Medical Center	333 S Hope St, Los Angeles 90071		Los Angeles	СА	90071	Bank of America			Х
Seton Medical Center	530 Lytton Avenue, 2Nd Floor		Palo Alto	CA	94301	Ibarra, Audra			Х
Seton Medical Center	5830 Granite Parkway	Suite 1100	Plano	TX	75024	NUVECTRA			Х
Seton Medical Center	6464 Sycamore Ct		Minneapolis	MN	55369	Vascular Solutions, Inc.			X

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	D
	7 tatal 000 T	, radi coo I				Tiams of Grounds			
	801 Gateway Blvd.,		South San			San Mateo Health Commission			
Seton Medical Center	Suite 100		Francisco	CA	94080	dba Health Plan of San Mateo			X
	1055 W. 7th Street,								
St. Francis Medical Center	10th Floor		Los Angeles	CA	90017	LA Care Health Plan			X
						Professional Research			
St. Francis Medical Center	11326 P Street		Omaha	NE	68137-2316	Consultants, Inc.			X
			San						
St. Francis Medical Center	150 California Street	Suite 2200	Francisco	CA	90262	Dumas & Clark LLP			X
	1900 Avenue of the					Jeffer Mangels Butler & Mitchell			
St. Francis Medical Center	Stars, 7th Floor		Los Angeles	CA	90067-4308	LLP			X
St. Francis Medical Center	22400 Network Place		Chicago	IL	60673-1224	St. Jude Medical			X
			Manhattan						
St. Francis Medical Center	2317 Pine Ave		Beach	CA	90266	Seidman, Richard MD			X
	333 S Hope St, Los								
St. Francis Medical Center	Angeles 90071		Los Angeles	CA	90071	Bank of America			Х
	333 W. San Carlos								
St. Francis Medical Center	Street	Suite 600	San Jose	CA	95110-2731	Kenyon & Kenyon LLP			X
	3630 East Imperial								
St. Francis Medical Center	Highway		Lynwood	CA	90262	GE HFS, LLC	Χ		
	3630 East Imperial								
St. Francis Medical Center	Highway		Lynwood	CA	90262	GE HFS, LLC	Χ		
	3630 East Imperial								
St. Francis Medical Center	Highway		Lynwood	CA	90262	Med One Capital Funding, LLC	Χ		
	3630 East Imperial					NFS Leasing, Inc.; People's			
St. Francis Medical Center	Highway		Lynwood	CA	90262	United Bank	Χ		
						U.S. Bank National Association,			ĺ
						as Master Trustee for the			
						California Public Finance			
						Authority Revenue Notes (Verity			
	3630 East Imperial					Health System) Series 2015A, B,			
St. Francis Medical Center	Highway		Lynwood	CA	90262	C and D	Χ		

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	G
St. Francis Medical Center	3630 East Imperial Highway		Lynwood	CA	90262	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2017A	X		
St. Francis Medical Center	3630 East Imperial Highway		Lynwood	CA	90262	UMB Bank N.A., as successor Master Trustee for the California Statewide Communities Development Authority Revenue Bonds (Daughters of Charity Health System), Series 2005A, G and H	X		
St. Francis Medical Center	6464 Sycamore Ct		Minneapolis	MN	55369	Vascular Solutions, Inc.			х
St. Vincent Medical Center	1055 W. 7th Street, 10th Floor		Los Angeles	CA	90017	LA Care Health Plan			Х
St. Vincent Medical Center	11326 P Street		Omaha	NE	68137-2316	Professional Research Consultants, Inc.			Х
St. Vincent Medical Center	150 California Street	Suite 2200	San Francisco	CA	90262	Dumas & Clark LLP			Х
St. Vincent Medical Center	1900 Avenue of the Stars, 7th Floor		Los Angeles	СА	90067-4308	Jeffer Mangels Butler & Mitchell LLP			Х
St. Vincent Medical Center	2131 W Third St	Anesthesia Dept	Los Angeles	CA	90057	Cox, Dwayne MD			Х
St. Vincent Medical Center	2131 West Third Street		Los Angeles	CA	90057	GE HFS, LLC	Х		
St. Vincent Medical Center	2131 West Third Street		Los Angeles	CA	90057	GE HFS, LLC	Х		
St. Vincent Medical Center	2131 West Third Street		Los Angeles	СА	90057	Med One Capital Funding, LLC	Х		
St. Vincent Medical Center	2131 West Third Street		Los Angeles	CA	90057	NFS Leasing, Inc.; People's United Bank	Х		

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	G
St. Vincent Medical Center	2131 West Third Street		Los Angeles	CA	90057	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2015A, B, C and D	X		
St. Vincent Medical Center	2131 West Third Street		Los Angeles	CA	90057	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2017A	X		
St. Vincent Medical Center	2131 West Third Street		Los Angeles	CA	90057	UMB Bank N.A., as successor Master Trustee for the California Statewide Communities Development Authority Revenue Bonds (Daughters of Charity Health System), Series 2005A, G and H	X		
St. Vincent Medical Center	22400 Network Place		Chicago	IL	60673-1224	St. Jude Medical			Х
St. Vincent Medical Center	26000 Altamont Rd.		Los Altos Hills	CA	94022	LHMs DCHS CBS			Х
St. Vincent Medical Center	26000 Altamont Rd.		Los Altos Hills	CA	94022	LHMs DCHS CBS			Х
St. Vincent Medical Center	26000 Altamont Rd.		Los Altos Hills	СА	94022	LHMs DCHS CBS			Х
St. Vincent Medical Center	333 S Hope St, Los Angeles 90071		Los Angeles	СА	90071	Bank of America			Х
St. Vincent Medical Center	6464 Sycamore Ct		Minneapolis	MN	55369	Vascular Solutions, Inc.			Х

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Name of codebtor	Address 1	Address 2	City	State	Zip	Name of creditor	D	E/F	G
	No Address On								
St. Vincent Medical Center	Contract					Carpenter, Thomas J. MD			Х
Verity Holdings, LLC	2040 E. Mariposa Avenue		El Segundo	CA	90245	U.S. Bank National Association, as Master Trustee for the California Public Finance Authority Revenue Notes (Verity Health System) Series 2015A, B, C and D	X		
venty Holdings, LLC	Avenue		Li Seguildo		90243	C and D			
						U.S. Bank National Association,			
						as Master Trustee for the California Public Finance			
	2040 E. Mariposa					Authority Revenue Notes (Verity			
Verity Holdings, LLC	Avenue		El Segundo	CA	90245	Health System) Series 2017A	Χ		
Verity Holdings, LLC	P.O. Box 32185		New York	NY	10087-2185	Ankura Consulting Group			X
	1900 Avenue of the					Jeffer Mangels Butler & Mitchell			
Verity Medical Foundation	Stars, 7th Floor		Los Angeles	CA	90067-4308	LLP			X