

Fill in this information to identify the case:

Debtor name Gilbert, Barbee, Moore & McIlvoy, P.S.C.

United States Bankruptcy Court for the: WESTERN DISTRICT OF KENTUCKY

Case number (if known) 22-10763

Check if this is an amended filing

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.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with 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, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- 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 _____

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

Executed on January 20, 2023

X /s/ Steven K. Sinclair
Signature of individual signing on behalf of debtor

Steven K. Sinclair
Printed name

Chief Financial Officer
Position or relationship to debtor

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**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>24,648,300.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>32,605,252.80</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>57,253,552.80</u>

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, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>22,583,703.16</u>
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 <i>Schedule E/F</i>	\$ <u>0.00</u>
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 <i>Schedule E/F</i>	+\$ <u>123,676,378.49</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>146,260,081.65</u>

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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.

Part 1: Cash and cash equivalents

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 owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. <u>US Bank</u>	<u>Checking</u>	<u>3953</u>	<u>\$704,708.34</u>
3.2. <u>US Bank</u>	<u>Checking</u>	<u>8320</u>	<u>\$43,875.09</u>
3.3. <u>US Bank</u>	<u>Sweep</u>	<u>2782</u>	<u>\$0.00</u>
3.4. <u>US Bank</u>	<u>Sweep</u>	<u>6591</u>	<u>\$2,772,036.62</u>

4. **Other cash equivalents** (*Identify all*)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$3,520,620.05

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes Fill in the information below.

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12. **Total of Part 3.** **\$16,428,574.00**
Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. Does the debtor own any investments?

- No. Go to Part 5.
- Yes Fill in the information below.

	Valuation method used for current value	Current value of debtor's interest
14. Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock:		
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		
16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1 Describe:		
16.1. <u>Fixed income investments held at US Bank</u>		\$1,037,275.00

17. **Total of Part 4.** **\$1,037,275.00**
Add lines 14 through 16. Copy the total to line 83.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor 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 resale				
22. Other inventory or supplies Drugs and medical inventory Approx. 1-week supply across all locations		\$0.00		\$1,026,718.47

23. **Total of Part 5.** **\$1,026,718.47**
Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**
 No
 Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**
 No

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Yes. Book value 0.00 Valuation method _____ Current Value 0.00

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming 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.

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.
 Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.
 Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2000 Ford F-250 180,000 miles	\$0.00		\$3,705.00
47.2. 2008 United UXT Trailer	\$0.00		\$3,150.00
47.3. 2016 Honda HRV LL 74,000 miles	\$0.00		\$12,207.00
47.4. 2017 Ford Transit Van 63,000 miles	\$0.00		\$29,711.00
48. Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
See attachment A/B 1	\$6,188,589.10	Appraisal	\$9,100,000.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$9,148,773.00

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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 professional within the last year?
 No
 Yes

Part 9: Real property

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

- No. Go to Part 10.
 Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Medical Office Building 201 Park St. Bowling Green, KY	Fee simple	\$3,142,289.00	Tax records	\$9,975,000.00
55.2. Parking Lot 123 Park St. Bowling Green, KY	Fee simple	\$200,622.00	Tax records	\$275,000.00
55.3. Parking Lot 522 2nd Ave. East Bowling Green, KY	Fee simple	\$11,207.00	Tax records	\$180,000.00
55.4. Parking Lot 536 2nd Ave. East Bowling Green, KY	Fee simple	\$56,174.00	Tax records	\$77,000.00
55.5. Storage Building 640 3rd Ave. East Bowling Green, KY	Fee simple	\$101,824.00	Tax records	\$160,000.00
55.6. Parking Lot 125 Chestnut St. Bowling Green, KY	Fee simple	\$49,901.00	Tax records	\$62,500.00
55.7. Parking Lot 134 Chestnut St. Bowling Green, KY	Fee simple	\$442,941.00	Tax records	\$495,000.00

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55.8. Parking Lot 139 Chestnut St. Bowling Green, KY	Fee simple	\$35,382.00	Tax records	\$48,500.00
55.9. Vacant Lot 140 Chestnut St. Bowling Green, KY	Fee simple	\$147,307.00	Tax records	\$124,300.00
55.10 Parking Lot 149 Chestnut St. Bowling Green, KY	Fee simple	\$83,534.00	Tax records	\$50,000.00
55.11 Parking Lot 223 Chestnut St. Bowling Green, KY	Fee simple	\$41,385.00	Tax records	\$68,000.00
55.12 Medical Office Building 2724 Nashville Road Bowling Green, KY	Fee simple	\$10,137,271.00	Tax records	\$11,700,000.00
55.13 Residential House 119 Chestnut St. Bowling Green, KY	Fee simple subject to lease	\$49,901.00	Tax records	\$75,000.00
55.14 Vacant Lot 129 US 31W Bypass Bowling Green, KY	Fee simple subject to lease	\$443,500.00	Tax records	\$475,000.00
55.15 Vacant Lot 115 Chestnut St. Bowling Green, KY	Fee simple	\$59,748.00	Tax records	\$50,000.00
55.16 Vacant Lot 117 Chestnut St. Bowling Green, KY	Fee simple	\$38,771.00	Tax records	\$43,500.00
55.17 Vacant Lot 121 US 31W Bypass Bowling Green, KY	Fee simple	\$516,918.00	Tax records	\$513,500.00
55.18 Vacant Lot 123 US 31W Bypass Bowling Green, KY	Fee simple	\$201,331.00	Tax records	\$200,000.00
55.19 Vacant Lot 420 Chestnut St. Bowling Green, KY	Fee simple	\$86,160.00	Tax records	\$76,000.00

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56. **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.

\$24,648,300.00

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- No
 Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- No
 Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- No. Go to Part 11.
 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
60. Patents, copyrights, trademarks, and trade secrets <u>Graves-Gilbert Clinic logo/trademark</u>	<u>\$0.00</u>		<u>Unknown</u>
61. Internet domain names and websites <u>gravesgilbert.com</u>	<u>\$0.00</u>		<u>Unknown</u>
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations <u>Patient EMR records</u>	<u>\$0.00</u>		<u>Unknown</u>

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?**

- No
 Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- No
 Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- No
 Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

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- No. Go to Part 12.
- Yes Fill in the information below.

		Current value of debtor's interest
71.	Notes receivable Description (include name of obligor) Employee advances	
	$\frac{537,125.89}{\text{Total face amount}} - \frac{0.00}{\text{doubtful or uncollectible amount}} =$	\$537,125.89
72.	Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local) Federal Net Operating Loss Carryover (21% Corporate Rate)	Tax year <u>2021</u> \$21,900.90
	Federal Business Credit Carryover	Tax year <u>2021</u> \$19,059.00
73.	Interests in insurance policies or annuities Malpractice - Practice Entity Professional Liability and Extender Employee Professional Liability policy issued by State Volunteer Mutual Insurance Company Expires: 01/01/24	Unknown
	Malpractice - Blanket (Shared) Excess Medical Professional Liability policy issued by State Volunteer Mutual Insurance Company Expires: 01/01/24	Unknown
	Cyber Security/Ransomware policy issued by Beazley Group Expires: 08/14/23	Unknown
	Workers Compensation policy issued by ClearPath Mutual Expires: 01/01/24	\$0.00
	Property, General Liability, Auto, Commercial Umbrella policy issued by Cincinnati Insurance Company Expires: 02/01/23	Unknown
	Directors & Officers, Employment Practices, Fiduciary Liability, Crime Coverage policy issued by Cincinnati Insurance Company Expires: 06/16/25	Unknown
	Stop Loss policy issued by HCC Life Insurance Company	Unknown
74.	Causes of action against third parties (whether or not a lawsuit)	

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has been filed)

Bad faith claims related to Duff litigation Unknown

Nature of claim	<u>Bad Faith Insurance Claim</u>
Amount requested	<u>\$0.00</u>

Various class action settlements with claims submitted Unknown

Nature of claim	_____
Amount requested	<u>\$0.00</u>

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

Other Receivables

- BGDR, LLC - \$15.00
- Susan Basham Travel/Payroll - \$19.00
- Cash Balance Plan - \$64,547.00
- Dr. Shalini Chhabra Vanguard 401(k) - \$1,038.47
- Clinic Optical - \$273.90
- Clinic Pharmacy - \$37,838.81
- Amanda Elrod Travel/Payroll - \$249.30
- Dr. Gass ACOG - \$64.80
- HCA - (\$1,632.98)
- Dr. Napier - Deemer Floral - \$109.00
- Dr. Pinckley-Steward cell phone - \$53.00
- Dr. Sandelin (KMA) - \$68.90
- Samantha Smith Travel/Payroll - \$440.10
- Angela Tomes Travel/Payroll - \$402.50
- Dr. Thomson SVMIC - (\$404.82)
- Chris Thorn credit card \$225.27
- Uniforms - \$557.30
- US Bank Loan - (\$775.39)
- Vanderbilt - (\$905.33)
- Abbey Whittington Travel/Payroll - \$19.00

\$102,203.13

Reinsurance stop loss rebate from HCC Life Insurance Company for 2022 claims

\$49,687.40

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

<u>\$729,976.32</u>

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

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

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$3,520,620.05</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$713,315.96</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$16,428,574.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$1,037,275.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$1,026,718.47</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$9,148,773.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$24,648,300.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$729,976.32</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$32,605,252.80</u>	+ 91b. <u>\$24,648,300.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$57,253,552.80</u>

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
211	5/18/1995	ULTIPRO SOFTWARE - PAYROLL	11,394.04	11,394.04	-
213	6/15/1995	BALANCE ULTIPTRO PAYROLL	5,409.00	5,409.00	-
215	7/1/1995	ASCII EXPORT SOFTWARE	547.46	547.46	-
442	11/8/1999	MAS 90 G/L SOFTWARE	4,515.00	4,515.00	-
455	1/3/2000	MAS 90 INSTALL	855.00	855.00	-
487	4/25/2000	TYPEWRITER - SN 11RHC45	545.00	545.00	-
542	1/22/2001	BAL ON MAS 90 GEN LEDGER SOFTWARE	6,712.02	6,712.02	-
845	12/6/2002	ULTIPRO PAYROLL SOFTWARE	9,000.00	9,000.00	-
846	12/6/2002	ULTIPRO SOFTWARE	26,713.90	26,713.90	-
1258	6/20/2007	ULTIPRO - TRAINING	900.00	900.00	-
1266	6/28/2007	ULTIPRO WEB INSTALLATION	2,660.00	2,660.00	-
1285	8/1/2007	ULTIPRO WEB IMPLEMENTATION	7,993.53	7,993.53	-
1411	3/6/2008	USED U SHAPED MODULAR DESK	727.56	727.56	-
1412	3/6/2008	USED U SHAPED MODULAR DESK	727.56	727.56	-
1416	4/3/2008	FRX FOR MAS 90	1,431.00	1,431.00	-
1418	4/3/2008	MAS 90 UPGRADE	2,093.75	2,093.75	-
1482	7/1/2008	MAS 90 5 USER LICENSE	3,238.61	3,238.61	-
2011	3/7/2011	FUJITSU DUPLEX SCANNER	892.95	892.95	-
2012	3/10/2011	MAS 90 UPGRADE	1,737.50	1,737.50	-
2762	11/9/2014	BIZINSIGHT SOFTWARE	9,787.00	9,787.00	-
2777	1/1/2015	BIZNET SOFTWARE	1,962.50	1,962.50	-
3284	3/21/2016	SAGE 100 LICENSE	898.63	898.63	-
3870	1/9/2017	DESK WITH HUTCH	1,616.50	1,385.58	230.92
3871	1/9/2017	DESK WITH HUTCH	1,616.50	1,385.58	230.92
3949	4/10/2017	HPLJ M630 MFP - ACCOUNTING	2,249.47	2,249.47	-
4282	1/1/2017 (3)	ADDITIONAL SAGE MAS90 USERS	2,303.45	1,974.42	329.03
4283	1/1/2017	SAGE FIXED ASSETS SOFTWARE (3) USERS	6,987.00	5,988.84	998.16
4385	1/30/2018	DESK - ACCOUNTING	1,460.00	1,025.47	434.53
154	1/20/1999	CHAIRS & TABLE, COMPUTER CAB	882.29	882.29	-
259	12/6/1996	LATERAL FILES	683.65	683.65	-
298	8/20/1997	BOISE CASCADE DESK ADMIN ASSIST	544.50	544.50	-
299	8/20/1997	BOISE CASCADE DESK ADMIN ASSIST	544.51	544.51	-
367	8/25/1998	WALNUT & BLACK DESK - ASSISTANT BOOKKEEPER	505.00	505.00	-
531	12/1/2000	DBL PEDESTAL DESK W/ PANELS MKTG DIRECTOR	2,660.00	2,660.00	-
532	12/1/2000	MAHOGANY DESK BENEFITS COORDINATOR	588.00	588.00	-
905	2/2/2004	DESK - CRAIG HECKMAN	608.00	608.00	-
1042	10/18/2005	3 LAT FILE CABINETS, 4 CHAIRS, TABLE	3,747.52	3,747.52	-
1310	9/5/2007	DESK - BETSY COOKSEY	1,048.80	1,048.80	-
1337	11/1/2007	HITACHI CP - X200 PROJECTOR - SN CP-X200UP	825.22	825.22	-
2268	5/13/2013	NOVATIME PROXIMITY TIME CLOCK - 02 MAB	1,038.61	1,038.61	-
2269	5/13/2013	NOVATIME PROXIMITY TIME CLOCK - 03 DEPOT	1,038.61	1,038.61	-
2270	5/13/2013	NOVATIME PROXIMITY TIME CLOCK - 04 MAIN 1ST FLOOR	1,038.62	1,038.62	-
2271	5/13/2013	NOVATIME PROXIMITY TIME CLOCK - 05 MAIN 2ND FLOOR	1,038.62	1,038.62	-
2272	5/13/2013	NOVATIME PROXIMITY TIME CLOCK - 06 MAIN 3RD FLOOR	1,038.62	1,038.62	-
2296	6/4/2013	UTM TIME CLOCK SYSTEM	30,000.00	30,000.00	-
2361	7/2/2013	DELL LATITUDE E5430 LAPTOP - C. SANSFREE	1,251.51	1,251.51	-
2776	1/1/2015	BIZHUB B454E PRINTER/COPIER - ADMIN	8,548.00	8,548.00	-
2966	7/6/2015	LEXMARK MX511DE MFP - HR (CATHY SANSFREE)	817.97	817.97	-
2971	7/7/2015	3 DRAWER FIREPROOF CABINET	1,916.48	1,916.48	-
3159	11/13/2015	HPLJ M630h MFP - CREDENTIALING	1,807.61	1,807.61	-
3246	2/11/2016	27 APPLE IMAC"	2,861.25	2,861.25	-
3286	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3296	3/22/2016	HPLJ M680 COLOR MFP - ADMIN HALL	2,780.25	2,780.25	-
4333	1/10/2018	HPLJ M632H MFP - HR	2,092.12	2,092.12	-
4501	1/25/2019	HPLJ M652 COLOR PRINTER - CONFERENCE ROOM	1,103.86	864.69	239.17
4519	3/11/2019	EPSON POWERLite L150U PROJECTOR - TRAINING	2,426.82	1,860.55	566.27
4520	3/15/2019	HPLJ M652 COLOR PRINTER - HR	1,304.89	1,000.42	304.47
4593	6/25/2019	10'x10' GGCC DISPLAY	1,521.10	760.55	760.55
4682	1/1/2019	ULTIPRO ELECTRONIC ONBOARDING MODULE	10,000.00	10,000.00	-
4708	1/17/2020	DR. RAUH COMMEMORATIVE BENCH	1,792.00	746.67	1,045.33
4750	10/1/2020	DELPHI THERMAL DETECTION SYSTEM	1,431.00	459.97	971.03
4764	11/30/2020	FARGO DTC4500e BADGE PRINTER	3,180.00	1,325.00	1,855.00
1409	3/6/2008	INSIGNIA TV-LCD 26	535.28	535.28	-
1421	4/7/2008	PEBBLE GRAY MIDMARK EXAM TABLE	969.88	969.88	-
1422	4/7/2008	PEBBLE GRAY MIDMARK EXAM TABLE	969.88	969.88	-
1423	4/7/2008	PEBBLE GRAY MIDMARK EXAM TABLE	969.89	969.89	-
2145	8/16/2012	NIOX MINO & TEST KIT	5,065.00	5,065.00	-
2445	1/1/2014	FUJITSU LIFEBOOK	1,910.91	1,910.91	-
2446	1/1/2014	FUJITSU LIFEBOOK	1,910.91	1,910.91	-
2775	1/1/2015	AMA-4800	7,500.00	6,000.00	1,500.00
2798	1/1/2015	XPS ENTRY TERMINAL	5,600.00	5,600.00	-
2799	1/1/2015	XPS WORKSTATION	13,700.00	13,700.00	-
2817	2/11/2015	USED RITTER EXAM TABLE	832.43	832.43	-
2818	2/11/2015	USED RITTER EXAM TABLE	832.43	832.43	-
2882	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2883	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
3811	10/3/2016	HOSHIZAKI CR25-FS REFRIGERATOR	2,798.11	2,538.29	259.82
4521	3/21/2019	HPLJ M632 MFP WITH TRAY	2,351.46	1,763.59	587.87
4522	3/21/2019	HPLJ M632 MFP W/O TRAY	2,091.46	1,568.59	522.87
4627	6/28/2019	HOSHIZAKI REFRIGERATOR MODEL R2A-FS	3,427.45	1,713.74	1,713.71
4629	7/3/2019	CLINICCOOL ULTRA REFRIGERATOR MODEL LHU-47-SGPH	4,444.21	2,222.11	2,222.10
1765	11/8/2009	KOK LEGEND SPIROMETER	2,141.20	2,141.20	-
1766	11/8/2009	KOKO-PFT SPIROMETER	2,114.70	2,114.70	-
4793	5/6/2021	SPIROTRAC 7 SPIROMETER SYSTEM	2,759.28	656.97	2,102.31
4869	2/21/2022	PNEUMOTRAC SPIROMETER WITH SPIROTRAC 6 SOFTWARE	2,984.38	355.28	2,629.10
2236	3/29/2013	OSCAR2 ABP/HEART RATE MONITOR	2,512.76	2,512.76	-
3281	3/12/2016	OSCAR 2 BLOOD PRESSURE MONITOR	2,207.50	2,154.96	52.54
3282	3/12/2016	OSCAR 2 BLOOD PRESSURE MONITOR	2,207.50	2,154.96	52.54
546	1/23/2001	46 PIECES OF ARTWORK	6,250.00	6,250.00	-
726	6/4/2002	ARTWORK	5,279.60	5,279.60	-
3111	10/26/2015	AUDIOMETER AM282 - DR. BALE	1,416.00	1,416.00	-
217	9/14/1995	BUSINESS OFFICE PARTITIONS	7,584.60	7,584.60	-
335	4/1/1998	BOISE CASCADE CABINET 5 DR LATERAL SHELF E4 6	592.00	592.00	-
402	1/21/1999	DESK	2,776.50	2,776.50	-
420	6/1/1999	PANELS IN FIRST FLOOR RECEPTION AREA	835.66	835.66	-
422	6/16/1999	DESK	727.73	727.73	-
423	6/16/1999	DESK	727.72	727.72	-
446	11/18/1999	IMPPOWER DOCUMENT MGMT	15,145.00	15,145.00	-
452	1/3/2000	DESK WITH RETURN	600.00	600.00	-
453	1/3/2000	DESK WITH RETURN	600.00	600.00	-
457	1/20/2000	DESK WITH RETURN	570.00	570.00	-
516	10/2/2000	DESK WITH LEFT RETURN	777.00	777.00	-
520	11/1/2000	DESK WITH LEFT RETURN	777.00	777.00	-
566	3/2/2001	POWER PANELS	584.00	584.00	-
573	3/28/2001	ONE APP PRO SOFTWARE	6,802.67	6,802.67	-
577	4/9/2001	DESK W/ LEFT RETURN	733.33	733.33	-
578	4/9/2001	DESK W/ LEFT RETURN	733.33	733.33	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
579	4/9/2001	DESK W/ LEFT RETURN	733.34	733.34	-
612	8/24/2001	PROGRAMMING	5,850.00	5,850.00	-
618	9/24/2001	DESK WITH RIGHT AND LEFT PEDESTAL	780.00	780.00	-
659	1/22/2002	FIREPROOF FILE CABINET	699.00	699.00	-
676	3/1/2002	ELECTRIC LETTER OPENER	1,169.00	1,169.00	-
709	5/20/2002	PANELS	4,151.00	4,151.00	-
1155	11/2/2006	DESK - PAYMENT ROOM	688.12	688.12	-
1156	11/2/2006	DESK - PAYMENT ROOM	688.12	688.12	-
1157	11/2/2006	DESK - PAYMENT ROOM	688.12	688.12	-
2987	7/28/2015	HPLI M630H MFP - BILLING (HCFA)	1,807.61	1,807.61	-
3872	3/23/2017	HPLI M630H MFP - WKONA BACK HALLWAY	2,201.12	2,201.12	-
3926	3/3/2017	HPLI M604 MFP - BILLING (HCFA)	1,730.37	1,730.37	-
4371	3/23/2018	HPLI M631 MFP - BILLING	2,689.86	2,555.36	134.50
4720	3/4/2020	SCANPRO IMAGE CAPTURE LICENSE - SOFTWARE FOR CHECK SCANNING	1,058.94	428.63	630.31
2876	5/1/2015	GE LUNAR DEXA BONE DENSITY	10,000.00	10,000.00	-
3454	5/28/2016	HOLOGIC HORIZON DEXA - BONE DENSITY - MAIN	40,800.00	38,371.42	2,428.58
3455	5/28/2016	HOLOGIC HORIZON DEXA - BONE DENSITY - N. RD.	44,500.00	41,851.17	2,648.83
3902	1/1/2017	HOLOGIC DEXA DISCOVERY CI BONE DENSITY	29,158.80	24,993.24	4,165.56
970	12/2/2004	CHAIR - DR. HARSTON	536.00	536.00	-
2140	7/30/2012	MIDMARK EXAM TABLE	1,104.21	1,104.21	-
2141	7/30/2012	MIDMARK EXAM TABLE	1,104.21	1,104.21	-
2142	7/30/2012	MIDMARK EXAM TABLE	1,104.21	1,104.21	-
2337	6/25/2013	LEXMARK MX511de MFP - LIN	1,396.39	1,396.39	-
2393	8/21/2013	LEXMARK MX511de MFP - ROY	1,396.39	1,396.39	-
2474	1/1/2014	LEXMARK MX511DE MFP - DR. RAFEDHEEN	1,396.40	1,396.40	-
2671	8/6/2014	EXAM TABLE	1,504.46	1,504.46	-
3287	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
4057	5/12/2017	HPLI M630H MFP - ROY	2,200.96	2,200.96	-
972	12/2/2004	DESK - ECHO	615.00	615.00	-
1221	4/18/2007	PHILLIPS IE33 ULTRASOUND SYSTEM	153,928.00	153,928.00	-
1241	5/17/2007	PHILLIPS XCELERA ECHO IMAGE INFORMATION SYSTEMS	56,247.10	56,247.10	-
1353	11/19/2007	ECHO DUAL EXAM TABLE	6,548.00	6,548.00	-
1356	11/19/2007	HAG CAPISCO CHAIR	775.00	775.00	-
1799	5/5/2010	UPGRADE SOFTWARE FOR IE33	3,516.50	3,516.50	-
2128	6/12/2012	NETGEAR NAS 2100	1,858.53	1,858.53	-
2197	12/26/2012	ESAOTE MYLAB 30 PORTABLE ULTRASOUND	55,000.00	55,000.00	-
2210	2/12/2013	ECHO TABLE DUAL 2272 W/ EXTENSION	6,111.00	6,111.00	-
2263	5/8/2013	XCELERA R3 UPGRADES & EXTENSIONS	6,864.00	6,864.00	-
3122	10/28/2015	PHILIPS IE33 ULTRASOUND EQUIP - FITTS & BRYANT	18,000.00	18,000.00	-
3342	5/12/2016	HP Z240 TOWER WORKSTATION - MAIN	1,676.22	1,676.22	-
3343	5/12/2016	HP Z240 TOWER WORKSTATION - BRYANT	1,676.21	1,676.21	-
3767	9/2/2016	DIAGNOSTIC MONITOR - DR. BRYANT	1,243.71	1,125.25	118.46
3768	9/2/2016	DIAGNOSTIC MONITOR - DR. FITTS	1,243.72	1,125.31	118.41
3769	9/2/2016	DIAGNOSTIC MONITOR - MAIN BUILDING	1,243.72	1,125.31	118.41
3770	9/2/2016	DIAGNOSTIC MONITOR - MAIN BUILDING	1,243.72	1,125.31	118.41
3970	6/8/2017	CAPISCO SADDLE SEAT CHAIR - F&B	899.94	717.80	182.14
4338	2/16/2018	LICENSE, QJMT GOLD MYLAB	3,710.00	2,561.67	1,148.33
4368	4/26/2018	PHILLIPS XCELERA INTELLISPACE R2.X UPGRADE	1,339.80	893.20	446.60
4853	1/12/2022	FALCON PRO PERIPHERAL VASCULAR DIAGNOSTIC SYSTEM	37,842.00	5,406.00	32,436.00
2417	10/24/2013	GE MAC 1600 INTERP EKG	4,580.99	4,580.99	-
4851	12/13/2021	WELCH ALLYN CP150 EKG	2,798.40	399.77	2,398.63
3116	10/28/2015	ELECTRONIC MEDICAL RECORDS - FITTS & BRYANT	19,908.00	19,908.00	-
3117	10/28/2015	HERITAGE SONABED	1,800.00	1,800.00	-
3119	10/28/2015	PROTIME MICROCOAGULATION SYSTEM	1,000.00	1,000.00	-
3123	10/28/2015	WALL MOUNT TRANSFORMER	1,106.00	1,106.00	-
3223	1/12/2016	AED PLUS - DRS. FITTS & BRYANT	1,740.85	1,740.85	-
3914	1/31/2017	RIGHT BARIATRIC CHAIR	1,144.80	967.62	177.18
3915	1/31/2017	LEFT BARIATRIC CHAIR	1,579.40	1,334.98	244.42
1730	8/25/2009	HOLTER REPORTER MASTER 8 ANALYZER SYSTEM	8,490.00	8,490.00	-
3010	8/25/2015	HOLTER PERFORMER MODEL 2003	941.53	941.53	-
3011	8/25/2015	HOLTER PERFORMER MODEL 2003	941.52	941.52	-
3115	10/28/2015	EKPRO HOLTER ANALYSIS - FITTS & BRYANT	3,000.00	3,000.00	-
488	5/1/2000	STRETCHER - SN 545BVP	2,835.00	2,835.00	-
2756	10/31/2014	TREATMENT TABLE	2,271.80	2,271.80	-
4834	11/5/2021	HILLROM Q-STRESS SYSTEM W/TREADMILL	25,665.05	4,325.13	21,339.92
4835	11/5/2021	HILLROM Q-STRESS SYSTEM W/TREADMILL	25,665.05	4,289.42	21,375.63
4836	11/5/2021	HILLROM Q-STRESS SYSTEM W/TREADMILL	25,665.05	4,325.13	21,339.92
4837	11/5/2021	SUNTECH TANGO M2 BLOOD PRESSURE UNIT	5,925.61	987.61	4,938.00
4838	11/5/2021	SUNTECH TANGO M2 BLOOD PRESSURE UNIT	5,925.61	987.61	4,938.00
4839	11/5/2021	SUNTECH TANGO M2 BLOOD PRESSURE UNIT	5,925.61	987.61	4,938.00
4850	12/13/2021	SUNTECH TANGO M2 BLOOD PRESSURE UNIT	5,925.62	775.97	5,149.65
4866	1/27/2022	HILLROM Q-STRESS SYSTEM W/TREADMILL	25,665.05	3,390.67	22,274.38
3413	5/23/2016	HPLI M630 MFP - REG MAIL ROOM	2,076.74	2,076.74	-
3908	1/12/2017	HPLI M527 MFP W/TRAYS - REGISTRATION	1,731.07	1,731.07	-
4428	9/5/2014	DELL OPTIPLEX XE2	1,933.00	1,933.00	-
4429	9/5/2014	DELL OPTIPLEX XE2	1,933.00	1,933.00	-
4430	9/5/2014	DELL OPTIPLEX XE2	1,933.00	1,933.00	-
4431	9/5/2014	DELL OPTIPLEX XE2	1,933.00	1,933.00	-
4432	9/5/2014	DELL OPTIPLEX XE2	1,933.00	1,933.00	-
4433	9/5/2014	DELL OPTIPLEX XE2	1,933.00	1,933.00	-
4503	1/21/2019	HPLI M632 MFP W/TRAY - REGISTRATION	2,351.21	1,763.40	587.81
2335	6/25/2013	AED PLUS PACK W/ COVER	1,526.95	1,526.95	-
3050	10/1/2015	AED DEFIBRILLATOR - 2ND FLOOR	1,304.25	1,304.25	-
3051	10/1/2015	AED DEFIBRILLATOR - MAB	1,304.25	1,304.25	-
731	6/14/2002	EXAM TABLE	804.77	804.77	-
732	6/14/2002	EXAM TABLE	804.77	804.77	-
733	6/14/2002	EXAM TABLE	804.77	804.77	-
734	6/14/2002	EXAM TABLE	804.77	804.77	-
1060	12/1/2005	MID-MARK POWER PROCEDURE EXAM CHAIR	10,121.76	10,121.76	-
1443	5/22/2008	HYFRECTOR	763.40	763.40	-
1444	5/22/2008	HYFRECTOR	763.40	763.40	-
1445	5/22/2008	HYFRECTOR	763.40	763.40	-
1446	5/22/2008	HYFRECTOR	763.40	763.40	-
1447	5/22/2008	HYFRECTOR	763.40	763.40	-
1448	5/22/2008	HYFRECTOR	763.40	763.40	-
1453	6/9/2008	OLYMPUS MICROSCOPE CX31 - WATKINS	2,397.48	2,397.48	-
1454	6/9/2008	OLYMPUS MICROSCOPE CX41	1,649.28	1,649.28	-
1455	6/12/2008	PEBBLE GRAY EXAM TABLE	1,011.45	1,011.45	-
1611	4/29/2009	CANON EOS REBEL CAMERA	551.57	551.57	-
1636	6/16/2009	MIDMARK 641 POWER PROCEDURE CHAIR	9,281.93	9,281.93	-
1714	8/12/2009	MIDMARK 641 POWER PROCEDURE CHAIR	150.00	150.00	-
2097	3/14/2012	STERILIZER ULTRACLAVE M11 MIDMARK	4,003.25	4,003.25	-
2170	10/16/2012	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2336	6/25/2013	AED PLUS PACK W/ COVER	1,526.95	1,526.95	-
2564	3/6/2014	POWER TABLE - USED	2,000.00	2,000.00	-
2884	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2885	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
2886	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2887	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2918	5/29/2015	HYFREACATOR FOR MOS	1,025.95	1,025.95	-
2919	5/29/2015	LED LIGHT FOR MOHS SURGERY	2,103.35	2,103.35	-
2921	5/29/2015	PROCEDURE CHAIR FOR MOS	8,737.14	8,737.14	-
2926	6/1/2015	HYFREACATOR 2000	794.39	794.39	-
2927	6/1/2015	HYFREACATOR 2000	794.39	794.39	-
2928	6/1/2015	HYFREACATOR 2000	794.37	794.37	-
2963	7/3/2015	EXAM TABLE	1,278.71	1,278.71	-
2964	7/3/2015	EXAM TABLE	1,278.71	1,278.71	-
2965	7/3/2015	EXAM TABLE	1,278.71	1,278.71	-
2975	7/10/2015	LED MICROSCOPE - DR. ALLRED	794.00	794.00	-
2979	7/22/2015	CROSSFIRE JAVA WORKSTATION CART	1,280.57	1,280.57	-
2980	7/22/2015	CROSSFIRE JAVA WORKSTATION CART	1,280.57	1,280.57	-
2981	7/22/2015	CROSSFIRE JAVA WORKSTATION CART	1,280.58	1,280.58	-
2993	8/5/2015	8FT LED DUAL PROCEDURE LIGHT	4,204.16	4,204.16	-
2994	8/5/2015	8FT LED DUAL PROCEDURE LIGHT	4,204.15	4,204.15	-
2995	8/5/2015	8FT LED DUAL PROCEDURE LIGHT	4,204.15	4,204.15	-
2996	8/5/2015	8FT LED DUAL PROCEDURE LIGHT	4,204.15	4,204.15	-
3006	8/24/2015	PROCEDURE CHAIR - DR. LUMBANG	10,674.19	10,674.19	-
3007	8/24/2015	PROCEDURE CHAIR - DR. LUMBANG	10,674.19	10,674.19	-
3008	8/24/2015	PROCEDURE CHAIR - DR. LUMBANG	10,674.19	10,674.19	-
3009	8/24/2015	PROCEDURE CHAIR - DR. LUMBANG	10,674.18	10,674.18	-
3042	9/24/2015	ARTICULATING ARM FOR MIDMARK 641	839.71	839.71	-
3048	9/30/2015	RITTER M11 STERILIZER	3,999.42	3,999.42	-
3096	10/15/2015	MICROSCOPE W/ DIGITAL CAMERA - LUMBANG	13,804.89	13,804.89	-
3097	10/15/2015	RITTER M11 STERILIZER	3,999.00	3,999.00	-
3102	10/19/2015	ULTRASONIC SONICLEAN CLEANER	1,113.63	1,113.63	-
3105	10/24/2015	HYFREACATOR 2000	800.00	800.00	-
3106	10/24/2015	HYFREACATOR 2000	800.00	800.00	-
3107	10/24/2015	HYFREACATOR 2000	800.00	800.00	-
3108	10/24/2015	HYFREACATOR 2000	800.00	800.00	-
3162	11/17/2015	BLANKET WARMER	4,650.00	4,650.00	-
3163	11/17/2015	CRYOEMBEDDER	1,854.95	1,854.95	-
3164	11/17/2015	HPLI M630 MFP - WATKINS	1,807.61	1,807.61	-
3169	11/17/2015	HPLI M630 MFP - GILBERT	1,807.61	1,807.61	-
3181	1/1/2016	AUTOSTAINER	5,350.80	5,350.80	-
3182	1/1/2016	CRYOSTAT	19,873.03	19,873.03	-
3183	1/1/2016	EXAM STOOL	974.22	974.22	-
3184	1/1/2016	EXAM STOOL	974.21	974.21	-
3185	1/1/2016	EXAM STOOL	974.21	974.21	-
3186	1/1/2016	EXAM STOOL	974.21	974.21	-
3188	1/1/2016	HISTOTECH INFINITY MICROSCOPE - DR. LUMBANG	1,156.24	1,156.24	-
3245	2/9/2016	HYFREACATOR 2000	969.94	958.38	11.56
3272	3/1/2016	TIME CLOCK - 07 HARTLAND	1,183.50	-	-
3754	8/18/2016	RITTER ULTROCLAVE	4,239.34	3,835.59	403.75
4063	5/12/2017	HPLI M527 MFP - DR. ALLRED	1,543.12	1,543.12	-
4129	10/24/2017	EVACUATOR SMOKE SHARK	1,944.63	1,435.35	509.28
4130	10/24/2017	DERMLITE II PRO	944.63	697.24	247.39
4137	10/2/2017	RITTER PROCEDURE LIGHT	2,230.08	1,672.55	557.53
4274	11/27/2017	PROCEDURE CHAIR - DR. DAI	9,763.03	7,089.84	2,673.19
4319	1/18/2018	HYFREACATOR 2000 - DR. DAI	841.49	591.04	250.45
4421	9/18/2018	DERMLITE DL4W	1,165.50	707.63	457.87
4426	9/13/2018	HPLI M632H MFP - LUMBANG	2,091.48	1,812.63	278.85
4523	3/13/2019	RITTER M11 AUTOCLAVE - DR. ALLRED	4,265.60	2,335.92	1,929.68
4691	9/16/2019	DRE MEDICAL MILANO D20 PROCEDURE CHAIR/TABLE	6,254.00	2,903.65	3,350.35
4740	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
4807	7/12/2021	CRYOEMBEDDER PREMIERE PACKAGE - DR. LUMBANG	1,854.95	397.49	1,457.46
4808	6/7/2021	LEICA CM1520 MOHS CRYOSTAT - DR. LUMBANG	19,403.44	4,388.87	15,014.57
4827	9/29/2021	HEINE DELTA 3D DERMATOSCOPE LIGHT - DR. GILBERT	1,591.80	284.25	1,307.55
4926	11/30/2022	HEINE DELTAONE DERMATOSCOPE	1,107.00	13.19	1,093.81
2560	3/6/2014	BLU-U LIGHT PHOTODYNAMIC THER.	6,837.00	6,837.00	-
4233	10/31/2017	BLU-U PHOTODYNAMIC THERAPY ILLUMINATOR - DR. DAI	8,109.00	5,985.22	2,123.78
4239	11/13/2017	3 SERIES NEOLUX PC PHOTOTHERAPY LIGHTBOX	25,436.20	18,774.32	6,661.88
3855	11/17/2016	SALON & SPA CHAIR	3,094.00	2,703.57	390.43
3910	1/17/2017	HYDRAFACIAL ELITE MD SYSTEM - COSMETICS	29,097.00	24,593.92	4,503.08
3913	1/30/2017	COLLAGEN PIN HANDPIECE - WATKINS	2,561.50	2,165.09	396.41
4265	11/16/2017	HARMONY XL PRO AESTHETIC LASER	59,307.00	43,068.19	16,238.81
4675	10/1/2019	REFLECTION CREEK WATER FEATURE	1,270.94	590.07	680.87
4790	4/27/2021	ALMA OPUS LASER SYSTEM	117,607.00	28,001.67	89,605.33
4880	3/21/2022	ALMA HARMONY XL HANDPIECE SHR PRO 700	8,029.14	860.27	7,168.87
4395	7/6/2018	ACCENT PRIME LASER SYSTEM	181,101.00	116,422.07	64,678.93
4498	1/15/2019	SKIN CARE STORE/CABINERY DISPLAY	10,264.52	5,865.44	4,399.08
4872	5/5/2022	REJUVAPEN NXT TREATMENT SYSTEM	1,242.61	118.34	1,124.27
3020	8/28/2015	PHAROS EX-308 EXCIMER LASER	67,143.00	67,143.00	-
1527	11/21/2008	STAINER W HEATER MONITOR	24,316.81	24,316.81	-
1529	12/1/2008	45 GAL CAB MAN W/PDLE HANDLE	631.33	631.33	-
1531	12/1/2008	HMS25 CRYOSTAT PKG W/DISP BLD	20,967.89	20,967.89	-
1537	12/15/2008	REFRIGERATOR MERCHANDISER GDM-45	2,950.64	2,950.64	-
1563	2/3/2009	OLYMPUS BX41 DUAL VIEWING MICROSCOPE 8L10308/	15,345.33	15,345.33	-
1566	2/13/2009	ORCHARD CLIENT LICENSES	6,750.00	6,750.00	-
1567	2/19/2009	TISSUE FLOATATION BATH 2809TFB1256-18	2,217.29	2,217.29	-
1572	2/27/2009	HYPERCLEAN 600, 115V, 60HZ	1,918.86	1,918.86	-
1573	2/27/2009	NETMKON - POS 1ST YEAR	672.00	672.00	-
1574	2/27/2009	PARAMOUNT 360 ENCLOSURE 3-115	9,164.09	9,164.09	-
1577	3/7/2009	OLYMPUS BX41 FLUORESCENT MICROSCOPE	15,101.45	15,101.45	-
1578	3/7/2009	OLYMPUS CX41 CLINICAL MICROSCOPE	3,112.20	3,112.20	-
1579	3/7/2009	OLYMPUS DP72 DIGITAL CAMERA	9,653.37	9,653.37	-
1746	9/18/2009	HARVEST AP MODULE (SOFTWARE)	53,845.00	53,845.00	-
1772	11/23/2009	FORCEP WARMER	647.71	647.71	-
2386	8/14/2013	MICROSCOPE OLYMPUS BX46 UPRIGHT	9,303.95	9,303.95	-
2418	10/31/2013	ORCHARD SOFTWARE HARVEEST LICENSE - HARTLAND	2,250.00	2,250.00	-
2757	11/6/2014	DELUXE TISSUE BATH - SN 143463951	1,543.59	1,543.59	-
2758	11/6/2014	DISPOSABLE BLADE CARRIER	2,246.20	2,246.20	-
2759	11/6/2014	USED MICROTOME KPGS - SN 51545	7,246.08	7,246.08	-
2772	12/1/2014	CRYOEMBEDDER	1,854.95	1,854.95	-
2782	1/1/2015	FLOORMAT	992.45	992.45	-
3326	4/14/2016	5100 TISSUE-TEK TECS CONSOLE SYSTEM	12,090.26	11,658.47	431.79
3327	4/14/2016	SAKURA G030 TISSUE-TEK VIP 6 FLOOR TISSUE PROCESSOR	52,262.13	50,395.64	1,866.49
3532	7/6/2016	CELLSENS IMAGING SOFTWARE	2,211.34	2,053.42	157.92
3907	1/12/2017	HPLI M527 MFP W/TRAYS - PATHOLOGY	1,731.07	1,731.07	-
4375	4/12/2018	FB TISSUE FLotation BATH	2,202.52	1,494.59	707.93
4402	7/3/2018	REFURBISHED LEICA RM 2125 RTS MICROTOME	7,403.60	4,759.47	2,644.13
4462	10/30/2018	MOPEC GROSSING STATION / HOOD	20,994.03	12,496.47	8,497.56
4582	5/8/2019	SAKURA G030 TISSUE-TEK VIP 6 MOTOR REBUILD	3,379.43	1,770.19	1,609.24
4681	8/5/2019	ORCHARD DERM PATH TEMPLATES	48,000.00	23,428.56	24,571.44
4719	2/28/2020	ADD'L ORCHARD DERM PATH TEMPLATE	9,600.00	3,885.72	5,714.28

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
4779	3/17/2021	WELCH ALLYN CP150 EKG	3,007.49	751.87	2,255.62
4826	10/7/2021	WELCH ALLYN CP150 EKG	2,799.43	499.90	2,299.53
4840	4/2/2021	WELCH ALLYN CP150 EKG	2,833.75	708.44	2,125.31
3501	5/31/2016	WELCH ALLYN EKG - DR. HSIEH	3,420.51	3,216.94	203.57
4404	9/16/2016	EKG - WESLEY	3,103.31	2,770.81	332.50
3798	9/28/2016	EKG UNIT W/INTERP - DR. WILLIAMS	3,591.66	3,206.87	384.79
4401	4/19/2016	BURDICK ELI 280 EKG	4,613.62	4,393.93	219.69
3785	9/8/2016	WELCH ALLYN EKG - REDDY	3,623.41	3,278.32	345.09
4569	5/31/2019	WELCH ALLYN CP150 EKG W/INTERPRETATION	2,833.75	1,450.61	1,383.14
4777	2/19/2021	WELCH ALLYN CP150 EKG	2,798.87	666.40	2,132.47
4877	5/13/2022	WELCH ALLYN CP150 EKG	2,798.40	266.52	2,531.88
4486	1/11/2019	WELCH ALLYN EKG CP150 W/INTERPRETATION	2,833.75	1,619.28	1,214.47
4511	2/21/2019	WELCH ALLYN EKG CP150 W/INTERP	2,833.75	1,551.81	1,281.94
4626	7/25/2019	WELCH ALLYN EKG CP150 W/INTERP	2,833.75	1,383.14	1,450.61
4783	3/23/2021	WELCH ALLYN CP150 EKG	3,001.20	750.30	2,250.90
4400	6/27/2018	WELCH ALLYN CP150 EKG W/INTERPRETATION AND STAND	3,307.77	2,126.43	1,181.34
4878	5/13/2022	WELCH ALLYN CP150 EKG	2,798.40	266.52	2,531.88
164	10/1/1993	LUMBAR SIMULATOR-COFOID & ZIEVERI	4,265.89	4,265.89	-
340	5/1/1998	BERGEN 2 EXAM TABLES - MUELLER	1,389.78	1,389.78	-
735	6/14/2002	EXAM TABLE	804.77	804.77	-
736	6/14/2002	EXAM TABLE	804.76	804.76	-
1032	9/12/2005	ISCD DISCOVERY UPGRADE C/W	26,100.00	26,100.00	-
2252	4/30/2013	IPRO2 PROFESSIONAL GLUCOSE MONITOR	3,258.42	3,258.42	-
2253	4/30/2013	IPRO2 PROFESSIONAL GLUCOSE MONITOR	3,258.41	3,258.41	-
2652	7/28/2014	IPRO 2 SYSTEM	1,704.90	1,704.90	-
2653	7/28/2014	IPRO 2 SYSTEM	1,704.90	1,704.90	-
2654	7/28/2014	IPRO 2 SYSTEM	1,704.90	1,704.90	-
2655	7/28/2014	IPRO 2 SYSTEM	1,704.89	1,704.89	-
3252	2/15/2016	HPLI M527 MFP - ENDO NURSE STATION	2,030.67	2,030.67	-
4232	11/6/2017	USED SOUND BOOTH 56" X 84"	8,664.20	6,394.99	2,269.21
4240	11/6/2017	ASTERA 2 AUDIOMETER	8,748.71	6,457.40	2,291.31
4241	11/6/2017	ICS CHART 200 VNG/ENG-4 SYSTEM	23,835.89	17,593.17	6,242.72
4242	11/6/2017	CAPELLA 2 OTOACOUSTIC EMISSIONS MODULE	7,118.96	5,254.50	1,864.46
4243	11/6/2017	ZODIAC DIAGNOSTIC TYMPANOMETER	6,297.78	4,648.35	1,649.43
4244	11/6/2017	ICS AIRCAL US	5,931.76	4,378.23	1,553.53
4289	1/1/2018	PEHRATEK XM-5000 VRA SYSTEM	1,667.27	1,190.90	476.37
4360	4/23/2018	AUDIOSCAN AXIOM REM/HIT	10,773.71	7,182.47	3,591.24
3073	10/13/2015	AUDIO BOOTH	2,500.00	2,500.00	-
3076	10/13/2015	ENG TRACOUSTICS RN 260	1,500.00	1,500.00	-
3077	10/13/2015	EPLY AUDIO TABLE	750.00	750.00	-
3085	10/13/2015	PORTABLE TYMP MACHINE	750.00	750.00	-
3093	10/13/2015	WELCH ALLYN TYMPANOGRAM	1,400.00	1,400.00	-
3311	4/1/2016	PEHRATEK XM-1000 VRA BOX	1,100.00	1,060.70	39.30
4680	10/2/2019	WELCH ALLYN TYMPANOMETER TM 286 AUTOTYMP	4,362.79	2,025.59	2,337.20
4697	1/6/2020	GSI CORTI DPOAE SCREENING UNIT	4,329.00	1,855.29	2,473.71
4922	8/30/2022	GSI PELLO AUDIOMETER	6,105.60	290.74	5,814.86
2583	4/11/2014	LEXMARK MX511de MFP - WILSON REG.	806.68	806.68	-
2597	5/7/2014	DELL LATITUDE	1,220.61	1,220.61	-
2632	6/20/2014	SIGNS - GLASLOW (DR. WILSON)	787.73	787.73	-
3075	10/13/2015	BOVIE MACHINE CONMED EXCALIBUR PLUS	1,950.00	1,950.00	-
3078	10/13/2015	EXAM CHAIR	1,900.00	1,900.00	-
3079	10/13/2015	EXAM CHAIR	1,900.00	1,900.00	-
3080	10/13/2015	EXAM CHAIR	1,900.00	1,900.00	-
3081	10/13/2015	FLEXIBLE SCOPE	2,900.00	2,900.00	-
3082	10/13/2015	MICROSCOPE	1,125.00	1,125.00	-
3083	10/13/2015	MICROSCOPE	1,125.00	1,125.00	-
3086	10/13/2015	RELIANCE CABINET	800.00	800.00	-
3087	10/13/2015	RELIANCE CABINET	800.00	800.00	-
3088	10/13/2015	RELIANCE CABINET	800.00	800.00	-
3089	10/13/2015	RIGID SCOPE	1,150.00	1,150.00	-
3091	10/13/2015	STORZ FLEXIBLE SCOPE	3,850.00	3,850.00	-
3092	10/13/2015	WELCH ALLYN MD'S HEADLIGHT	850.00	850.00	-
4622	7/2/2019	RITTER M9 AUTOCLAVE	3,927.55	1,963.78	1,963.77
3521	6/24/2016	HPLI M630 MFP - ENT	2,201.24	2,201.24	-
3531	7/5/2016	RITTER STERILIZER	3,999.85	3,714.17	285.68
3535	7/8/2016	FOCESS SINUSCOPE	2,644.70	2,455.83	188.87
3536	7/8/2016	FOCESS SINUSCOPE	2,644.70	2,455.83	188.87
3537	7/8/2016	FOCESS SINUSCOPE	2,665.73	2,475.33	190.40
3545	7/13/2016	FLEXIBLE PEDIATRIC RHINOLARYNGOSCOPE - DR. RUTH	7,829.17	7,269.93	559.24
3546	7/13/2016	FLEXIBLE RHINOLARYNGOSCOPE - DR. RUTH	6,010.42	5,581.10	429.32
3547	7/13/2016	FLEXIBLE RHINOLARYNGOSCOPE - DR. RUTH	6,010.42	5,581.10	429.32
3580	7/28/2016	ENT TREATMENT CABINET	7,251.11	6,819.48	431.63
3581	7/28/2016	ENT TREATMENT CABINET	7,251.11	6,819.48	431.63
3582	7/28/2016	ENT TREATMENT CABINET	7,251.11	6,819.48	431.63
3692	7/28/2016	POWER CHAIR WITH LIGHT	8,313.23	7,620.43	692.78
3693	7/28/2016	POWER CHAIR WITH LIGHT	8,313.23	7,620.50	692.73
3694	7/28/2016	POWER CHAIR WITH LIGHT	8,313.23	7,620.50	692.73
3873	1/1/2017	ENT TREATMENT CABINET W/ LIGHT	7,717.01	6,614.58	1,102.43
3934	3/8/2017	AED PLUS DEFIBRILLATOR	1,686.98	1,405.83	281.15
3799	9/28/2016	AED PLUS	1,436.10	1,282.25	153.85
3812	10/10/2016	USED RITTER MIDMARK AUTOCLAVE	2,000.00	1,785.75	214.25
4012	5/15/2017	TIME CLOCK - 19 CAFE CITY	1,150.78	1,150.78	-
2376	8/1/2013	SPIROPERFECT MODULE W/ 3L SYRINGE	1,647.06	1,647.06	-
2665	8/1/2014	DEFUBTECH LIFELINE AED	907.00	907.00	-
2666	8/1/2014	MIDMARK POWER TABLE	6,790.00	6,790.00	-
2667	8/1/2014	OLYMPUS CX41 MICROSCOPE - WKU	2,205.00	2,205.00	-
2668	8/1/2014	RITTER EXAM TABLE (5)	4,160.00	4,160.00	-
2669	8/1/2014	RITTER MIDMARK AUTOCLAVE	2,503.00	2,503.00	-
2670	8/1/2014	SECA SCALE	1,324.00	1,324.00	-
2969	7/6/2015	LEXMARK MX511DE MFP - WKU HS REG	817.97	817.97	-
3277	3/1/2016	TIME CLOCK - 20 WKU	1,183.50	1,183.50	-
3856	11/18/2016	HPLI M630 MFP - WKU HS NURSE STATION	1,915.69	1,915.69	-
4745	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
4746	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
232	6/28/1996	HEALTH O-METER BABY SCALE	582.71	582.71	-
257	12/4/1996	2 OTOSCOPES	842.34	842.34	-
274	4/1/1997	4 RITTER EXAM TABLES	2,743.44	2,743.44	-
374	9/15/1998	RITTER EXAM TABLE	686.00	686.00	-
380	11/2/1998	2 DIAGNOSTIC INSTRUMENT STRIPS - MASTRONARDI	1,929.14	1,929.14	-
464	3/1/2000	37 VINYL SIDE CHAIRS (USED)	3,175.00	3,175.00	-
465	3/1/2000	AMREX SYNCHOSONIC 752 MUSCLE STIMULATOR (U)	2,025.00	2,025.00	-
468	3/1/2000	RITTER 104 EXAM TABLE	675.00	675.00	-
469	3/1/2000	RITTER 104 EXAM TABLE (USED)	550.00	550.00	-
470	3/1/2000	RITTER 104 EXAM TABLE (USED)	550.00	550.00	-
471	3/1/2000	RITTER 104 EXAM TABLE (USED)	550.00	550.00	-
472	3/1/2000	RITTER 104 EXAM TABLE (USED)	550.00	550.00	-
473	3/1/2000	RITTER 104 EXAM TABLE (USED)	550.00	550.00	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
474	3/1/2000	SEVILLE EXAM TABLE (USED)	550.00	550.00	-
475	3/1/2000	SEVILLE EXAM TABLE (USED)	550.00	550.00	-
476	3/1/2000	SEVILLE EXAM TABLE (USED)	550.00	550.00	-
557	3/1/2001	DIAGNOSTIC SYSTEM W/ THERMOMETER	761.70	761.70	-
558	3/1/2001	DIAGNOSTIC SYSTEM W/ THERMOMETER	761.70	761.70	-
559	3/1/2001	EXAM TABLE	890.40	890.40	-
560	3/1/2001	EXAM TABLE	890.40	890.40	-
561	3/1/2001	EXAM TABLE	890.40	890.40	-
562	3/1/2001	EXAM TABLE	890.40	890.40	-
564	3/1/2001	OPEN SHELF FILING SYSTEM	4,118.72	4,118.72	-
576	4/9/2001	4 DRAWER FILE LATERAL FILE CABINET SN 794	538.00	538.00	-
606	7/30/2001	DIAGNOSTIC SYSTEM W/THERMOMETER	761.70	761.70	-
857	2/20/2003	3 DIAGNOSTIC SYSTEMS WITH THERMOMETER	2,425.26	2,425.26	-
901	1/5/2004	RESPIRONICS OXYGEN CONCENTRATOR - SN 60000001	775.00	775.00	-
1820	8/23/2010	CIPRO 1 GMS STARTER KIT-DR.NAPIER	1,329.95	1,329.95	-
2346	6/26/2013	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2363	7/16/2013	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2364	7/16/2013	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2447	1/1/2014	FUJITSU LIFEBOOK	1,910.91	1,910.91	-
2448	1/1/2014	FUJITSU LIFEBOOK	1,910.91	1,910.91	-
2584	4/11/2014	LEXMARK MX511 de MFP - MASTRONARDI	806.68	806.68	-
2598	5/7/2014	DELL LATITUDE	1,220.61	1,220.61	-
2606	5/12/2014	LEXMARK MX511 de MFP - HARRIGAN	806.68	806.68	-
2678	8/25/2014	LEXMARK MX511de MFP - PATPATIA	790.81	790.81	-
2731	9/17/2014	IPRO 2 SYSTEM	2,136.96	2,136.96	-
2802	1/13/2015	DELL LAPTOP - PURVIS - SN 8F5HK12	1,936.29	1,936.29	-
2838	3/26/2015	DIGITAL SCALES	852.63	852.63	-
2839	3/26/2015	DIGITAL SCALES	852.62	852.62	-
3168	11/17/2015	HPLI M630 MFP - NS (MACY)	1,807.61	1,807.61	-
3412	5/23/2016	HPLI M630 MFP - NAPIER NS	2,076.74	2,076.74	-
3882	1/1/2017	HPLI M527DN MFP - LOSEKAMP	1,543.85	1,543.85	-
3941	3/23/2017	HPLI M630H MFP - PURVIS	2,201.12	2,201.12	-
3996	4/26/2017	HPLI M527 MFP - HARRIGAN / MASTRONARDI	1,730.33	1,730.33	-
572	3/28/2001	HANDHELD PULSE OXIMETER SN G0854997	804.01	804.01	-
2952	6/30/2015	LEXMARK MX511de MFP - MED REC	825.48	825.48	-
2953	6/30/2015	LEXMARK MX511de MFP - NURSES STATION	825.48	825.48	-
2954	6/30/2015	LEXMARK MX511de MFP - WIC REGISTRATION	825.48	825.48	-
3308	4/1/2016	FUGITSU FI 6670 DOCUMENT SCANNER	862.21	862.21	-
3310	4/1/2016	INDUSTRIAL AUDIOMETER - PSP	2,457.12	2,369.39	87.73
3312	4/1/2016	WIRELESS PANIC ALARM SYSTEM	3,370.17	3,370.17	-
3549	7/20/2016	HYFREATOR 2000 - WIC	825.85	757.04	68.81
3971	3/10/2017	TIME CLOCK - 27 GGC WIC	1,150.79	1,150.79	-
4380	5/8/2018	POWER EXAM TABLE	1,812.32	1,208.20	604.12
4744	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
4771	1/12/2021	RITTER 255 SINGLE CEILING MOUNT PROCEDURE LIGHT	2,106.10	601.74	1,504.36
4821	8/27/2021	DYNAREX VITAL SIGNS PATIENT MONITOR AND STAND	1,949.00	371.24	1,577.76
4833	11/4/2021	DYNAREX VITAL SIGNS PATIENT MONITOR AND STAND	1,949.00	324.84	1,624.16
4013	5/15/2017	TIME CLOCK - 26 ADAMS	1,150.78	1,150.78	-
4384	5/16/2018	HPLI M632H MFP - DR. ADAMS REGISTRATION	2,352.06	2,156.05	196.01
4579	6/1/2019	RITTER 75 EVOLUTION PROCEDURE CHAIR (USED)	1,500.00	767.87	732.13
4580	6/1/2019	RITTER M9 AUTOCLAVE	1,500.00	767.87	732.13
4709	1/19/2020	AED PLUS PK W/COVER (ZOLL)	1,437.17	598.82	838.35
3161	11/13/2015	HPLI M630h MFP - REDDY	1,807.61	1,807.61	-
3935	3/8/2017	AED PLUS DEFIBRILLATOR	1,686.98	1,405.83	281.15
4484	10/18/2018	EASYONE AIR SPIROMETER	1,876.75	1,117.13	759.62
3160	11/13/2015	HPLI M630h MFP - WESLEY	1,807.61	1,807.61	-
3255	2/16/2016	BLOOD DRAW CHAIR	825.43	805.79	19.64
3271	3/1/2016	TIME CLOCK - 25 WESLEY RED OAK	1,183.50	1,183.50	-
3874	1/1/2017	AED PLUS DEFIB W/ PADDLE	1,528.61	1,310.22	218.39
4058	7/18/2017	MIDMARK 204 EXAM TABLE	1,275.72	987.19	288.53
4059	7/18/2017	MIDMARK 204 EXAM TABLE	1,275.94	987.36	288.58
4269	12/18/2017	SUMMIT MEDICAL GRADE FRIDGE 16.7 CUBIC FEET - WESLEY SUITE	1,485.00	1,060.70	424.30
4272	11/22/2017	HI-LO EXAM TABLE	3,392.53	2,423.25	969.28
4532	3/22/2019	COAG-SENSE PT2 INR ANALYZER	1,015.65	544.09	471.56
357	6/15/1998	BERGEN TYMPANOMETRIC	2,163.44	2,163.44	-
4002	6/1/2017	TIME CLOCK - 13 RED OAK SPECIALTY AREA	1,150.79	1,150.79	-
4322	1/1/2018	3-SEAT LOUNGE - LARGE LOBBY	1,200.25	857.35	342.90
4331	1/10/2018	HPLI M632H MFP - SPECIALTY SUITE	2,092.12	2,092.12	-
4332	1/10/2018	HPLI M632H MFP - REGISTRATION BACK	2,352.20	2,352.20	-
3543	7/12/2016	HPLI M630 MFP - FRANKLIN WIC NURSE STATION	2,076.74	2,076.74	-
3779	9/8/2016	HYFREATOR 2000 - FRANKLIN WIC	842.51	762.28	80.23
3857	11/28/2016	BLOOD PRESSURE MONITOR WITH STAND	1,043.46	906.84	136.62
3920	2/14/2017	15 MIDMARK EXAM TABLES	21,295.89	18,000.10	3,295.79
4273	11/22/2017	HI-LO EXAM TABLE	3,392.52	2,423.25	969.27
4749	10/1/2020	DELPHI THERMAL DETECTION SYSTEM	1,431.00	459.97	971.03
4204	9/20/2017	ECHOSENS FIBROSCAN	60,000.00	45,000.01	14,999.99
4923	12/16/2022	ECHOSENS FIBROSCAN COMPACT 530	78,440.00		78,440.00
899	1/5/2004	EXAM TABLE - S/N KC043234	717.00	717.00	-
900	1/5/2004	EXAM TABLE S/N - KCO43233	717.00	717.00	-
1335	11/1/2007	EXAM TABLE	1,038.50	1,038.50	-
1336	11/1/2007	EXAM TABLE	1,038.51	1,038.51	-
1343	11/1/2007	WALL MOUNTED OTOSCOPE	759.02	759.02	-
2070	11/16/2011	FUJITSU TABLET	1,857.00	1,857.00	-
2071	11/16/2011	FUJITSU TABLET	1,857.00	1,857.00	-
2158	9/13/2012	FUJITSU LIFEBOOK T902 CORE	1,862.60	1,862.60	-
2159	9/13/2012	FUJITSU LIFEBOOK T902 CORE	1,862.60	1,862.60	-
2339	6/25/2013	LEXMARK MX511de MFP - FIELDING	1,396.39	1,396.39	-
2462	1/1/2014	LATITUDE 14 5000 SERIES	1,244.09	1,244.09	-
4556	5/6/2019	HPLI M632h MFP W/TRAY - GASTRO POD 1	2,219.40	1,627.56	591.84
4557	5/6/2019	HPLI M632h MFP W/TRAY - GASTRO POD 3	2,219.40	1,627.56	591.84
4558	5/6/2019	HPLI M632h MFP W/TRAY - GASTRO POD 2	2,219.40	1,627.56	591.84
3251	2/15/2016	HPLI M527 MFP - SLEEP REGISTRATION	2,030.67	2,030.67	-
4782	4/9/2021	AED PLUS W/CPR	1,435.25	358.82	1,076.43
4796	5/3/2021	EXAM ROOM CABINET	1,097.10	261.22	835.88
4805	6/14/2021	SECA DIGITAL BARIATRIC SCALE	1,296.45	293.25	1,003.20
1034	9/20/2005	EMR	770,696.18	770,696.18	-
1035	9/20/2005	EMR LICENSING FEES	436,236.28	436,236.28	-
1052	11/10/2005	ALLSCRIPTS SOFTWARE LICENSE FEES	72,605.03	72,605.03	-
1061	12/1/2005	QUICKSCAN PRO LICENSE	1,352.99	1,352.99	-
1066	12/15/2005	DOCUMENT IMAGING-SCANNED DOCUMENTS	32,681.18	32,681.18	-
1067	1/4/2006	DOCUMENT IMAGING-SCANNED DOCUMENTS	40,877.64	40,877.64	-
1072	2/15/2006	ALLSCRIPTS SOFTWARE LICENSE FEES	455.00	455.00	-
1074	2/23/2006	ORCHARD- ALLSCRIPTS INTERFACE	6,500.00	6,500.00	-
1077	3/14/2006	DOCUMENT IMAGING-SCANNED DOCUMENTS	47,712.22	47,712.22	-
1088	4/3/2006	DOCUMENT IMAGING-SCANNED DOCUMENTS	17,401.97	17,401.97	-
1097	4/30/2006	IMPLEMENTATION FEES	35,813.50	35,813.50	-
1098	4/30/2006	INTERFACE FEES	16,250.00	16,250.00	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
1099	4/30/2006	SOFTWARE LICENSE FEES - TOUCHWORKS NOTE	9,200.00	9,200.00	-
1100	5/18/2006	ALLSCRIPTS CLINICAL CONSULTANT - TRAINING	1,506.00	1,506.00	-
1103	5/18/2006	SCANNED DOCUMENTS	1,988.66	1,988.66	-
1105	5/31/2006	ALLSCRIPTS IMPLEMENTATION CONSULTANT	11,368.30	11,368.30	-
1106	6/1/2006	SCANNED DOCUMENTS	5,842.86	5,842.86	-
1111	6/20/2006	SCANNED DOCUMENTS	4,388.56	4,388.56	-
1113	6/29/2006	SCANNED IMAGES	3,101.13	3,101.13	-
1114	6/30/2006	CONSULTANT EXPENSES EMR	3,992.91	3,992.91	-
1115	6/30/2006	EMR IMPLEMENTATION	9,931.25	9,931.25	-
1123	8/18/2006	NOTE MODULE IMPLEMENTATION TEMPLATE CONSTRUCT	21,998.47	21,998.47	-
1125	8/18/2006	SCANNED IMAGES	1,427.55	1,427.55	-
1126	8/18/2006	VAULT STORAGE FOR PAPER CHART	125.00	125.00	-
1127	9/13/2006	SCANNED IMAGES	772.47	772.47	-
1130	9/20/2006	SCANNED IMAGES	3,385.33	3,385.33	-
1133	9/20/2006	VAULT STORAGE FOR PAPER CHARTS	125.00	125.00	-
1138	9/28/2006	SCANNED IMAGES	883.62	883.62	-
1139	10/4/2006	SCANNED IMAGES	963.54	963.54	-
1153	10/18/2006	SCANNED IMAGES	1,266.06	1,266.06	-
1158	11/2/2006	SCANNED IMAGES	2,215.43	2,215.43	-
1160	11/2/2006	VAULT STORAGE FOR PAPER CHARTS	105.00	105.00	-
1166	11/16/2006	SCANNED IMAGES	3,767.56	3,767.56	-
1171	12/5/2006	SCANNED IMAGES	3,437.63	3,437.63	-
1172	12/5/2006	VAULT STORAGE FOR PAPER CHARTS	1,079.00	1,079.00	-
1175	1/3/2007	NOTE MODULE TEMPLATE CONSTRUCTION	12,761.36	12,761.36	-
1176	1/3/2007	SCANNED IMAGES	159.48	159.48	-
1177	1/3/2007	SCANNED IMAGES	434.49	434.49	-
1179	1/11/2007	SCANNED IMAGES	438.84	438.84	-
1182	1/24/2007	SCANNED IMAGES	774.65	774.65	-
1183	1/24/2007	VAULT STORAGE FOR PAPER CHARTS	539.50	539.50	-
1188	2/12/2007	SCANNED IMAGES	609.92	609.92	-
1189	2/23/2007	SCANNED IMAGES	580.61	580.61	-
1190	2/23/2007	SCANNED IMAGES	539.50	539.50	-
1200	3/22/2007	4 - SCANSOFT DRAGON NATURALLY SPEAKING SOFTWA	3,180.00	3,180.00	-
1201	3/22/2007	5 - SCANSOFT DRAGON NATURALLY SPEAKING SOFTWA	3,975.00	3,975.00	-
1202	3/22/2007	8 - SCANSOFT DRAGON NATURALLY SPEAKING SOFTWA	6,360.00	6,360.00	-
1207	3/22/2007	SCANNED IMAGES	1,201.72	1,201.72	-
1208	3/22/2007	SCANNED IMAGES	580.83	580.83	-
1209	3/22/2007	VAULT STORAGE FOR PAPER CHARTS	539.50	539.50	-
1211	4/3/2007	SCANNED IMAGES	433.75	433.75	-
1238	4/27/2007	VAULT STORAGE FOR PAPER CHARTS	587.00	587.00	-
1239	5/2/2007	SCANNED IMAGES	387.96	387.96	-
1240	5/2/2007	VAULT STORAGE FOR PAPER CHARTS	587.00	587.00	-
1245	5/17/2007	SCANNED IMAGES	232.83	232.83	-
1246	5/17/2007	TOUCHWORKS 10.2 UPGRADE	10,176.00	10,176.00	-
1256	6/20/2007	SCANNED IMAGES	239.51	239.51	-
1257	6/20/2007	SCANNED IMAGES	195.52	195.52	-
1259	6/20/2007	VAULT STORAGE FOR PAPER CHARTS	587.00	587.00	-
1265	6/28/2007	SCANNED IMAGES	3,650.43	3,650.43	-
1268	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1269	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1270	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1271	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1272	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1273	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1274	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1275	7/13/2007	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1284	8/1/2007	SCANNED IMAGES	6,816.95	6,816.95	-
1308	8/31/2007	VIASYS - PFT INTERFACE	1,050.00	1,050.00	-
1309	9/1/2007	VAULT STORAGE FOR PAPER CHARTS	2,389.00	2,389.00	-
1339	11/1/2007	LICENSE FEES TOUCHWORKS EHR ANALYTICS	25,727.02	25,727.02	-
1376	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1377	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1378	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1379	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1380	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1381	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1382	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1383	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1384	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1385	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1386	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1387	1/29/2008	DRAGON NATURALLY SPEAKING MEDICAL SOFTWARE	795.00	795.00	-
1391	1/29/2008	SCANNED IMAGES	6,144.04	6,144.04	-
1415	4/1/2008	VAULT STORAGE FOR PAPER CHARTS	3,857.50	3,857.50	-
1503	9/30/2008	SCANNED IMAGES	3,539.25	3,539.25	-
1504	9/30/2008	VAULT STORAGE	3,073.75	3,073.75	-
1509	10/8/2008	(7) NUANCE-DRAGON MEDICAL RUNTIME	7,812.00	7,812.00	-
1575	3/1/2009	SCANNED IMAGES	2,111.15	2,111.15	-
1576	3/1/2009	VAULT STORGE	2,675.00	2,675.00	-
1608	4/16/2009	TOUCHWORKS PM - EHR LICENSE FEE	100,250.00	100,250.00	-
1628	5/11/2009	VERSION 11.1.5 UPGRADE	11,154.39	11,154.39	-
1639	6/16/2009	VERSION 11 UPGRADE	1,020.36	1,020.36	-
1649	7/1/2009	EMR BROWER INTERFACE FROM DEPOSIT	12,495.00	12,495.00	-
1650	7/1/2009	SCANNED IMAGES	797.97	797.97	-
1668	7/15/2009	VAULT STORAGE	1,116.75	1,116.75	-
1727	8/21/2009	VERSION 11 EHR	9,391.95	9,391.95	-
1728	8/24/2009	EHR UPGRADE (PROGRAMMING)	750.00	750.00	-
1733	8/27/2009	VERSION II TRAINING EXPENSES	17,904.43	17,904.43	-
1743	9/16/2009	EHR-TRAINING	3,168.75	3,168.75	-
1751	9/30/2009	VERSION 11 EHR CONVERSION TRAINING	43,914.73	43,914.73	-
1773	11/24/2009	VERSION 11 EHR	9,762.99	9,762.99	-
1775	12/8/2009	ALLSCRIPTS-EHR	1,462.50	1,462.50	-
1812	7/30/2010	SCANNED IMAGES 7/14/10 & 7/30/10	1,135.05	1,135.05	-
1814	8/5/2010	OB IMPLEMENTATION	877.50	877.50	-
1944	10/18/2010	KY IMMUNIZATION FORM CUSTOMIZATION	780.00	780.00	-
1946	11/4/2010	12 UNITS DRAGON MEDICAL VESION SOFTWARE	14,880.00	14,880.00	-
1947	11/4/2010	INTERFACE CUSTOMIZATION	292.50	292.50	-
1952	12/15/2010	MEDFLOW EMR-OPTICAL LICs & IMP	390.00	390.00	-
1954	1/14/2011	MEDFLOW EMR-OPTICAL LICs & IMP	585.00	585.00	-
2038	7/1/2011	DRAGON NATURALLY SPEAKING UPGRADE	8,791.92	8,791.92	-
2040	7/1/2011	PRENATAL OB SOFTWARE	487.50	487.50	-
2049	8/12/2011	TOUCHWORKS VERSION VII.2 TRAINERS	1,344.00	1,344.00	-
2060	10/24/2011	VERSION 11.2 UPGRADE	58,397.23	58,397.23	-
2073	11/16/2011	TRAINING	1,283.50	1,283.50	-
2076	12/1/2011	MEDFLOW	13,754.00	13,754.00	-
2255	5/1/2013	DATA CONVERSION - DRS. SINGH AND AVULA	24,250.00	24,250.00	-
2307	6/18/2013	FOLLOWMYHEALTH PATIENT ENGAGEMENT PLATFORM	16,500.00	16,500.00	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
2351	6/30/2013	DATA CONVERSION - DRS. SINGH AND AVULA	49,655.00	49,655.00	-
2355	6/30/2013	TEST ENVIRONMENT - NEW PHYSICIAN	5,775.00	5,775.00	-
2358	6/30/2013	VERSION 11.4 UPGRADE	1,095.00	1,095.00	-
2359	7/1/2013	JARDOGS PATIENT PORTAL	23,719.62	23,719.62	-
2372	7/30/2013	ADDITIONAL EHR/PM LICENSES	388,800.00	388,800.00	-
2373	7/30/2013	JARDOGS PATIENT PORTAL	3,500.00	3,500.00	-
2392	8/21/2013	DATA CONVERSION - DR. YURCHISIN	10,000.00	10,000.00	-
2421	11/1/2013	DATA CONVERSION - DR. HSIEH	15,000.00	15,000.00	-
2422	11/1/2013	DATA CONVERSION - DR. YURCHISIN	6,000.00	6,000.00	-
2426	12/2/2013	DATA CONVERSION-DR. HSIEH	15,000.00	15,000.00	-
2427	12/2/2013	DATA CONVERSION-DR. YURCHISIN	6,000.00	6,000.00	-
2428	12/2/2013	DATA CONVERSION-VARIOUS PHYSICIANS	2,535.00	2,535.00	-
2441	1/1/2014	DATA CONVERSION - DR. YURCHISIN	6,500.00	6,500.00	-
2442	1/1/2014	DATA CONVERSION - DRS FITTS AND BRYANT	9,000.00	9,000.00	-
2499	1/1/2014	V 11.4.1 UPGRADE	2,062.50	2,062.50	-
2500	1/1/2014	V 11.4.1 UPGRADE	525.00	525.00	-
2501	1/1/2014	V 11.4.1 UPGRADE	2,062.50	2,062.50	-
2512	1/27/2014	V 11.4.1 UPGRADE	300.00	300.00	-
2550	2/25/2014	V 11.4.1 UPGRADE	375.00	375.00	-
2554	2/28/2014	CONVERSION - SINGH/AVULA	880.00	880.00	-
2567	3/19/2014	V 11.4.1 UPGRADE	675.00	675.00	-
2590	4/23/2014	V 11.4.1 UPGRADE	6,050.00	6,050.00	-
2592	4/25/2014	V 11.4.1 UPGRADE	1,012.50	1,012.50	-
2603	5/7/2014	MEDFLOW UPGRADE	1,537.50	1,537.50	-
2613	5/21/2014	V 11.4.1 MIGRATION	3,632.50	3,632.50	-
2616	5/24/2014	E H R TRAINING	2,967.12	2,967.12	-
2617	5/24/2014	MEDFLOW EMR - OPTICAL	30,013.45	30,013.45	-
2629	6/18/2014	MEDFLOW UPGRADE	2,185.72	2,185.72	-
2630	6/18/2014	V 11.4.1 UPGRADE	21,492.40	21,492.40	-
2647	7/23/2014	V 11.4.1 UPGRADE	18,825.00	18,825.00	-
2787	1/1/2015	MEANINGFUL USE 11.4 TRAINING	66,134.99	66,134.99	-
2788	1/1/2015	MEDFLOW UPGRADE	8,202.50	8,202.50	-
2795	1/1/2015	TW IMMUNIZATION FORM	1,760.00	1,760.00	-
2843	4/2/2015	IMPORTING PRIMECARE DATA	6,937.50	5,376.56	1,560.94
2844	4/3/2015	DEMOGRAPHIC LOAD INTO ALLSCRIPTS - PRIMECARE	1,750.00	1,356.25	393.75
2846	4/13/2015	DEMOGRAPHIC LOAD INTO ALLSCRIPTS - PRIMECARE	1,350.00	1,046.25	303.75
2900	5/5/2015	IMPORTING PRIMECARE DATA	6,937.50	5,318.75	1,618.75
2905	5/18/2015	IMPORTING PRIMECARE DATA	3,100.00	2,350.83	749.17
2907	5/20/2015	WEB SERVERS FOR E.H.R.	2,090.00	2,090.00	-
2909	5/22/2015	WEB SERVERS	3,245.00	3,245.00	-
2930	6/2/2015	DATA IMPORT - PEDS ASSOC	2,700.00	2,047.50	652.50
2978	7/21/2015	CONSULTING SERVICES	87.50	87.50	-
3017	8/28/2015	E.H.R. LICENSES	67,441.50	32,971.40	34,470.10
3019	8/28/2015	MEDFLOW LICENSE - DR. BURT	6,360.00	6,360.00	-
3031	9/8/2015	ALLSCRIPTS E.H.R. LICENSE	594,945.00	290,862.00	304,083.00
3044	9/29/2015	DATA CONVERSION	1,312.50	951.56	360.94
3045	9/29/2015	DATA CONVERSION	2,843.75	2,061.76	781.99
3104	10/23/2015	TOUCHWORKS E.H.R. ICD-10 WORK	450.00	322.50	127.50
3215	1/1/2016	TOUCHWORKS E H R - OPHTHALMOLOGY	220.00	220.00	-
3222	1/11/2016	CONVERSION - DR. WESLEY	10,300.00	10,300.00	-
3244	2/9/2016	CONVERSION - DR. WESLEY	3,631.25	3,588.02	43.23
3253	2/15/2016	INTERFACE MIGRATION	32,670.00	32,281.06	388.94
3254	2/15/2016	MIGRATION	32,670.00	32,281.06	388.94
3260	2/23/2016	DATA IMPORT - DR. PANDEYA	875.00	854.17	20.83
3280	3/9/2016	DATA IMPORT - DR. PANDEYA	7,500.00	7,321.44	178.56
3283	3/18/2016	MIGRATION	4,542.50	4,380.28	162.22
3285	3/22/2016	DATA IMPORT - DR. PANDEYA	962.50	928.13	34.37
3297	3/23/2016	INTERFACE	660.00	636.46	23.54
3315	4/5/2016	DATA IMPORT - DR. PANDEYA	437.50	421.88	15.62
3330	4/19/2016	CONVERSION - DR. PANDEYA	2,406.25	2,291.67	114.58
3334	4/27/2016	15.1 UPGRADE	3,905.00	3,719.07	185.93
3335	5/3/2016	DATA IMPORT - DR. PANDEYA	481.25	458.33	22.92
3341	5/12/2016	DOCUMENT EXTRACTION - WKONA	5,900.00	5,619.07	280.93
3352	5/17/2016	DATA IMPORT - WKONA	6,362.50	5,983.79	378.71
3353	5/17/2016	DATA IMPORT - DR. PANDEYA	9,230.00	8,680.59	549.41
3400	5/23/2016	DATA IMPORT - DR. REDDY	8,225.00	7,735.42	489.58
3435	5/25/2016	EHR UPGRADE - 15.1	825.00	775.91	49.09
3512	6/16/2016	DATA IMPORT - DR. PANDEYA	2,307.50	2,142.66	164.84
3518	6/22/2016	EHR UPGRADE - 15.1	11,055.00	10,265.39	789.61
3519	6/22/2016	MED CTR INTERFACE	7,480.00	6,945.71	534.29
3524	6/27/2016	WKONA X-RAY DATA MIGRATION	15,400.00	14,300.00	1,100.00
3529	6/30/2016	DOCUMENT EXTRACTION - WKONA	900.00	835.71	64.29
3544	7/12/2016	WKONA DATA IMPORT	700.00	650.00	50.00
3548	7/18/2016	DATA IMPORT - WKONA	5,090.00	4,665.82	424.18
3551	7/26/2016	WKONA CONVERSION	2,275.00	2,085.42	189.58
3552	7/27/2016	EHR UPGRADE - 15.1	23,101.25	21,176.16	1,925.09
3579	7/28/2016	E H R LICENSES WKONA	160,200.00	68,530.00	91,670.00
3729	7/31/2016	BETTERCHART SMARTFILER PROJECT SETUP	5,000.00	4,583.36	416.64
3742	8/9/2016	WKONA CONVERSION	1,706.25	1,564.06	142.19
3758	8/23/2016	DATA IMPORT - WKONA	218.75	197.92	20.83
3759	8/24/2016	EHR UPGRADE - 15.1	59,804.14	54,108.52	5,695.62
3774	9/7/2016	DATA IMPORT - WKONA	656.25	593.75	62.50
3776	9/8/2016	DATA IMPORT - WKONA	1,272.50	1,151.34	121.16
3791	9/20/2016	DATA CONVERSION - DR. REDDY	1,137.50	1,015.63	121.87
3794	9/21/2016	EHR UPGRADE - 15.1	8,580.00	7,660.75	919.25
3796	9/21/2016	WKONA DATA CONVERSION	4,023.75	3,592.63	431.12
3810	10/3/2016	DATA CONVERSION - DR. REDDY	962.50	859.38	103.12
3821	10/18/2016	DATA CONVERSION - DR. REDDY	568.75	501.04	67.71
3831	10/28/2016	E H R UPGRADE	70,548.47	62,149.83	8,398.64
3844	11/1/2016	DATA CONVERSION - DR. REDDY	568.75	501.04	67.71
3877	1/1/2017	15.1 UPGRADE	5,335.00	4,572.84	762.16
3884	1/1/2017	CONVERSION - DR. REDDY	8,225.00	7,050.00	1,175.00
3886	1/1/2017	MEDFLOW INTERFACE	320.23	274.50	45.73
3887	1/1/2017	E.H.R. ANALYTICS ADD-ON	4,240.00	3,634.32	605.68
3888	1/1/2017	FOLLOW MY HEALTH ACCESS FEE	600.00	514.32	85.68
3889	1/1/2017	E.H.R. CORE LICENSE	76,320.00	65,417.16	10,902.84
3890	1/1/2017	15.1 UPGRADE	21,993.75	18,851.82	3,141.93
3895	1/1/2017	E.H.R. UPGRADE	2,420.00	2,074.32	345.68
3912	1/29/2017	MED CENTER INTERFACE	2,200.00	1,859.55	340.45
3916	2/1/2017	TOUCHWORKS CUSTOM REPORTS	1,100.00	929.75	170.25
3947	4/1/2017	V11 NOTE MIGRATION	43,500.00	35,732.17	7,767.83
3989	6/12/2017	PRINT SERVER MIGRATION FOR EHR UPGRADE	782.50	624.16	158.34
3990	5/24/2017	MED CTR INTERFACE IMPLEMENTATION	2,200.00	1,754.78	445.22
3991	6/5/2017	TOUCHWORKS 17.1 UPGRADE	32,311.25	25,772.06	6,539.19
3992	4/5/2017	EHR 3 UPGRADE	16,678.75	13,700.41	2,978.34
3993	3/15/2017	EFILER - ALLSCRIPTS EHR	3,500.00	2,916.67	583.33
3994	3/22/2017	MED CTR INTERFACE	3,520.00	2,891.44	628.56

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
3995	5/16/2017	X-RAY DATA MIGRATION - OHP	4,900.00	3,908.33	991.67
4037	7/6/2017	ALLSCRIPTS NOTE MIGRATION	87,000.00	68,357.14	18,642.86
4038	6/15/2017	EHR - OHP	6,250.00	4,985.13	1,264.87
4039	7/18/2017	OHP EMR CONVERSION	5,000.00	3,869.07	1,130.93
4040	7/14/2017	TOUCHWORKS EHR CORE LICENSE	512,784.98	402,902.50	109,882.48
4064	8/18/2017	OHP DATA EXTRACTION	530.00	403.85	126.15
4113	6/21/2017	EHR	2,450.65	1,925.50	525.15
4114	7/6/2017	E H R	6,250.00	4,910.73	1,339.27
4115	7/25/2017	NOTE ADOPTION	937.50	725.45	212.05
4116	7/26/2017	NOTE ADOPTION	937.50	725.45	212.05
4117	8/15/2017	TOUCHWORKS E.H.R.	21,562.50	16,685.28	4,877.22
4122	9/26/2017	E.H.R. SOFTWARE	41,363.47	31,022.62	10,340.85
4125	7/31/2017	MED CENTER INTERFACE	3,740.00	2,894.07	845.93
4126	9/11/2017	V.11 NOTE IMPLEMENTATION	1,222.50	945.97	276.53
4132	10/9/2017	V.11 NOTE	21,562.50	16,171.89	5,390.61
4133	7/26/2017	OHP DOWNLOAD	4,199.03	3,249.24	949.79
4134	7/26/2017	V.11 NOTE	15,299.68	11,839.06	3,460.62
4135	8/23/2017	V.11 NOTE	4,128.19	3,145.28	982.91
4136	8/23/2017	V.11 NOTE	1,801.61	1,372.64	428.97
4207	9/30/2017	V.11 NOTE	16,000.00	12,000.03	3,999.97
4208	9/29/2017	V.11 NOTE	45,500.00	34,125.00	11,375.00
4209	10/3/2017	DATA CONVERSION - OHP	1,137.50	853.13	284.37
4210	10/3/2017	CUSTOM INTERFACE	1,137.50	853.13	284.37
4212	10/27/2017	MED CENTER INTERFACE	3,740.00	2,760.50	979.50
4235	9/28/2017	OHP DATA CONVERSION	4,000.00	3,000.02	999.98
4236	11/12/2017	MED CENTER INTERFACE	568.75	419.79	148.96
4251	11/27/2017	OHP DATA CONVERSION	1,181.25	857.81	323.44
4259	9/20/2017	V.11 NOTE	19,108.98	14,331.76	4,777.22
4260	9/20/2017	V.11 NOTE	3,397.72	2,548.31	849.41
4261	9/20/2017	V.11 NOTE	1,612.95	1,209.71	403.24
4262	10/25/2017	V.11 NOTE	14,648.78	10,812.18	3,836.60
4263	10/25/2017	V.11 NOTE	1,821.25	1,344.26	476.99
4264	10/25/2017	V.11 NOTE	1,098.13	810.55	287.58
4266	10/31/2017	OHP DATA CONVERSION	700.00	516.67	183.33
4281	1/1/2017	DATA IMPORT - DR. PANDEYA	11,537.50	9,889.32	1,648.18
4284	1/1/2017	REGISTRATION - SCHEDULING EXPORT	4,750.00	4,071.42	678.58
4285	1/1/2017	CHARGE INTERFACE INTEGRATION	4,750.00	4,071.42	678.58
4286	11/2/2017	V.11 NOTE	16,000.00	11,809.55	4,190.45
4292	1/1/2018	OHP CONVERSION	2,493.75	1,781.25	712.50
4299	1/1/2018	ALLSCRIPTS V.11 NOTE ADOPTION TRAINING	5,890.97	4,207.85	1,683.12
4321	1/8/2018	OHP DATA CONVERSION	306.25	218.75	87.50
4325	1/8/2018	TOUCHWORKS EHR UPGRADE SERVER SETUP	6,460.00	4,614.30	1,845.70
4326	1/12/2018	TOUCHWORKS V.17.1 ADD'L SQL LICENSES	24,075.25	17,196.60	6,878.65
4327	1/23/2018	OHP DATA CONVERSION	962.50	676.04	286.46
4328	2/13/2018	OHP DATA CONVERSION	1,000.00	702.39	297.61
4348	3/31/2018	TOUCHWORKS EHR V.17 END USER TRAINING	5,725.00	3,884.83	1,840.17
4349	3/31/2018	TOUCHWORKS EHR V.17 UPGRADE SERVICES BUNDLE	105,149.81	71,351.65	33,798.16
4350	2/21/2018	TOUCHWORKS EHR UPGRADE SERVICES	440.00	303.82	136.18
4398	5/17/2018	TOUCHWORKS CERTIFIED EHR TECHNOLOGY / MIPS PACKAGE	6,600.00	4,321.44	2,278.56
4399	5/18/2018	TOUCHWORKS EHR UPGRADE SERVICES TO MIGRATE 1 CONNECT R INTERFACE TO CIE RHAPSODY	32,890.00	21,535.11	11,354.89
4449	10/11/2018	ALLSCRIPTS CORE LICENSE TRUE-UP	129,705.26	78,749.61	50,955.65
4479	10/22/2018	TOUCHWORKS EHR OUTBOUND PASS-THRU / INBOUND DOCUMENT INTERFACE - CHARTSPAN	24,150.62	14,375.39	9,775.23
4613	6/20/2019	TOUCHWORKS EHR - MODIFICATION OF "WELCOME TO MEDICARE" FORM	5,596.80	2,798.39	2,798.41
4631	7/10/2019	CONTRACT 329466 - WKONA EHR FORM MODIFICATION	1,760.00	880.01	879.99
4692	12/1/2019	ALLSCRIPTS CONTRACT #226887 - EHR UPGRADE SERVICES BUNDLE 33.25% OF 3RD YEAR	80,840.23	35,608.21	45,232.02
4725	4/10/2020	MEDFLOW SERVER MIGRATION/UPGRADE	5,500.00	2,160.73	3,339.27
4727	1/9/2020	ALLSCRIPTS PM FOR TOUCHWORKS EHR LICENSES (QTY 19)	126,882.00	54,378.00	72,504.00
4728	4/21/2020	RIGHTFAX SOFTWARE LICENSE FOR TOUCHWORKS	15,050.00	5,733.33	9,316.67
4757	8/19/2020	CONTRACT 324276 - ALLSCRIPTS TOUCHWORKS SQL SERVER MIGRATION	22,572.70	7,524.23	15,048.47
4831	1/1/2021	ALLSCRIPTS-IKNOWMED INTERFACE FOR ONCOLOGY	11,965.28	3,418.66	8,546.62
4832	1/1/2021	ALLSCRIPTS-THERAPYSOURCE INTERFACE FOR KORT	8,505.44	2,430.12	6,075.32
4843	10/15/2021	IKNOWMED ONCOLOGY EMR IMPLEMENTATION	18,550.00	3,312.50	15,237.50
1405	2/15/2008	LICENSE FEE TOUCHWORKS & IMPLEMENTATION	116,654.00	116,654.00	-
1571	2/26/2009	HOST INTERFACES	8,000.00	8,000.00	-
1604	4/16/2009	ENTERPRISE PM 7 ADDITIONAL LICENSES	58,524.00	58,524.00	-
1609	4/16/2009	TOUCHWORKS PM IMPLEMENTATION	65,616.00	65,616.00	-
1610	4/16/2009	TOUCHWORKS PM THRID PARTY SOFTWARE FEE	761.00	761.00	-
1612	4/29/2009	ENTERPRISE PM 6 ADDITIONAL LICENSES	26,529.60	26,529.60	-
1715	8/12/2009	TOUCHWORKS PM	3,733.59	3,733.59	-
1767	11/9/2009	PM LICENSES	6,632.40	6,632.40	-
1780	1/15/2010	TOUCHWORKS PM LICENSE	2,000.00	2,000.00	-
2017	4/12/2011	4 ADDL LICENSES-NURSE PRACTITIONERS	46,214.00	46,214.00	-
2163	9/13/2012	UAI QUINTIN & ATRIA INSTALLATION AND CONFIGURATION	1,640.00	1,640.00	-
3192	1/1/2016	ICD 10 CONVERSION	600.00	600.00	-
3319	4/7/2016	PM SOFTWARE UPGRADE	2,612.50	2,519.23	93.27
3436	5/25/2016	PAYERPATH BUNDLE	4,380.00	2,883.50	1,496.50
3750	8/15/2016	PAYERPATH	4,500.00	4,125.02	374.98
3814	10/11/2016	PAYERPATH	10,410.00	9,294.63	1,115.37
3848	11/7/2016	DATA MIGRATION - ECHO	4,455.50	3,925.08	530.42
4499	1/1/2019	TOUCHWORKS EPCS SERVICES	4,722.30	2,698.48	2,023.82
1338	11/1/2007	IMPLEMENTATION FEES TOUCHWORKS STUDY MANAGER	35,950.00	35,950.00	-
3228	1/14/2016	UNICOMP INTERFACE	1,329.37	1,329.37	-
207	2/1/1995	TEMPERATURE ALARM-COMPUTER ROOM	895.00	895.00	-
633	10/19/2001	IMPOWER IMAGE PRO SCAN STATION	5,495.00	5,495.00	-
674	3/1/2002	2 - IMPOWER EOB INDEX STATION SOFTWARE	2,000.00	2,000.00	-
752	7/31/2002	IMPOWER + IMAGE REGISTRATION SOFTWARE	11,200.00	11,200.00	-
947	8/12/2004	REMOTE ACCESS SOLUTION - LICENSE & SOFTWARE	25,598.60	25,598.60	-
1001	3/29/2005	DELL NETWORK PORTABLE AIR CONDITIONING UNIT	3,159.95	3,159.95	-
1059	12/1/2005	INITIAL LICENSE EDI INTERFACE	8,100.00	8,100.00	-
1104	5/18/2006	TWO FACTOR AUTHENTICATION FOR REMOTE ACCESS	2,925.00	2,925.00	-
1116	6/30/2006	REMOTE CONVERSION	3,155.00	3,155.00	-
1148	10/18/2006	NETILLA B UPGRADE HARDWARE	1,500.00	1,500.00	-
1330	10/23/2007	IMPOWER + IMAGE ONCESCAN SOFTWARE LICENSE	700.00	700.00	-
1393	1/29/2008	VMWARE CONSULTING (HIGH AVAILABILITY PROJECT)	6,000.00	6,000.00	-
1425	4/17/2008	VM WARE LICENSES - DISASTER RECOVERY	20,469.88	20,469.88	-
1540	12/22/2008	VISUAL INTEGRATOR	1,665.00	1,665.00	-
1619	4/29/2009	TELEVOX - T LINK INSTALLATION	2,000.00	2,000.00	-
1644	6/26/2009	DICOM SINGLE DEVICE LICENSE (ECHO/PACS)	4,105.00	4,105.00	-
1744	9/16/2009	POWERSCAN LITE SCAN LICENSE	1,000.00	1,000.00	-
1745	9/16/2009	POWERSIGN SOFTWARE	500.00	500.00	-
1872	10/1/2010	CISCO SWITCHES FOR WIRELESS NETWORK	152,391.54	152,391.54	-
1963	2/11/2011	VMWARE LIC VSPHERE	5,088.16	5,088.16	-
2044	7/28/2011	DELL LATITUDE	2,261.86	2,261.86	-
2045	8/5/2011	UPS INTELLIGENCE MODULES	765.00	765.00	-
2046	8/5/2011	UPS INTELLIGENCE MODULES	765.00	765.00	-
2058	10/7/2011	CISCO CATALYST SWITCH & GLC-SX-MM	3,125.42	3,125.42	-
2067	11/15/2011	NETWORK SWITCH	1,267.30	1,267.30	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
2074	11/22/2011	APPSALUTE LICENSE	3,625.00	3,625.00	-
2092	1/31/2012	NEXUS INFRASTRUCTURE	18,702.62	18,702.62	-
2105	3/31/2012	CISCO APPLICATION	9,466.74	9,466.74	-
2115	5/1/2012	FORTIGATE 300C FIREWALL BUNDLE	5,353.20	5,353.20	-
2144	8/16/2012	ALLSCRIPTS UAI QUINTIN & ATRIA	1,640.00	1,640.00	-
2160	9/13/2012	FUJITSU LIFEBOOK T902 CORE	1,862.60	1,862.60	-
2198	12/28/2012	DELL MOBILE PRECISION M6700 LAPTOP	2,484.50	2,484.50	-
2202	2/1/2013	ENCRYPTION ACTIVATION KEY 3.0	1,617.99	1,617.99	-
2212	2/18/2013	DESK W/ STORAGE CABINETS AND PEDESTALS	2,516.00	2,516.00	-
2213	2/18/2013	DESK W/ STORAGE CABINETS, PEDESTALS, PRIVACY PANEL	2,793.00	2,793.00	-
2214	2/18/2013	DESK W/ STORAGE CABINETS, PEDESTALS, PRIVACY PANEL	2,793.00	2,793.00	-
2215	2/18/2013	L-SHAPE DESK W/ CABINETS AND PEDESTALS	1,845.25	1,845.25	-
2217	2/21/2013	148 POINT NETWORK SWITCHES	5,574.47	5,574.47	-
2218	2/21/2013	CISCO SWITCHES FOR HARTLAND OFFICE	15,360.55	15,360.55	-
2219	2/21/2013	OPTICS FOR FIBER OPTIC CONNECTION TO BGMU	10,753.04	10,753.04	-
2237	3/29/2013	POWERSCAN LITE & POWERSIGN SOFTWARE	2,765.00	2,765.00	-
2247	4/26/2013	FORTIGATE BUNDLE - SMITHS GROVE, RUSSELLVILLE, HARTLAND	2,291.52	2,291.52	-
2267	5/13/2013	FORTIGATE FIREWALL	2,250.00	2,250.00	-
2279	5/22/2013	VMWARE LICENSES	20,195.02	20,195.02	-
2285	5/31/2013	ACCELOPS LICENSES - HIPAA	23,548.00	23,548.00	-
2286	5/31/2013	FIREWALL - DR. HSIEH	763.84	763.84	-
2287	5/31/2013	FIREWALL - LEWISBURG	763.84	763.84	-
2293	5/31/2013	FUJITSU LIFEBOOK - SPARE	1,779.29	1,779.29	-
2294	5/31/2013	FUJITSU LIFEBOOK - SPARE	1,779.32	1,779.32	-
2313	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2314	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2315	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2316	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2317	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2318	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2319	6/19/2013	CISCO CATALYST SWITCH	4,142.68	4,142.68	-
2320	6/19/2013	CISCO FLEXSTACK MODULE	701.69	701.69	-
2321	6/19/2013	CISCO FLEXSTACK MODULE	701.69	701.69	-
2322	6/19/2013	CISCO FLEXSTACK MODULE	701.69	701.69	-
2323	6/19/2013	CISCO FLEXSTACK MODULE	701.69	701.69	-
2324	6/19/2013	CISCO FLEXSTACK MODULE	701.69	701.69	-
2325	6/19/2013	CISCO FLEXSTACK MODULE	701.69	701.69	-
2326	6/19/2013	CISCO SFP TRANSIVER MODULE	872.70	872.70	-
2327	6/19/2013	CISCO SFP TRANSIVER MODULE	872.70	872.70	-
2328	6/19/2013	CISCO SFP TRANSIVER MODULE	872.70	872.70	-
2329	6/19/2013	CISCO SFP TRANSIVER MODULE	872.70	872.70	-
2348	6/26/2013	POWERSCAN LITE & POWERSIGN SOFTWARE - D. GRANESE	1,075.00	1,075.00	-
2349	6/26/2013	POWERSCAN LITE & POWERSIGN SOFTWARE - FITTS	1,075.00	1,075.00	-
2350	6/26/2013	POWERSCAN LITE & POWERSIGN SOFTWARE - YURCHISIN	1,075.00	1,075.00	-
2360	7/1/2013	POWERSCAN LITE & POWERSIGN SOFTWARE	6,600.00	6,600.00	-
2379	8/13/2013	DELL LATITUDE LAPTOP	1,131.52	1,131.52	-
2380	8/13/2013	DELL LATITUDE LAPTOP	1,131.52	1,131.52	-
2397	8/27/2013	CISCO 24 PORT ENET	2,328.36	2,328.36	-
2398	8/27/2013	CISCO 24 PORT ENET	2,336.40	2,336.40	-
2399	8/27/2013	CISCO 24 PORT ENET	2,336.40	2,336.40	-
2400	8/27/2013	CISCO 24 PORT ENET	2,336.44	2,336.44	-
2401	8/27/2013	CISCO CAT 3560C SWITCH	958.77	958.77	-
2402	8/27/2013	CISCO CAT 3560C SWITCH	958.77	958.77	-
2403	8/27/2013	CISCO CAT 3560C SWITCH	958.77	958.77	-
2404	8/27/2013	CISCO CAT 3560C SWITCH	958.77	958.77	-
2405	8/27/2013	CISCO CAT FLEXSTACK	688.24	688.24	-
2406	8/27/2013	CISCO CAT FLEXSTACK	688.24	688.24	-
2407	8/27/2013	CISCO CAT FLEXSTACK	688.24	688.24	-
2408	8/27/2013	CISCO CAT FLEXSTACK	688.24	688.24	-
2409	8/27/2013	CISCO DIRECT GLC	572.25	572.25	-
2410	8/27/2013	CISCO DIRECT GLC	572.25	572.25	-
2411	8/27/2013	CISCO DIRECT SFP	2,187.27	2,187.27	-
2412	8/27/2013	CISCO DIRECT SFP	2,187.27	2,187.27	-
2432	1/1/2014	BACKUP DISK ARRAY HARD DRIVE STORAGE	173,372.78	173,372.78	-
2435	1/1/2014	CABLES FOR STORAGE PROJECT	7,275.08	7,275.08	-
2438	1/1/2014	CONSULTING-STORAGE PROJECT	3,080.00	3,080.00	-
2439	1/1/2014	CONSULTING-STORAGE PROJECT	1,760.00	1,760.00	-
2443	1/1/2014	DISK ARRAY HARD DRIVE STORAGE	154,128.94	154,128.94	-
2457	1/1/2014	HOST CARDS FOR STORAGE UPGRADE	5,984.90	5,984.90	-
2458	1/1/2014	IMMUNIZATION FORM CHANGE	3,080.00	3,080.00	-
2459	1/1/2014	IT NETWORK ENGINEERING SERVICES	1,760.00	1,760.00	-
2460	1/1/2014	LATITUDE 14 500 SERIES	1,244.09	1,244.09	-
2463	1/1/2014	LATITUDE 14 5000 SERIES	1,244.09	1,244.09	-
2470	1/1/2014	LEXMARK MX511de MFP - PRIBBLE	1,396.40	1,396.40	-
2480	1/1/2014	POWERSCAN LITE SOFTWARE	2,400.00	2,400.00	-
2481	1/1/2014	RACK WITH DOORS	1,032.71	1,032.71	-
2491	1/1/2014	STORAGE PROJECT	15,829.34	15,829.34	-
2507	1/10/2014	CISCO NETWORK SWITCHES (GLASBOW/DOBSON)	3,690.84	3,690.84	-
2508	1/13/2014	CONSULTING-STORAGE PROJECT	3,932.50	3,932.50	-
2513	1/30/2014	CISCO NETWORK SWITCHES (GLASGOW/DOBSON)	11,979.31	11,979.31	-
2526	2/17/2014	FIREWALL - GLASGOW - BALE	2,463.30	2,463.30	-
2569	3/27/2014	SQL 2008 ENTERPRISE SOFTWARE	12,037.36	12,037.36	-
2599	5/7/2014	DELL LATITUDE	1,220.61	1,220.61	-
2633	6/26/2014	PC POWER MODULE FOR SERVER	1,485.14	1,485.14	-
2639	7/10/2014	NETWORK SWITCHES - WKU	12,085.84	12,085.84	-
2656	7/29/2014	HP ELITE DESK COMPUTER	1,209.56	1,209.56	-
2657	7/29/2014	HP ELITE DESK COMPUTER	1,209.56	1,209.56	-
2658	7/29/2014	HP ELITE DESK COMPUTER	1,209.56	1,209.56	-
2659	7/29/2014	HP ELITE DESK COMPUTER	1,209.56	1,209.56	-
2660	7/30/2014	DELL LATITUDE LAPTOP	1,220.59	1,220.59	-
2661	7/30/2014	DELL LATITUDE LAPTOP	1,220.62	1,220.62	-
2662	7/30/2014	DELL LATITUDE LAPTOP	1,220.62	1,220.62	-
2696	9/9/2014	APC POWER MODULE	1,485.14	1,485.14	-
2732	9/17/2014	VIRTUAL SA200 WITH CONTROLLERS	9,939.76	9,939.76	-
2763	11/9/2014	IT NETWORK ENGINEERING	3,000.00	3,000.00	-
2768	11/17/2014	NEXUS SWITCHES - LRDC	51,224.29	51,224.29	-
2773	12/13/2014	CISCO SWITCHES	21,463.69	21,463.69	-
2779	1/1/2015	DESK WITH OVERHEAD CABINET	2,040.08	2,040.08	-
2780	1/1/2015	DESK WITH OVERHEAD CABINET	2,040.07	2,040.07	-
2781	1/1/2015	DESK WITH OVERHEAD CABINET	2,040.07	2,040.07	-
2831	3/4/2015	CISCO HARDWARE - PRIMECARE	16,357.66	16,357.66	-
2847	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2848	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2849	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2850	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2851	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2852	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
2853	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2854	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2855	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2856	4/15/2015	DELL LATITUDE	1,310.14	1,310.14	-
2903	5/11/2015	PRIMECARE DATA CONVERSION	4,387.50	4,387.50	-
2923	6/1/2015	CISCO SWITCHES	33,810.07	33,810.07	-
2931	6/2/2015	HIGH PERFORMANCE STORAGE	218,443.40	218,443.40	-
2937	6/10/2015	NETWORK EQUIP - WALK-IN CARE/PEDS ASSOC	25,666.93	25,666.93	-
2989	7/28/2015	SERVERS	180,490.64	180,490.64	-
3035	9/11/2015	HP ELITE DESKTOP	1,220.52	1,220.52	-
3036	9/11/2015	HP ELITE DESKTOP	1,220.52	1,220.52	-
3037	9/11/2015	HP ELITE DESKTOP	1,220.52	1,220.52	-
3039	9/18/2015	SERVER RACK	990.00	990.00	-
3041	9/23/2015	WEB SERVERS	220.00	220.00	-
3043	9/25/2015	FAXBACK SERVER LICENSE	4,350.00	4,350.00	-
3152	11/13/2015	DELL LATITUDE E6440	1,252.61	1,252.61	-
3153	11/13/2015	DELL LATITUDE E6440	1,252.60	1,252.60	-
3154	11/13/2015	DELL LATITUDE E6440	1,252.60	1,252.60	-
3155	11/13/2015	DELL LATITUDE E6440	1,252.60	1,252.60	-
3190	1/1/2016	HP DESK COMPUTER	1,188.18	1,188.18	-
3191	1/1/2016	HP DESK COMPUTER	1,188.18	1,188.18	-
3193	1/1/2016	LATITUDE E6440 LAPTOP	1,530.97	1,530.97	-
3194	1/1/2016	LATITUDE E6440 LAPTOP	1,252.61	1,252.61	-
3195	1/1/2016	LATITUDE E6440 LAPTOP	1,252.60	1,252.60	-
3196	1/1/2016	LATITUDE E6440 LAPTOP	1,252.61	1,252.61	-
3197	1/1/2016	LATITUDE E6440 LAPTOP	1,252.60	1,252.60	-
3198	1/1/2016	LATITUDE E6440 LAPTOP	1,252.60	1,252.60	-
3288	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3289	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3290	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3291	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3292	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3314	4/4/2016	CISCO CUCM LICENSES	2,290.55	2,290.55	-
3320	4/7/2016	SERVER MIGRATION	2,200.00	2,200.00	-
3323	4/13/2016	EMC CAPTIVA QUICKSCAN PRO	1,085.00	1,085.00	-
3340	5/9/2016	SWITCHES FOR NETWORK	93,659.85	89,199.87	4,459.98
3438	5/27/2016	POWER MODULE APC SYMETRA	1,530.97	1,530.97	-
3504	6/6/2016	25 - DUAL RADIO ACCESS POINTS - N.R.	15,990.31	15,038.51	951.80
3508	6/12/2016	CISCO - NETWORK CONNECTIVITY	1,447.50	1,447.50	-
3509	6/12/2016	CISCO - NETWORK CONNECTIVITY	1,447.50	1,447.50	-
3527	6/28/2016	DRAGON HOSTED VERSION IMPLEMENTATION	13,300.00	13,300.00	-
3744	8/12/2016	COMPELLENT DRIVES - USABLE STORAGE	214,022.95	214,022.95	-
3773	9/6/2016	HP X240 COMPUTER WORKSTATION	1,581.60	1,581.60	-
3878	1/1/2017	EXTERNAL HARD DRIVE	768.50	768.50	-
3879	1/1/2017	POWER MODULE FOR UPS	1,623.32	1,623.32	-
3892	1/1/2017	DRAGON MEDICAL ONE	45,325.00	38,850.00	6,475.00
3893	1/1/2017	APRICORN AEGIS PADLOCK FORTRESS DR	1,220.26	1,220.26	-
3927	3/3/2017	FUJITSU 7180 SCANNER	1,536.83	1,536.83	-
3928	3/6/2017	FUJITSU LIFEBOOK	1,338.90	1,338.90	-
3929	3/6/2017	FUJITSU LIFEBOOK	1,338.90	1,338.90	-
3981	5/17/2017	CISCO NETWORK SWITCH	4,706.88	4,706.88	-
3982	5/17/2017	CISCO NETWORK SWITCH	4,706.88	4,706.88	-
3983	5/17/2017	CISCO NETWORK SWITCH	4,706.88	4,706.88	-
3984	5/17/2017	CISCO NETWORK SWITCH	4,706.88	4,706.88	-
3985	5/17/2017	CISCO NETWORK SWITCH	4,706.88	4,706.88	-
3986	5/17/2017	CISCO NETWORK SWITCH	4,706.88	4,706.88	-
3987	5/11/2017	LIVENX NETWORK MONITORING SOFTWARE	11,604.44	11,604.44	-
3988	5/11/2017	3-APC SMART - UPS BATTERY BACKUP	3,018.90	3,018.90	-
4036	5/17/2017	NETWORK MONITORING SOFTWARE	7,844.00	6,256.52	1,587.48
4062	7/25/2017	CISCO NETWORK SWITCH	3,042.42	3,042.42	-
4248	10/25/2017	CISCO ROUTER	2,807.94	2,807.94	-
4249	10/25/2017 (2)	CATALYST NETWORK SWITCHES	10,306.39	10,306.39	-
4250	11/17/2017 (2)	CISCO NEXUS 9300 SWITCHES	41,976.00	41,976.00	-
4291	1/1/2018	VEEAM AVAILABILITY SUITE ENTERPRISE FOR VMWARE	22,578.00	22,578.00	-
4334	2/10/2018 (8)	CISCO B200 M5 BLADE SERVERS	230,717.06	226,871.77	3,845.29
4366	3/12/2018	FORTINET FORTIGATE 300C FIREWALL HARDWARE	99,383.67	96,070.87	3,312.80
4367	4/30/2018	FORTIAUTHENTICATOR - VM LICENSE	1,739.12	1,159.43	579.69
4423	8/31/2018	NEXUS SWITCH INSTALLATION	15,028.00	13,024.27	2,003.73
4439	10/23/2018	XIMA CHRONICALL SOFTWARE	8,982.00	7,485.01	1,496.99
4450	11/7/2018	VSEE TELEMEDICINE PLATFORM	7,000.00	4,166.67	2,833.33
4471	11/8/2018	SERVER STORAGE	233,086.36	194,238.63	38,847.73
4504	1/25/2019	HPLI M632 MFP - I/T	2,091.25	1,638.15	453.10
4541	4/11/2019	VLA VMWARE HORIZON 7 ENTERPRISE 10 PACK	5,420.44	5,420.44	-
4543	4/2/2019	400 GB SOLID STATE HARD DRIVE FOR GGC MAIN DATA CENTER	1,060.00	795.00	265.00
4544	4/2/2019	400 GB SOLID STATE HARD DRIVE FOR LRDC	1,060.00	795.00	265.00
4561	4/26/2019	APC UPS X 1500 VA TOWER/RACK - BROWNSVILLE	1,046.92	750.28	296.64
4562	4/26/2019	APC UPS X 1500 VA TOWER/RACK - SLEEP CENTER	1,046.92	750.28	296.64
4563	4/26/2019	APC UPS X 1920 VA TOWER/RACK - SURGERY CENTER	1,391.26	997.06	394.20
4671	10/29/2015	COMPUTER/SERVER - DR. SOUTH	6,990.97	6,990.97	-
4672	3/1/2016	TIME CLOCK - 12 SOUTH	1,183.50	1,183.50	-
4684	11/15/2019	MANAGEENGINE SERVICE DESK PLUS HELPDESK TICKETING SOFTWARE	3,802.22	3,802.22	-
4772	2/26/2021	FORTINET FORTIGATE FG-60F NETWORK FIREWALL APPLIANCE	1,431.00	524.70	906.30
4785	3/22/2021	CISCO CATALYST 2960X NETWORK SWITCH	3,012.50	1,054.38	1,958.12
4786	3/22/2021	CISCO CATALYST 2960X NETWORK SWITCH - SPARE	3,012.50	1,054.38	1,958.12
4803	6/2/2021	APPLICATION DELIVERY CONTROLLER LOAD BALANCER	37,001.08	11,717.01	25,284.07
4830	10/25/2021	SYNOLOGY NETWORK ATTACHED STORAGE - M365 BACKUPS	14,899.69	2,979.94	11,919.75
4845	12/15/2021 (4)	CISCO ISR 4351 VOICE GATEWAYS AND PHONE CARRIER CHANGEOVER PROJECT	112,122.59	24,293.23	87,829.36
4846	11/30/2021	FORTINET SDWAN	26,528.16	5,747.78	20,780.38
4858	1/28/2022	TRIPP LITE 32-PORT CHARGING STATION CART - NURSE FLOATERS	1,192.50	218.63	973.87
4900	7/26/2022	FORTIWLC WLAN CONTROLLER VIRTUAL APPLIANCE	4,804.98	400.42	4,404.56
4913	5/15/2022	10G FIBER UPGRADE	3,136.19	418.16	2,718.03
4914	6/15/2022	NETAPP A400 STORAGE ARRAY - LRDC	327,272.01	38,181.74	289,090.27
4915	6/15/2022	NETAPP A400 STORAGE ARRAY - MAIN	327,272.01	38,181.74	289,090.27
4919	8/10/2022	DELL LTO-9 TAPE BACKUP SYSTEM	63,027.96	5,252.33	57,775.63
4927	10/5/2022	FORTIGATE-40F FIREWALL HARDWARE - RADIOLOGIST HOME	1,411.92	70.60	1,341.32
4928	1/1/2022	LOAD BALANCER INSTALLATION/SERVICES	7,800.00	1,560.00	6,240.00
2290	5/31/2013	FUJITSU LIFEBOOK - HSIEH	1,779.29	1,779.29	-
2391	8/21/2013	CARPET - DR. HSIEH	2,680.00	2,680.00	-
3880	1/1/2017	HPLI M630H MFP - REGISTRATION	1,916.65	1,916.65	-
4494	1/8/2019	AED PLUS PK W/COVER	1,356.75	742.98	613.77
4583	6/1/2019	MIDMARK 204 EXAM TABLE	1,355.39	693.84	661.55
4584	6/1/2019	MIDMARK 204 EXAM TABLE	1,355.38	693.84	661.54
4597	4/18/2019 (2)	ACS HOLTER MONITORS AND MASTER 9 SOFTWARE	4,810.00	2,519.52	2,290.48
2292	5/31/2013	FUJITSU LIFEBOOK - KUSHAL SINGH	1,779.29	1,779.29	-
3316	4/6/2016	AED PLUS - LEWISHBURG	1,505.85	1,452.06	53.79
3932	3/6/2017	FUJITSU LIFEBOOK - DR. KUSHAL SINGH	1,338.90	1,338.90	-
136	4/15/1992	5 DRAWER FILE-VERST	590.00	590.00	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
375	9/15/1998	RITTER EXAM TABLE	686.00	686.00	-
382	11/2/1998	2 RITTER EXAM TABLES	1,578.00	1,578.00	-
390	11/17/1998	MAHAGONY DESK	904.00	904.00	-
393	12/1/1998	5 DRAWER LATERAL FILE CABINET	549.00	549.00	-
688	3/8/2002	RITTER I04 EXAM TABLE	961.63	961.63	-
833	10/22/2002	SANDGRAY EXAM TABLE	787.16	787.16	-
1349	11/14/2007	PEBBLE GRAY MIDWAY EXAM TABLE	965.59	965.59	-
1350	11/14/2007	PEBBLE GRAY MIDWAY EXAM TABLE - SN V528234	994.97	994.97	-
1351	11/14/2007	PEBBLE GRAY MIDWAY EXAM TABLE - SN V528253	994.97	994.97	-
1420	4/3/2008	SECA DIGITAL SCALES - SN 5763332074389	739.05	739.05	-
1492	8/19/2008	DIGITAL SCALE - 5763191083814	758.37	758.37	-
1560	1/26/2009	SECA DIGITAL SCALE 763 550# - 5763344081915	865.31	865.31	-
1583	3/17/2009	EXAM TABLE	1,166.97	1,166.97	-
2174	10/24/2012	MIDMARK RITTER EXAM TABLE	1,159.85	1,159.85	-
2183	11/28/2012	DIGITAL SCALE	842.49	842.49	-
2394	8/21/2013	LEXMARK MX511DE MFP - REED	1,396.39	1,396.39	-
2449	1/1/2014	FUJITSU LIFEBOOK	1,910.91	1,910.91	-
2450	1/1/2014	FUJITSU LIFEBOOK	1,910.91	1,910.91	-
2464	1/1/2014	LATITUDE 14 5000 SERIES	1,244.09	1,244.09	-
2471	1/1/2014	LEXMARK MX511DE MFP - SHETH	1,396.40	1,396.40	-
2600	5/7/2014	DELL LATITUDE	1,220.61	1,220.61	-
3167	11/17/2015	HPLI M630 MFP - CHHABRA	1,807.61	1,807.61	-
3302	3/24/2016	HPLI M527 MFP - DR. SUN	1,471.86	1,471.86	-
3735	8/3/2016	EXAM TABLE - DR. SUN	1,257.72	1,152.95	104.77
4356	3/7/2018	DIGITAL SCALE - DR. REED	1,037.44	716.35	321.09
4369	3/23/2018	HPLI M631 MFP - DR. WENTWORTH	1,385.19	1,315.94	69.25
4502	1/21/2019	HPLI M632 MFP W/TRAY - DR. SINGH	2,351.21	1,841.78	509.43
3166	11/17/2015	HPLI M630 MFP - PANDEYA REGISTRATION	1,807.61	1,807.61	-
3256	2/16/2016	BLOOD DRAW CHAIR	825.42	805.79	19.63
3270	3/1/2016	TIME CLOCK - 14 PANDEYA	1,183.50	1,183.50	-
3317	4/7/2016	AED PLUS - CRASHCART	1,590.85	1,534.07	56.78
4748	10/1/2020	DELPHI THERMAL DETECTION SYSTEM	1,431.00	459.97	971.03
2585	4/11/2014	LEXMARK MX511 de MFP - WELCH / BENNETT	806.68	806.68	-
2679	8/25/2014	LEXMARK MX511DE MFP - GOVER	790.81	790.81	-
2857	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2858	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2859	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2861	4/15/2015	DELL LATITUDE - TOUCHSCREEN	1,453.10	1,453.10	-
2881	5/1/2015	LEXMARK MX511DE MFP - PRIMECARE REG.	825.48	825.48	-
2888	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2889	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2890	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2891	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2892	5/1/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2894	5/1/2015	REIMBURSEMENT AMOUNT	4,690.00	4,690.00	-
2896	5/1/2015	SAFE	800.00	800.00	-
2897	5/1/2015	TRADENAME	12,100.00	6,184.47	5,915.53
3003	8/14/2015	AED CRASHCART	1,465.85	1,465.85	-
3275	3/1/2016	TIME CLOCK - 16 PRIMECARE	1,183.50	1,183.50	-
4742	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
4495	1/11/2019	HPLI M632 MFP W/TRAY - DR. HAVENER	2,351.86	1,842.29	509.57
4497	1/17/2019	AED PLUS PK W/COVER	1,356.75	759.13	597.62
4525	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.14	727.48	572.66
4526	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.15	727.48	572.67
4527	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.15	727.48	572.67
4528	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.15	727.48	572.67
4529	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.15	727.48	572.67
4530	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.15	727.48	572.67
4531	1/25/2019	MIDMARK 204 EXAM TABLE - DR. HAVENER	1,300.15	727.48	572.67
2291	5/31/2013	FUJITSU LIFEBOOK - KAMAL SINGH	1,779.29	1,779.29	-
2519	2/1/2014	LEXMARK X466DE MFP - KUSHAL REG.	900.29	900.29	-
3170	11/17/2015	HPLI M630 MFP - R'VILL REG	1,807.61	1,807.61	-
3276	3/1/2016	TIME CLOCK - 08 RUSSELLVILLE	1,183.50	1,183.50	-
3318	4/7/2016	AED PLUS - CRASHCART	1,505.85	1,452.06	53.79
3930	3/6/2017	FUJITSU LIFEBOOK - DR. KAMAL SINGH	1,338.90	1,338.90	-
4112	9/30/2017	(10) MIDMARK EXAM TABLES	13,406.54	10,054.91	3,351.63
4252	11/20/2017	TABLE WITH BENCHES	850.95	617.98	232.97
4585	6/1/2019	MIDMARK 204 EXAM TABLE	1,355.39	693.84	661.55
4657	10/29/2015	RITTER 204 EXAM TABLE	900.00	900.00	-
4658	10/29/2015	RITTER 204 EXAM TABLE	900.00	900.00	-
2288	5/31/2013	FUJITSU LIFEBOOK - AVULA	1,779.29	1,779.29	-
2289	5/31/2013	FUJITSU LIFEBOOK - AVULA	1,779.29	1,779.29	-
3250	2/15/2016	HPLI M527 MFP - DR. AVULA REGISTRATION	2,030.67	2,030.67	-
3268	3/1/2016	TIME CLOCK - 09 AVULA	1,183.50	1,183.50	-
3931	3/6/2017	FUJITSU LIFEBOOK - DR. AVULA	1,338.90	1,338.90	-
4662	10/29/2015	AUTOCLAVE M9	2,845.00	2,845.00	-
2525	2/14/2014	SIGNS-DR. BALE	2,380.41	2,380.41	-
2527	2/18/2014	BLOOD DRAWING CHAIR	770.25	770.25	-
2528	2/18/2014	LEXMARK MX511DE MFP - FRONT NS	834.08	834.08	-
2529	2/18/2014	LEXMARK MX511DE MFP - MORTIMER	834.08	834.08	-
2538	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2539	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2540	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2541	2/19/2014	EXAM TABLE	1,230.08	1,230.08	-
2542	2/19/2014	EXAM TABLE	1,230.08	1,230.08	-
2543	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2544	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2545	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2546	2/19/2014	EXAM TABLE	1,230.07	1,230.07	-
2556	3/4/2014	AED PLUS	1,398.00	1,398.00	-
2558	3/4/2014	HYFREACTOR 2000	891.37	891.37	-
2561	3/6/2014	INBODY 520 BODY COMPOSITION ANALYZER	6,600.00	6,600.00	-
2571	3/28/2014	LIQUID NITROGEN STORAGE TANK-GLASLOW	1,550.80	1,550.80	-
2621	5/30/2014	MIDMARK EXAM TABLE	1,231.85	1,231.85	-
2622	5/30/2014	MIDMARK EXAM TABLE	1,231.85	1,231.85	-
2623	5/30/2014	MIDMARK EXAM TABLE	1,231.85	1,231.85	-
2832	3/9/2015	MICROLOOP SPIROMETER	2,437.00	2,437.00	-
2880	5/1/2015	LEXMARK MX511DE MFP - DR. TRAVIS	825.48	825.48	-
2932	6/5/2015	MIDMARK EXAM TABLE	1,203.72	1,203.72	-
2933	6/5/2015	MIDMARK EXAM TABLE	1,247.06	1,247.06	-
2934	6/5/2015	MIDMARK EXAM TABLE	1,247.05	1,247.05	-
2935	6/5/2015	MIDMARK EXAM TABLE	1,247.05	1,247.05	-
3269	3/1/2016	TIME CLOCK - 11 BALE	1,183.50	1,183.50	-
3819	10/17/2016	HOSPIRA PLUM IV PUMP	2,217.90	1,953.85	264.05
3950	4/10/2017	HPLI M630 MFP - DR. NORRIS	2,449.40	2,449.40	-
4060	4/6/2017	MIDMARK EXAM TABLE	1,327.32	1,090.31	237.01
4061	4/6/2017	MIDMARK EXAM TABLE	1,327.32	1,090.31	237.01

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
4065	5/12/2017	HPLI M630H MFP - DR. CLEMENTS	1,915.73	1,915.73	-
4478	9/30/2017	MIDMARK EXAM TABLE	1,340.65	1,005.48	335.17
4661	10/29/2015	AUTOCLAVE M9	2,845.00	2,845.00	-
4741	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
4802	6/9/2021	ACCUCOLD REFRIGERATOR	2,064.47	466.97	1,597.50
2530	2/18/2014	LEXMARK MX511DE MFP - NURSE	834.08	834.08	-
2557	3/4/2014	AED PLUS	1,398.00	1,398.00	-
2734	9/25/2014	PHOENIX BREATH ALCOHOL TESTER	4,370.88	4,370.88	-
2792	1/1/2015	SONICATOR PLUS 930 - ULTRASOUND HEAT TREATMENT	2,500.00	2,500.00	-
3273	3/1/2016	TIME CLOCK - 10 MORGANTOWN	1,183.50	1,183.50	-
3940	3/23/2017	HPLF M630H MFP - REGISTRATION	2,201.11	2,201.11	-
3943	3/29/2017	AUDIOMETER W/ PRINTER	1,430.89	1,175.36	255.53
1441	5/15/2008	SQUARE PICNIC TABLE	781.82	781.82	-
4444	10/23/2018	MANITOWOC ICE MACHINE	2,062.91	1,227.93	834.98
620	10/1/2001	CRITSPIN 3 HEMOTOCRIT W/REDR - SN 113M9600183	1,200.00	1,200.00	-
708	5/20/2002	STATSPIN EXPRESS 2 CENTRIFUGE	1,522.24	1,522.24	-
839	11/14/2002	ORCHARD LAB INFO SYSTEM SOFTWARE	2,850.00	2,850.00	-
844	12/3/2002	ORCHARD LAB INFO SYSTEM SOFTWARE	116,662.50	116,662.50	-
871	6/13/2003	ORCHARD LAB INFO SYSTEM SOFTWARE	38,887.50	38,887.50	-
946	8/12/2004	LICENSE HARVEST CLIENT - LAB	6,750.00	6,750.00	-
1056	11/18/2005	FREEZER ISOTEMP BASIC 86C - SN X17P-219174-XP	7,516.11	7,516.11	-
1198	3/14/2007	OLYMPUS 100X OIL OBJECTIVE MICROSCOPE	720.90	720.90	-
1199	3/14/2007	OLYMPUS 50X OIL OBJECTIVE MICROSCOPE	849.60	849.60	-
1288	8/15/2007	STATSPIN EXPRESS 2 CENTRIFUGE	1,852.96	1,852.96	-
1290	8/16/2007	CENTRIFUGE ACCUSPIN 3R	6,760.04	6,760.04	-
1417	4/3/2008	GUESTCALL PAGING SYSTEM - MAIN & FCC	2,622.00	2,622.00	-
1479	7/1/2008	ANALYZER LEADCARE II - WLC01693 (IN STORAGE)	1,731.06	1,731.06	-
1589	3/31/2009	ORCHARD CUSTOM SOFTWARE PROGRAMMING	1,500.00	1,500.00	-
1726	8/21/2009	UNIDIRECTIONAL EXCYETE INTERFACE(SOFTWARE)	2,000.00	2,000.00	-
1774	12/7/2009	CUSTOM PROGRAMMING-TOUCHWORKS	500.00	500.00	-
2089	1/17/2012	LASER JET PRINTER	956.12	956.12	-
2117	5/10/2012	MAT FOR PHLEBOTOMY STATION	774.80	774.80	-
2248	4/26/2013	URISYS 1100 BARCODE READER - HSIEH	1,128.64	1,128.64	-
2249	4/26/2013	URISYS 1100 BARCODE READER - AVULA	1,126.11	1,126.11	-
2250	4/26/2013	URISYS 1100 BARCODE READER - SINGHS R'VILLE	1,126.11	1,126.11	-
2251	4/30/2013	CHANGE TO ORCHARD EHR INTERFACE FOR QUEST	495.00	495.00	-
2266	5/10/2013	URISYS 1100 BARCODE READER - SINGHS LEWISBURG	1,128.64	1,128.64	-
2282	5/29/2013	LABQUEST INTERFACE	440.00	440.00	-
2330	6/19/2013	HARVEST LICENSE - HSIEH	2,250.00	2,250.00	-
2331	6/19/2013	HARVEST LICENSE - LEWISBURG	2,250.00	2,250.00	-
2332	6/19/2013	HARVEST LICENSE - RUSSELLVILLE	2,250.00	2,250.00	-
2333	6/19/2013	HARVEST LICENSE - SMITHS GROVE	2,250.00	2,250.00	-
2352	6/30/2013	HARVEST LICENSE - D. GRANESE	2,250.00	2,250.00	-
2353	6/30/2013	HARVEST LICENSE - YURCHISIN	2,250.00	2,250.00	-
2356	6/30/2013	UNIDIRECTIONAL ANALYZER INTERFACE - ROCHE URISYS 1100	2,050.00	2,050.00	-
2357	6/30/2013	UNIDIRECTIONAL ANALYZER INTERFACE - ROCHE URISYS 1100	2,050.00	2,050.00	-
2488	1/1/2014	SOFTWARE - MEDONIC	2,050.00	2,050.00	-
2489	1/1/2014	SOFTWARE - ROCHE	2,050.00	2,050.00	-
2490	1/1/2014	SOFTWARE - SEIMENS CLINTEK STATUS	4,600.00	4,600.00	-
2496	1/1/2014	URISYS 1100 UNIDIRECTIONAL INTERFACE - HSIEH	2,050.00	2,050.00	-
2497	1/1/2014	UNIDIRECTIONAL INTERFACE URISYS 1100 - R'VILLE	2,050.00	2,050.00	-
2505	1/9/2014	MOBILE WORK SYSTEM CART - FRANKLIN RED OAK	1,072.61	1,072.61	-
2506	1/9/2014	MOBILE WORK SYSTEM CART - FRANKLIN RED OAK	1,072.61	1,072.61	-
2510	1/27/2014	HARVEST CLIENT LIC - GLASGOW	2,250.00	2,250.00	-
2514	1/31/2014	ANALYZER INTERFACE - MORGANTOWN	2,050.00	2,050.00	-
2515	1/31/2014	ANALYZER INTERFACE FOR CLINTEK STATUS - MORGANTOWN	2,050.00	2,050.00	-
2522	2/4/2014	TASK FORCE MOBILE WORK SYSTEM	920.29	920.29	-
2523	2/6/2014	CENTRIFUGE GLASGOW LAB	792.90	792.90	-
2551	2/27/2014	HORIBA ABX MICROS 60 HEMATOLOGY ANALYZER	16,392.12	16,392.12	-
2566	3/11/2014	GWT 4000 WATER SYSTEM - GLASLOW	8,390.00	8,390.00	-
2574	3/31/2014	ORCHARD INTERFACE ROCHE - GLASGOW	2,050.00	2,050.00	-
2593	4/30/2014	BIDIRECTIONAL INTERFACE - HSIEH	6,500.00	6,500.00	-
2594	4/30/2014	BIDIRECTIONAL ROCHE C311 INTERFACE	6,500.00	6,500.00	-
2605	5/10/2014	UNIDIRECTIONAL INTERFACE FOR URISYS 1100	2,050.00	2,050.00	-
2676	8/22/2014	UNIDIRECTIONAL ANALYZER	2,050.00	2,050.00	-
2677	8/22/2014	UNIDIRECTIONAL ANALYZER	2,050.00	2,050.00	-
2740	10/1/2014	5.0 ISOTEMP INCUBATOR	2,084.46	2,084.46	-
2784	1/1/2015	CEPHEID GENEXPERT INFINITY SYSTEM	167,460.00	167,460.00	-
2789	1/1/2015	MEDONIC HEMATOLOGY ANALYZER	7,150.00	7,150.00	-
2810	1/30/2015	UNIDIRECTIONAL ANALYZER INTERFACE - SOFIA	1,650.00	1,650.00	-
2811	1/30/2015	UNIDIRECTIONAL ANALYZER INTERFACE - SOFIA	1,650.00	1,650.00	-
2812	1/30/2015	UNIDIRECTIONAL ANALYZER INTERFACE - SOFIA	1,650.00	1,650.00	-
2813	1/30/2015	UNIDIRECTIONAL ANALYZER INTERFACE - SOFIA	1,650.00	1,650.00	-
2814	1/30/2015	UNIDIRECTIONAL ANALYZER INTERFACE - SOFIA	1,650.00	1,650.00	-
2815	1/30/2015	UNIDIRECTIONAL ANALYZER INTERFACE - SOFIA	1,650.00	1,650.00	-
2895	5/1/2015	ROCHE COBAS INTEGRA 400 ANALYZER INTERFACE	1,150.00	1,150.00	-
2916	5/28/2015	ACCUSCOPE 3012 LED MICROSCOPE - PRIMECARE	1,592.00	1,592.00	-
2925	6/1/2015	GWT LP 2000 SERIES AFU W/60L TANK (PRIMECARE)	5,950.00	5,950.00	-
2939	6/12/2015	ORCHARD INTERFACE - PRIMECARE	8,965.00	8,965.00	-
2950	6/30/2015	4 PORT DIGI SERVER FOR ORCHARD - SATELLITE OFFICE	775.00	775.00	-
2951	6/30/2015	ROCHE COBAS INTEGRA 400 PLUS SYSTEM - PRIMECARE	56,752.40	56,752.40	-
2986	7/28/2015	HORIBA ABX MICROS 60 HEMATOLOGY ANALYZER	16,212.00	16,212.00	-
2990	7/29/2015	4 PORT DIGI SERVER FOR ORCHARD - WIC	700.00	700.00	-
2991	7/29/2015	4 PORT DIGI SERVER FOR ORCHARD - WIC	700.00	700.00	-
2998	8/6/2015	URISYS 1100 START KIT - PEDS ASSOC	1,210.85	1,210.85	-
3004	8/15/2015	UNIDIRECTIONAL ANALYZER INTERFACE	2,050.00	2,050.00	-
3177	1/1/2016	ANALYZER INTERFACE - CLINITEK	2,050.00	2,050.00	-
3178	1/1/2016	SOFIA ANALYZER INTERFACE	4,600.00	4,600.00	-
3179	1/1/2016	SOFIA ANALYZER INTERFACE	4,600.00	4,600.00	-
3180	1/1/2016	SOFIA ANALYZER INTERFACE	4,600.00	4,600.00	-
3200	1/1/2016	ORCHARD INTERFACE FOR URISYS - PEDS ASSOC	1,783.34	1,783.34	-
3201	1/1/2016	ORCHARD INTERFACE FOR URISYS - PEDS ASSOC	1,783.34	1,783.34	-
3202	1/1/2016	ORCHARD INTERFACE FOR SOFIA - PEDS ASSOC	1,783.34	1,783.34	-
3203	1/1/2016	ORCHARD INTERFACE FOR SOFIA - PEDS ASSOC	1,783.34	1,783.34	-
3204	1/1/2016	ORCHARD INTERFACE FOR SOFIA - PEDS ASSOC	1,783.33	1,783.33	-
3205	1/1/2016	ORCHARD INTERFACE FOR SOFIA - PEDS ASSOC	1,783.33	1,783.33	-
3219	1/6/2016	PHADIA 250 SYSTEM	119,236.18	119,236.18	-
3225	1/14/2016	DIGI SERVER - MUNFORDVILLE	750.00	750.00	-
3226	1/14/2016	HARVEST CLIENT LICENSE - MUNFORDVILLE	3,000.00	3,000.00	-
3232	1/27/2016	IRICELL 1500 NA (IQ200 SELECT & 2.5 ICHEM VELOCITY INSTRUMENT)	88,950.00	87,891.06	1,058.94
3233	1/27/2016	LABPRO WA 96 PLUS SYSTEM	82,600.00	81,616.67	983.33
3238	1/27/2016	UNICEL DXH 600 HEMATOLOGY SYSTEM - MAIN	49,999.00	49,403.81	595.19
3239	1/29/2016	UNIDIRECTIONAL ANALYZER INTERFACE - CLINITEK STATUS - M'VILLE	2,050.00	2,025.62	24.38
3240	2/1/2016	4 PORT DIGI SERVER	750.00	750.00	-
3241	2/1/2016	HARVEST LICENSE	3,000.00	3,000.00	-
3266	2/29/2016	ACCUSCOPE 3012 LED MICROSCOPE - WALK IN CARE	1,532.50	1,496.02	36.48
3300	3/24/2016	HPLI M527 MFP - LAB DEBBIE	1,559.92	1,559.92	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
3348	5/13/2016	CLINITEK PLUS ANALYZER - FRANKLIN	1,606.54	1,530.07	76.47
3349	5/13/2016	HERATHERM INCUBATOR	2,578.84	2,456.07	122.77
3350	5/13/2016	HERATHERM INCUBATOR	2,578.83	2,456.06	122.77
3379	5/23/2016	4 PORT DIG SERVER - NASHVILLE RD	779.65	779.65	-
3380	5/23/2016	4 PORT DIG SERVER - NASHVILLE RD	779.65	779.65	-
3381	5/23/2016	4 PORT DIG SERVER - NASHVILLE RD	779.65	779.65	-
3398	5/23/2016	ROCHE COBAS U411 URISYS ANALYZER - NASHVILLE RD	6,969.50	6,554.63	414.87
3402	5/23/2016	HARVEST LICENSE - NASHVILLE RD	3,180.00	3,180.00	-
3403	5/23/2016	HARVEST LICENSE - NASHVILLE RD	3,180.00	3,180.00	-
3404	5/23/2016	HARVEST LICENSE - NASHVILLE RD	3,180.00	3,180.00	-
3405	5/23/2016	HARVEST LICENSE - NASHVILLE RD	3,180.00	3,180.00	-
3406	5/23/2016	HARVEST LICENSE - NASHVILLE RD	3,180.00	3,180.00	-
3407	5/23/2016	HOSHIZAKI REFRIGERATOR - NASHVILLE RD LAB	3,376.30	3,175.34	200.96
3408	5/23/2016	HOSHIZAKI REFRIGERATOR - NASHVILLE RD LAB	3,376.30	3,175.34	200.96
3414	5/23/2016	HPLI M527 MFP - FCC LAB	1,471.86	1,471.86	-
3415	5/23/2016	HPLI M527 MFP - PHLEBOTOMY	1,471.86	1,471.86	-
3430	5/23/2016	UNICEL DXH 600 HEMATOLOGY SYSTEM - NASHVILLE RD.	52,751.93	49,611.95	3,139.98
3440	5/28/2016	ACCUSPIN CENTRIFUGE - NASHVILLE RD	3,571.98	3,359.35	212.63
3445	5/28/2016	ROCHE COBAS 6000 SERIES CS01 ANALYZER	112,826.40	106,110.56	6,715.84
3491	5/31/2016	ANALYZER INTERFACE - COULTER DXH 600 - N.R.	4,600.00	4,326.17	273.83
3492	5/31/2016	ANALYZER INTERFACE - QUIDEL SOFIA - N.R.	4,600.00	4,326.17	273.83
3493	5/31/2016	ANALYZER INTERFACE - QUIDEL SOFIA - N.R.	4,600.00	4,326.17	273.83
3494	5/31/2016	ANALYZER INTERFACE - QUIDEL SOFIA - N.R.	4,600.00	4,326.17	273.83
3495	5/31/2016	ANALYZER INTERFACE - QUIDEL SOFIA - N.R.	4,600.00	4,326.17	273.83
3496	5/31/2016	ROCHE COBAS U411 URISYS ANALYZER INTERFACE	2,050.00	1,927.99	122.01
3497	5/31/2016	ANALYZER INTERFACE - COULTER DXH600 - MAIN	3,600.00	3,385.74	214.26
3498	5/31/2016	ROCHE COBAS 6000 CS01 ANALYZER INTERFACE	7,500.00	7,053.58	446.42
3507	6/9/2016	OLYMPUS CX31 MICROSCOPE - NASHVILLE RD	2,350.00	2,210.15	139.85
3510	6/15/2016	ROCHE U411 URINE ANALYZER	6,969.50	6,554.63	414.87
3540	7/11/2016	OLYMPUS BX43 MICROSCOPE - HEMATOLOGY	10,714.69	9,949.36	765.33
3541	7/11/2016	OLYMPUS BX43 MICROSCOPE - MICROBIOLOGY	10,740.55	9,973.40	767.15
3730	8/1/2016	HARVEST LICENSE - (FORMERLY FOR DR. SOUTH)	3,000.00	3,000.00	-
3741	8/9/2016	HORIBA ABX MICROS 60 HEMATOLOGY ANALYZER	17,200.09	15,766.78	1,433.31
3755	8/20/2016	BIARIATRIC BLOOD DRAW CHAIR	874.95	791.61	83.34
3764	9/1/2016	DIGI PORT SERVER	775.00	775.00	-
3765	9/1/2016	HARVEST CLIENT LICENSE	3,000.00	3,000.00	-
3775	9/8/2016	CLINITEK - FRANKLIN WIC	2,050.00	1,854.78	195.22
3777	9/8/2016	HARVEST LICENSE - FRANKLIN WIC	3,000.00	3,000.00	-
3778	9/8/2016	HORIBA ABX INTERFACE - PRIMECARE	2,050.00	2,050.00	-
3780	9/8/2016	OLYMPUS CX31 MICROSCOPE - HEMATOLOGY BACKUP	2,350.00	2,126.23	223.77
3790	9/20/2016	CLINITEK STATUS PLUS - DR. WILLIAMS	1,583.48	1,413.81	169.67
3800	9/29/2016	BLOOD DRAW CHAIR	874.16	780.50	93.66
3807	10/1/2016	DIGI PORT SERVER - WILLIAMS	775.00	775.00	-
3808	10/1/2016	HARVEST CLIENT LICENSE - WILLIAMS	3,000.00	3,000.00	-
3809	10/1/2016	UNIDIRECTIONAL CLINITEK STATUS - CAVE CITY	2,050.00	1,830.38	219.62
3823	10/20/2016	FORMASPACE BASIC LAB CART - FCC DXH600	1,211.13	1,066.97	144.16
3851	11/15/2016	HARVEST CLIENT LICENSE	3,000.00	3,000.00	-
3852	11/15/2016	HARVEST CLIENT LICENSE	3,000.00	3,000.00	-
3853	11/15/2016	HARVEST CLIENT LICENSE	3,000.00	3,000.00	-
3854	11/15/2016	HARVEST CLIENT LICENSE	3,000.00	3,000.00	-
3876	1/1/2017	SIEMENS MICROSCAN INTERFACE	9,600.00	8,228.58	1,371.42
3939	3/15/2017	TABLE FOR IRICELL 1500	962.63	802.20	160.43
3946	4/1/2017	DXH 600 HEMATOLOGY SYSTEM - FRANKLIN	53,014.94	43,547.97	9,466.97
3951	4/17/2017	ANALYZER INTERFACE STAGO STA	1,695.43	1,372.52	322.91
3972	3/9/2017	STAGO COAGULATION ANALYZER	38,690.00	32,241.65	6,448.35
3973	3/24/2017	HOSHIZAKI REFRIGERATOR - FWIC	3,599.05	2,956.36	642.69
3974	4/27/2017	URISYS 1100 - OHP	1,166.44	944.29	222.15
3975	4/27/2017	URISYS 1100 - OHP	1,166.44	944.29	222.15
3976	4/27/2017	URISYS 1100 - OHP	1,166.43	944.24	222.19
3977	5/24/2017	PHLEBOTOMY PROCEDURE CART - OHP	1,387.62	1,106.80	280.82
3978	5/24/2017	PHLEBOTOMY PROCEDURE CART - OHP	1,387.62	1,106.80	280.82
3979	5/24/2017	PHLEBOTOMY PROCEDURE CART - OHP	1,387.62	1,106.80	280.82
3980	5/24/2017	PHLEBOTOMY PROCEDURE CART - OHP	1,387.62	1,106.80	280.82
4023	5/23/2017	HARVEST LICENSE - OHP LOUISVILLE RD	3,000.00	2,392.85	607.15
4024	5/23/2017	HARVEST LICENSE - OHP NASHVILLE RD	3,000.00	2,392.85	607.15
4025	5/23/2017	HARVEST LICENSE - OHP PEACHTREE	3,000.00	2,392.85	607.15
4026	5/23/2017	HARVEST LICENSE - OHP FRANKLIN	3,000.00	2,392.85	607.15
4027	5/23/2017	DIGI PORT SERVER - OHP LOUISVILLE RD	775.00	775.00	-
4028	5/23/2017	DIGI PORT SERVER - OHP NASHVILLE RD	775.00	775.00	-
4029	5/23/2017	DIGI PORT SERVER - OHP PEACHTREE	775.00	775.00	-
4030	5/23/2017	DIGI PORT SERVER - OHP FRANKLIN	775.00	775.00	-
4031	5/31/2017	ROCHE URISYS INTERFACE - OHP LOUISVILLE RD	3,050.00	2,432.78	617.22
4032	5/31/2017	ROCHE URISYS INTERFACE - OHP NASHVILLE RD	3,050.00	2,432.78	617.22
4033	5/31/2017	CLINITEK INTERFACE - PRIMECARE	3,050.00	2,432.78	617.22
4034	5/31/2017	ROCHE URISYS INTERFACE - OHP PEACHTREE	3,050.00	2,432.78	617.22
4035	7/18/2017	FORMASPACE TABLE - MICROSCAN	861.81	666.91	194.90
4100	8/30/2017	ORCHARD DIGI PORT ANALYZER INTERFACE	775.00	775.00	-
4211	1/25/2017	GWT 8000 SERIES AFU W/ 100L TANK FOR COBAS 8000	7,927.61	6,700.74	1,226.87
4215	6/1/2015	GWT 4000 SERIES AFU W/ 60L TANK (TRANSFERRED FROM MAIN)	7,440.68	7,440.68	-
4245	11/16/2017	HEMATEK 3000 AUTO STRAINER	10,429.80	7,574.03	2,855.77
4247	10/11/2017	ACCUSPIN CENTRIFUGE	3,576.42	2,597.19	979.23
4256	11/1/2017	(2) HARVEST CLIENT LICENSES - FRANKLIN	6,000.00	4,357.14	1,642.86
4257	11/1/2017	(3) DIGI SERVER - 4 PORT	2,325.00	1,688.39	636.61
4258	11/20/2017	(4) SOFIA ANALYZER INTERFACES - S'VILLE RD WIC	8,800.00	6,390.46	2,409.54
4270	11/28/2017	DXH 800 HEMATOLOGY ANALYZER - GLASGOW	51,391.22	36,708.00	14,683.22
4290	1/1/2018	ORCHARD INTERFACE TO ALLSCRIPTS	1,750.00	1,250.00	500.00
4300	1/1/2018	COULTER DXH 600 INTERFACE - FRANKLIN	4,600.00	3,285.70	1,314.30
4301	1/1/2018	ROCHE COBAS E411 INTERFACE - FRANKLIN	7,500.00	5,357.15	2,142.85
4302	1/1/2018	ROCHE COBAS INTEGRA 400 INTERFACE - FRANKLIN	7,500.00	5,357.15	2,142.85
4329	2/16/2018	INTERFACE - BECKMAN DXH 800 - GLASGOW	4,600.00	3,176.18	1,423.82
4330	1/4/2018	ROCHE COBAS INTEGRA 400 PLUS SYSTEM - FRANKLIN	55,650.00	39,750.00	15,900.00
4389	5/16/2018	BI-DIRECTIONAL ANALYZER INTERFACE (IRIS IRICELL 1500) - MAIN LAB	4,600.00	3,011.89	1,588.11
4390	5/31/2018	CLINITEK STATUS PLUS URINE ANALYZER (NEW) - MUNFORDVILLE	927.63	607.38	320.25
4392	5/11/2018	ORCHARD HARVEST CLIENT LICENSE - DR. ADAMS	3,000.00	2,000.00	1,000.00
4415	7/9/2018	STATSPIN 4 CENTRIFUGE	3,710.83	2,385.54	1,325.29
4417	6/18/2018	CLINITEK ANALYZER INTERFACE - ADAMS	3,050.00	1,960.75	1,089.25
4507	2/11/2019	CLASS II A2 BIOLOGICAL SAFETY CABINET (BAC-T HOOD)	9,790.79	5,478.20	4,312.59
4509	1/22/2019	ORCHARD ANALYZER INTERFACE	3,000.00	1,607.14	1,392.86
4534	3/26/2019	CLINITEK STATUS PLUS ANALYZER	1,516.75	776.44	740.31
4560	5/13/2019	ORCHARD SCRIPT CHANGE FOR MLP ORDERS	1,200.00	1,200.00	-
4570	3/22/2019	ORCHARD UNIDIRECTIONAL ANALYZER INTERFACE (EXCYTE M SED RATE)	3,050.00	1,633.96	1,416.04
4589	6/18/2019	ORCHARD CLINITEK STATUS ANALYZER INTERFACE	3,050.00	1,525.03	1,524.97
4590	6/18/2019	ORCHARD HORIBA ABX MICROS ANALYZER INTERFACE	1,525.00	762.51	762.49
4602	7/8/2019	COBAS 8100 AUTOVERIFICATION SOFTWARE	39,750.00	19,875.00	19,875.00
4611	2/18/2014	ROCHE COBAS 4000 SERIES C311 ANALYZER	-	-	-
4612	1/4/2018	ROCHE COBAS E411 ANALYZER (RACK)	-	-	-
4618	7/11/2019	STATSPIN EXPRESS 2 CENTRIFUGE	2,558.87	1,279.43	1,279.44

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
4624	7/31/2019	ROCHE INFINITY MIDDLEWARE INTERFACE FOR COBAS 8000	5,628.00	2,747.00	2,881.00
4625	7/23/2019	ORCHARD HARVEST LICENSE - LAB ASST. ADMIN.	3,000.00	1,464.28	1,535.72
4669	10/29/2015	LAB SERUM SPINNER	1,167.00	-	1,167.00
4694	1/2/2020	(2) ORCHARD ROCHE COBAS 8000 INTERFACES	5,628.00	2,412.00	3,216.00
4695	1/2/2020	ORCHARD ROCHE COBAS 8100 INTERFACE	18,619.00	7,979.58	10,639.42
4703	1/2/2020	ROCHE COBAS 8100 ALPHA CHEMISTRY ANALYZER	942,151.31	426,211.32	515,939.99
4706	7/8/2019	ROCHE COBAS C502/E801 #1	-	-	-
4707	8/28/2019	ROCHE COBAS C502/E801 #2	-	-	-
4730	6/30/2020	ORCHARD HL7 INTERFACE TO IKNOWMED - ONCOLOGY	7,150.00	2,553.59	4,596.41
4734	4/6/2020	PANTHERA U TRINOCULAR MICROSCOPE - URINE	2,086.31	819.63	1,266.68
4747	9/3/2020	HPLI M632H MFP	1,600.83	747.06	853.77
4758	3/23/2020	PLAN UC FLUORO 50X LENS FOR CX31 - HEMATOLOGY BACKUP	970.00	381.07	588.93
4770	1/1/2021	MEDONIC ANALYZER REPAIR	3,058.00	873.72	2,184.28
4787	2/10/2021	ORCHARD HARVEST CLIENT LICENSE	3,000.00	714.29	2,285.71
4815	8/23/2021	UPS SURGE PROTECTOR FOR CHEMISTRY MACHINE	3,411.40	649.79	2,761.61
4818	8/26/2021	(2) CEPHEID INFINITY 8-MODULE UPGRADES	85,353.80	16,257.87	69,095.93
4859	2/1/2022	BIORAD CFX 96 PCR MACHINE	55,000.00	7,202.38	47,797.62
4876	4/29/2022	ORCHARD ANALYZER INTERFACE - BIORAD CFX96	6,600.00	628.57	5,971.43
4920	9/15/2022	POWERVAR SECURITY II UNINTERRUPTIBLE POWER SUPPLY UPS FOR DXH 600 ANALYZER	2,534.90	120.71	2,414.19
4921	11/18/2022	ORCHARD ANALYZER INTERFACE - GENMARK EPLEX	8,500.00	101.19	8,398.81
3401	5/23/2016	BURDICK ELI 280 EKG	5,283.49	4,969.03	314.46
4393	6/19/2018	WELCH ALLYN CP150 EKG W/INTERPRETATION	2,833.75	1,821.69	1,012.06
135	4/1/1992	ROPER REFRIGERATOR	557.00	557.00	-
623	10/3/2001	3 - 46 SQUARE PLASTIC COATED TABLES	1,890.00	1,890.00	-
985	3/1/2005	2 SOFAS-LOUNGE	1,500.00	1,500.00	-
1794	3/22/2010	SAMSUNG 32 TV"	614.78	614.78	-
2113	4/30/2012	46 EXPANDED SQUARE PICNIC TABLE"	1,114.84	1,114.84	-
2685	9/1/2014	REFRIGERATOR - LOUNGE	762.24	762.24	-
2686	9/1/2014	REFRIGERATOR - LOUNGE	762.25	762.25	-
3026	9/1/2015	REFRIGERATOR	869.99	869.99	-
4732	8/5/2020	MANITOWOC ICE MACHINE MODEL #IYF-300A-161	2,550.00	880.37	1,669.63
147	10/20/1992	POWER TABLE-75SP	3,700.00	3,700.00	-
831	10/17/2002	SHELVING - STORAGE	2,740.00	2,740.00	-
1140	10/8/2006	REFRIGERATOR/FREEZER TEMPERATURE ALARM SYSTEM	1,747.95	1,747.95	-
1491	8/13/2008	BIKE RACK	630.50	630.50	-
2077	12/8/2011	GOLF CART	6,095.00	6,095.00	-
2601	5/7/2014	DELL LATITUDE	1,220.60	1,220.60	-
2688	9/4/2014	AUTOCAD LT 2015	1,173.10	1,173.10	-
3173	11/20/2015	STEEL ROLLING LADDER	906.12	906.12	-
276	4/1/1997	WHIRLPOOL REFRIGERATOR - LOUNGE	512.00	512.00	-
285	4/17/1997	2 DRAWER FIREKING FIREPROOF CABINET	590.75	590.75	-
604	7/23/2001	CREDIT CARD TERMINAL	1,050.00	1,050.00	-
707	5/20/2002	3 WHEEL CART W/ MAILBAGS	545.61	545.61	-
717	6/3/2002	OMNI 3200 CREDIT CARD MACHINE	1,050.00	1,050.00	-
719	6/3/2002	QM45A ICE MACHINE - SN 020150498	1,656.00	1,656.00	-
725	6/3/2002	WHEELCHAIR	643.68	643.68	-
727	6/10/2002	DESK	612.00	612.00	-
750	6/28/2002	WAITING ROOM CHAIRS	21,041.76	21,041.76	-
856	2/3/2003	DEFIBRILLATOR ZOLL - SN E97C03516	2,993.19	2,993.19	-
1018	6/20/2005	CABINET FOR CRASH CART	573.50	573.50	-
3832	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
3833	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
3834	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
3835	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
3836	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
3837	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
3840	10/28/2016	MIDMARK EXAM TABLE	1,133.38	1,133.38	142.06
749	6/24/2002	WIRE BASKET CART	634.00	634.00	-
879	8/1/2003	HOPPER SHREDDER	4,892.25	4,892.25	-
893	11/18/2003	DESK	734.00	734.00	-
894	11/18/2003	DESK	734.00	734.00	-
1821	8/26/2010	FUJITSU F16140 SCANNER	1,599.00	1,599.00	-
2675	8/22/2014	FUJITSU DOCUMENT SCANNER	1,532.22	1,532.22	-
3299	3/24/2016	FUGITSU 6670 SCANNER	4,301.34	4,301.34	-
4357	4/12/2018	HPLI M631 MFP - MEDICAL RECORDS	3,379.21	3,210.24	168.97
4673	5/20/2019	FUJITSU FI-7180 SCANNER	1,597.68	1,145.02	452.66
4674	5/20/2019	FUJITSU FI-7180 SCANNER	1,597.69	1,145.02	452.67
3267	3/1/2016	TIME CLOCK - 18 FCC	1,183.50	1,183.50	-
3356	5/23/2016	1 3 SEAT GUEST CHAIR - OVERFLO	1,632.82	1,590.05	42.77
3357	5/23/2016	1 TWO SEAT GUEST CHAIRS - WAIT	1,771.32	1,724.95	46.37
3358	5/23/2016	10 CHAIRS - MAIN LOBBY	16,618.40	16,183.17	435.23
3359	5/23/2016	15 CAFE CHAIRS - MAIN LOBBY	11,695.54	11,389.22	306.32
3360	5/23/2016	2 - AUSSIE OVAL COFFEE TABLES	2,175.34	2,118.35	56.99
3361	5/23/2016	2 BENCHES - DRESSING	1,978.40	1,926.59	51.81
3362	5/23/2016	2 2 SEAT GUEST CHAIRS - OVERFLO	2,129.56	2,073.77	55.79
3363	5/23/2016	2 BARIATRIC GUEST CHAIRS - WAI	1,557.53	1,516.77	40.76
3364	5/23/2016	2 LOW BACK LOVESEATS - SUB WAI	4,126.45	4,018.36	108.09
3365	5/23/2016	2 RENEGADE DESKS	1,533.11	1,492.98	40.13
3366	5/23/2016	2 RENEGADE DESKS	1,533.11	1,492.98	40.13
3367	5/23/2016	2 RENEGADE DESKS	1,533.11	1,492.98	40.13
3368	5/23/2016	2 THREE SEAT GUEST CHAIRS - WAI	3,195.61	3,111.94	83.67
3369	5/23/2016	2 THREE SEAT GUEST CHAIRS - WA	3,204.07	3,120.19	83.88
3370	5/23/2016	2 THREE SEAT GUEST CHAIRS - WA	3,524.74	3,432.46	92.28
3371	5/23/2016	2 THREE SEAT GUEST CHAIRS - WA	3,138.06	3,055.91	82.15
3372	5/23/2016	2 TWO SEAT GUEST CHAIRS - WAIT	2,508.98	2,443.30	65.68
3373	5/23/2016	3 - L-SHAPED DESKS	3,200.94	3,117.12	83.82
3374	5/23/2016	3 RETROSPECT BENCH - CORRIDOR	3,534.38	3,441.81	92.57
3375	5/23/2016	3 TWO SEAT GUEST CHAIRS - WAIT	3,704.51	3,607.51	97.00
3376	5/23/2016	3 TWO SEAT GUEST CHAIRS - WAIT	3,078.50	2,997.90	80.60
3377	5/23/2016	4 - 5 DRAWER LATERAL FILE CABI	3,471.00	3,380.11	90.89
3378	5/23/2016	4 BARIATRIC GUEST CHAIRS - WAI	3,542.64	3,449.85	92.79
3382	5/23/2016	4 RENEGADE DESKS	3,066.23	2,985.91	80.32
3383	5/23/2016	4 TWO SEAT GUEST CHAIRS - WAIT	4,618.56	4,497.63	120.93
3384	5/23/2016	4- TWO SEAT LOVESEAT - MAIN LO	7,435.97	7,241.21	194.76
3387	5/23/2016	5 2 SEAT GUEST CHAIRS - OVERFL	5,262.08	5,124.29	137.79
3388	5/23/2016	5 BARIATRIC GUEST CHAIRS - WAI	4,960.35	4,830.43	129.92
3389	5/23/2016	5 THREE SEAT GUEST CHAIRS - WA	8,590.78	8,365.82	224.96
3390	5/23/2016	6 LOW BACK ARM CHAIRS - SUB WA	9,155.41	8,915.65	239.76
3391	5/23/2016	8 2 SEAT GUEST CHAIR - WAITING	10,457.10	10,183.21	273.89
3392	5/23/2016	8 SORENSEN WING CHAIRS - MAIN	13,042.73	12,701.15	341.58
3393	5/23/2016	8 VENTURE CLUB CHAIRS - SUB WA	11,475.82	11,175.24	300.58
3394	5/23/2016	8 BARIATRIC GUEST CHAIR - WAITIN	790.21	769.53	20.68
3395	5/23/2016	8 BARIATRIC GUEST CHAIR - WAITIN	848.45	826.25	22.20
3396	5/23/2016	8 BARIATRIC GUEST CHAIR - WAITIN	819.72	798.23	21.49
3399	5/23/2016	CRASH CART	1,590.85	1,496.19	94.66
3409	5/23/2016	HOSHIZAKI ICE MACHINE - FCC KITCHENETTE	2,400.02	2,338.37	61.65
3410	5/23/2016	MANITOWOC ICE MACHINE W/DISPENSER - FCC BREAKROOM	6,648.50	6,258.08	390.42

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
3416	5/23/2016	LECTERN WITH FLAT TOP - VESTI	3,041.77	2,962.11	79.66
3417	5/23/2016	L-SHAPED RENEGADE DESK - FIN C	1,066.98	1,039.06	27.92
3422	5/23/2016	ORI - CHILDREN'S MAGNETIC SAND	1,016.50	989.91	26.59
3423	5/23/2016	PROCEDURE LIGHT	2,102.93	1,977.77	125.16
3424	5/23/2016	PROCEDURE LIGHT	2,102.92	1,977.76	125.16
3425	5/23/2016	RENEGADE DESK - MATERIALS MANA	766.56	746.49	20.07
3426	5/23/2016	ROUND TABLE - PLAY AREA	919.45	895.37	24.08
3427	5/23/2016	SAMSUNG TV	847.98	825.77	22.21
3428	5/23/2016	TEMPERATURE GUARD FOR REFRIGERATOR	1,269.97	1,236.74	33.23
3429	5/23/2016	TWO SEAT GUEST CHAIRS - WAITIN	1,151.61	1,121.47	30.14
3433	5/23/2016	VENDING MACHINE	2,317.00	2,256.32	60.68
3434	5/23/2016	VISUAL BOARD - TRAINING	800.48	779.55	20.93
3439	5/28/2016	24 MIDMARK EXAM TABLES	34,257.06	32,217.98	2,039.08
3441	5/28/2016	AED PLUS	1,980.84	1,862.95	117.89
3446	5/28/2016	CUSTOM CONFERENCE ROOM TABLE	3,455.00	3,364.50	90.50
3447	5/28/2016	EPSON LCD PROJECTOR	3,905.24	3,905.24	-
3457	5/28/2016	LIQUID NITROGEN TANK	1,721.85	1,619.37	102.48
3458	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	809.70	761.51	48.19
3459	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3460	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3461	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3462	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3463	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3464	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3465	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3466	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3467	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3468	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3469	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3470	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3471	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3472	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	808.85	760.72	48.13
3473	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	809.70	761.51	48.19
3474	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	857.54	806.52	51.02
3475	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	857.53	806.52	51.01
3476	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	857.53	806.52	51.01
3477	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	857.53	806.52	51.01
3478	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	857.53	806.52	51.01
3479	5/28/2016	MACROVIEW DIAGNOSTIC WALL UNIT	857.53	806.52	51.01
3481	5/28/2016	PEDIATRIC EXAM TABLE WITH SCALES	2,148.13	2,020.29	127.84
3483	5/28/2016	PLUM A+ INFUSION PUMP	2,209.06	2,077.57	131.49
3506	6/7/2016	REFURBISHED AUTOCLAVE - FAMILY MEDICINE	1,696.00	1,595.08	100.92
3550	7/21/2016	HYFREATOR 2000	842.50	772.32	70.18
4293	1/1/2018	(2) MACROVIEW DIAGNOSTIC SYSTEM	1,619.45	1,156.75	462.70
4337	3/8/2018	LAB / X-RAY REGISTRATION PAGING SYSTEM	3,215.60	3,108.41	107.19
4418	8/15/2018	CLINTON POWER EXAM TABLE - FCC FAM MED	1,774.38	1,119.54	654.84
240	9/4/1996	2 EXAM TABLES	1,875.00	1,875.00	-
849	12/20/2002	SANDGRAY EXAM TABLE	787.16	787.16	-
850	12/20/2002	SANDGRAY EXAM TABLE	787.16	787.16	-
2465	1/1/2014	LATITUDE 14 5000 SERIES	1,244.09	1,244.09	-
2680	8/25/2014	LEXMARK MX511DE MFP - DR. CHOU	790.81	790.81	-
2940	6/12/2015	RITTER 204 EXAM TABLE	1,256.38	1,256.38	-
2941	6/12/2015	RITTER 204 EXAM TABLE	1,256.37	1,256.37	-
2955	6/30/2015	LEXMARK MX511DE MFP - SINGH	825.48	825.48	-
2984	7/27/2015	LEFT HAND FACING BOOKCASE	848.53	848.53	-
2985	7/27/2015	RIGHT HAND FACING BOOKCASE	848.53	848.53	-
3249	2/15/2016	HPLI M527 MFP - DR. ZHU	2,030.67	2,030.67	-
3905	1/12/2017	HPLI M527 MFP W/TRAYS - IGBOKWE	1,731.07	1,731.07	-
3505	6/7/2016	NATUS NICOLET EEG SYSTEM	22,870.68	21,509.33	1,361.35
4780	4/7/2021	NATUS ULTRAPRO S100 EMG SYSTEM	17,823.70	4,455.92	13,367.78
765	9/13/2002	LEAD LINED WASTE CONTAINER	634.50	634.50	-
1073	2/15/2006	MICRO FUSER RAPID RATE INFUSER	795.00	795.00	-
1194	3/1/2007	GE MILLENNIUM MG DUAL HEAD NUCLEAR CAMERA	261,230.27	261,230.27	-
1248	6/4/2007	ATOMBLA 930 THYROID UPTAKE SYSTEM	12,362.09	12,362.09	-
1406	2/15/2008	PHANTOM SPECT FLANGELESS ACR	2,192.72	2,192.72	-
1629	5/15/2009	ULTRASPECT XPRESS 3 CARDIAC	30,750.00	30,750.00	-
2739	9/30/2014	SURVEY METER	1,234.06	1,234.06	-
4763	11/14/2020	PERFLEXION FLOOD SOURCE	2,543.75	787.35	1,756.40
294	7/29/1997	KURTZ AUCTIONEERS USED CHAIRS WAITING AREA	1,727.80	1,727.80	-
924	4/7/2004	ELECTROSURGICAL GENERATOR QUANTUM 2000 - SN W	3,836.53	3,836.53	-
1081	3/22/2006	FETAL DOPPLER (MIEJ300 IMEX POCKET)	672.65	672.65	-
1107	6/14/2006	ELECTRIC BED WITH MATTRESS	1,740.00	1,740.00	-
1112	6/27/2006	FETAL MONITOR	4,700.00	4,700.00	-
1117	7/28/2006	IMEX ELITE FETAL DOPPLER	620.09	620.09	-
1254	6/20/2007	MIDMARK EXAM TABLE	941.13	941.13	-
1255	6/20/2007	MIDMARK EXAM TABLE	941.13	941.13	-
1279	7/31/2007	SPOT VITAL SIGNS MONITOR WITH STAND	1,637.18	1,637.18	-
1291	8/16/2007	COLPOSCOPE QUANTUM 906043-SP	5,957.71	5,957.71	-
1292	8/16/2007	ELITE 2 OBSTETRIC PROBE	578.46	578.46	-
1295	8/16/2007	MIDMARK 623 POWER EXAM TABLE	5,179.51	5,179.51	-
1297	8/16/2007	POCKET DOPPLER III	671.99	671.99	-
1298	8/16/2007	POCKET DOPPLER III	671.99	671.99	-
1316	9/11/2007	REUPHOLSTER CHAIRS	2,486.84	2,486.84	-
1334	11/1/2007	EXAM LIGHT III WITH FIBER OPTIC	597.28	597.28	-
1352	11/19/2007	ARTICULATING KNEE CRUTCHES 9A411003 FOR TABLE	862.02	862.02	-
1354	11/19/2007	EXAM LIGHT III WITH FIBER OPTIC	935.63	935.63	-
1358	11/19/2007	MONITOR SPOT VITAL SIGNS NIBP WITH STAND - SN	1,396.10	1,396.10	-
1468	6/17/2008	60 LAPTOP DESK	1,188.00	1,188.00	-
1469	6/17/2008	FIBER OPTIC EXAM LIGHT III	612.00	612.00	-
1470	6/17/2008	FIBER OPTIC EXAM LIGHT III	612.00	612.00	-
1536	12/15/2008	OLYMPUS HYSTEROSCOPY EQUIP ERP401 7741916	12,600.00	12,600.00	-
1613	4/29/2009	EXAM TABLE	1,365.80	1,365.80	-
1614	4/29/2009	EXAM TABLE	1,365.80	1,365.80	-
1622	5/5/2009	ULTRACLAVE STERILIZER M11 - SN V731987	4,067.73	4,067.73	-
1670	7/20/2009	EXAM TABLE	1,363.56	1,363.56	-
1671	7/20/2009	EXAM TABLE	1,363.56	1,363.56	-
1673	7/23/2009	EXAM LIGHT	655.58	655.58	-
1717	8/14/2009	HYDRO THERMABLATROR SYSTEM	4,300.00	4,300.00	-
1815	8/13/2010	EXAM LIGHT-DR. STICE	765.00	765.00	-
1816	8/13/2010	EXAM LIGHT-DR. STICE	765.00	765.00	-
1817	8/13/2010	EXAM LIGHT-DR. STICE	1,071.04	1,071.04	-
1818	8/13/2010	EXAM LIGHT-DR. STICE	1,071.04	1,071.04	-
1871	9/30/2010	OB SOFTWARE IMPLEMENTATION	926.25	926.25	-
1943	10/15/2010	TWIN ADJUSTABLE BED&MATTRESS	1,949.00	1,949.00	-
2013	3/18/2011	REPAIR TELESCOPE A4674A	1,675.00	1,675.00	-
2032	6/15/2011	OLYMPUS 30 DEGREE TELESCOPE	5,314.58	5,314.58	-
2034	6/22/2011	HYSTEROSCOPE 30 DEGREE TELESCOPE	6,694.13	6,694.13	-

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2114	4/30/2012	GOMCO UTERINE ASPIRATOR W/ 600ML BTL	3,581.53	3,581.53	-
2147	8/21/2012	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2169	10/10/2012	WELCH ALLYN WALL EXAM LIGHT LED	794.25	794.25	-
2171	10/16/2012	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2299	6/15/2013	7 TREATMENT PROBES	1,000.00	1,000.00	-
2300	6/15/2013	HOLOGIC HYSTEROSCOPE SYSTEM	3,000.00	3,000.00	-
2301	6/15/2013	LEISEGANG MODEL 1D3 COLPOSCOPE	2,000.00	2,000.00	-
2302	6/15/2013	RITTER PROCEDURE CHAIR	1,500.00	1,500.00	-
2303	6/15/2013	WALLACH NITROUS CRYOTHERAPY W/ 3 PROBES	1,100.00	1,100.00	-
2340	6/25/2013	LEXMARK MX511DE MFP - YURCHISIN / DOBSON	1,396.39	1,396.39	-
2341	6/25/2013	LEXMARK MX511DE MFP - GRANESE	1,396.39	1,396.39	-
2347	6/26/2013	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2362	7/16/2013	MIDMARK EXAM LIGHT LED 253 W/ CASTER	960.84	960.84	-
2381	8/13/2013	DELL LATITUDE LAPTOP - DR. DREXEL	1,131.52	1,131.52	-
2382	8/13/2013	DELL LATITUDE LAPTOP - DR. MANGOLD	1,131.52	1,131.52	-
2385	8/13/2013	DELL LATITUDE LAPTOP - K. BARGER	1,131.52	1,131.52	-
2387	8/15/2013	LEXMARK MX511DE MFP - STICE / MANGOLD	1,222.55	1,222.55	-
2648	7/24/2014	HYSTEROSCOPE REPAIR	1,865.50	1,865.50	-
3157	11/13/2015	HPLI M630H MFP - GASS/BROOKS	1,807.61	1,807.61	-
3354	5/17/2016	ENDOSCOPE HYSTEROSCOPE - MAIN	1,612.27	1,516.34	95.93
3748	8/15/2016	CYSTO SHEATH	1,166.00	1,068.83	97.17
3825	10/24/2016	30 DEGREE TELESCOPE	5,982.24	5,270.11	712.13
3826	10/24/2016	HYSTEROSCOPY SHEATH	1,768.72	1,558.19	210.53
3827	10/24/2016	LIGHT GUIDE CABLE	864.45	761.52	102.93
3937	3/10/2017	CYSTOURETHROSCOPE SHEATH	1,315.91	1,096.61	219.30
3948	4/3/2017	CYSTOSCOPE REPAIR	1,775.50	1,458.43	317.07
3997	5/13/2017	HYSTEROSCOPE W/ SHEATH	2,093.50	1,694.73	398.77
4294	1/1/2018	EXAM LIGHT	1,529.69	1,092.64	437.05
4656	10/29/2015	RITTER 204 EXAM TABLE - DR. SAMIMI	900.00	900.00	-
4663	10/1/2014	HYSTEROSCOPE W/ MONITOR	21,334.51	21,334.51	-
4664	10/29/2015	COLPOSCOPE - LUMEN	3,233.40	3,233.40	-
4665	10/29/2015	HYSTEROSCOPE	14,279.47	14,279.47	-
4666	10/29/2015	NOVASURE GENERATOR	14,400.00	14,400.00	-
4667	7/10/2017	RITTER 253 EXAM LIGHT	877.35	689.37	187.98
4710	1/10/2020	CYSTOSCOPE REPAIR(PRODUCT #A4674A)	1,616.50	692.79	923.71
4711	1/14/2020	CYSTOSCOPE REPAIR(PRODUCT #A22005A)	2,093.50	897.21	1,196.29
4729	1/15/2015	ACCUSCOPE 3012 LED MICROSCOPE	1,520.00	1,520.00	-
4739	8/11/2020	REFURBISH HYSTEROSCOPE MODEL A4674A	1,967.36	679.21	1,288.15
4752	9/16/2020	REFURBISH HYSTEROSCOPE SHEATH (MODEL #A4772)	1,586.13	509.83	1,076.30
4868	3/4/2022	LED LIGHT SOURCE W/POWER CABLE	1,705.53	203.04	1,502.49
4873	4/19/2022	CYSTOSCOPE SHEATH 17 FR	1,123.34	106.99	1,016.35
4844	9/1/2021	LABORIE PORTASCAN 3D BLADDER SCANNER	-	-	-
2429	1/1/2014	882TE	800.00	800.00	-
2433	1/1/2014	BLOOD DRAWING CHAIR	764.25	764.25	-
2437	1/1/2014	COLPOSCOPE CM-100	1,800.00	1,800.00	-
2440	1/1/2014	CRYO MACHINE LL-100	1,100.00	1,100.00	-
2477	1/1/2014	MIDMARK EXAM TABLE	800.00	800.00	-
2484	1/1/2014	RITTER 75 EXAM TABLE	2,700.00	2,700.00	-
2485	1/1/2014	RITTER 75 EXAM TABLE	2,700.00	2,700.00	-
2493	1/1/2014	THERMACHOICE III	3,350.00	3,350.00	-
2502	1/1/2014	VALIDATOR PLUS AUTOCLAVE	1,300.00	1,300.00	-
4493	1/1/2019	ACTS 3012 BINOCULAR MICROSCOPE	1,750.00	1,000.00	750.00
2841	3/31/2015	M11 AUTOCLAVE	4,004.25	4,004.25	-
4578	5/15/2019	AUTOCLAVE REPAIR	1,454.94	762.12	692.82
906	2/2/2004	GE SINGLE FETAL MONITOR MODEL 171 SINGLE CHANNE	4,550.00	4,550.00	-
3542	7/11/2016	MONALISA TOUCH LASER SYSTEM	120,750.00	112,125.00	8,625.00
3771	9/2/2016	RIVERIA LOUNGE CHAIR	1,730.13	1,598.30	131.83
3772	9/2/2016	RIVERIA LOUNGE CHAIR	1,730.13	1,598.30	131.83
4041	6/28/2017	COLLAGEN P.I.N. HANDPIECE	1,407.50	1,105.89	301.61
3784	9/8/2016	ULTRASOUND TRANSDUCER	6,890.00	6,233.84	656.16
4340	2/28/2018	CLINTON POWER EXAM TABLE	2,174.97	1,501.77	673.20
4464	1/1/2015	3D ULTRASOUND TRANSDUCER	8,250.00	8,250.00	-
4822	10/15/2021	PHILIPS EPIQ SW OB/GYN ULTRASOUND	30,740.00	7,685.00	23,055.00
4823	10/15/2021	PHILIPS EPIQ SW OB/GYN ULTRASOUND	23,320.00	5,830.00	17,490.00
4841	8/25/2021	PHILIPS LUMIFY PORTABLE ULTRASOUND	5,782.30	1,101.39	4,680.91
4842	8/25/2021	PHILIPS LUMIFY PORTABLE ULTRASOUND	5,782.30	1,101.39	4,680.91
4857	1/26/2022	PHILIPS EPIC ELITE ULTRASOUND SYSTEM	77,777.50	10,185.15	67,592.35
4865	3/3/2022	CLINTON POWER TABLE WITH STIRRUPS	2,521.45	300.17	2,221.28
4828	10/29/2021	LABORIE AQUARIUS LT URODYNAMIC SYSTEM	38,716.76	6,452.81	32,263.95
2295	5/31/2013	FUJITSU LIFEBOOK - YURCHISIN	1,779.29	1,779.29	-
3749	8/15/2016	ENDOSCOPE HYSTEROSCOPE - YURCHISIN	1,612.27	1,477.95	134.32
3919	2/10/2017	VALVEKLAVE STEAM AUTOCLAVE	2,080.25	1,758.31	321.94
4069	5/6/2017	HPLI M630 MFP - OHP REGISTRATION	2,200.96	2,200.96	-
4189	6/1/2017	TIGER DIRECT - COMPUTER EQUIPMENT FOR AUDIO EQUIPMENT	10,573.02	10,573.02	-
4190	6/1/2017	1 CANVAS PAINTING	1,457.50	1,162.56	294.94
4192	6/1/2017 (2)	REFRIG/MICROWAVE/BEV CENTER	1,535.15	1,224.48	310.67
4195	6/1/2017	MISCELLANEOUS MEDICAL EQUIPMENT	13,532.68	10,793.92	2,738.76
4201	6/1/2017	BAT MACHINE	2,151.60	1,716.15	435.45
4202	6/1/2017	PHILLIPS HEADSTART AED/ELECTRODE PADS	1,382.51	1,102.71	279.80
4203	6/1/2017	HEARING EQUIPMENT AND BOOTH	14,597.33	11,643.10	2,954.23
4795	4/14/2021	EASYONE AIR SPIROMETER	2,444.65	582.06	1,862.59
4000	6/1/2017	TIME CLOCK - 22 OHP LOUISVILLE RD	1,150.79	1,150.79	-
4066	8/2/2017	EASYONE PLUS SPIROMETER	1,791.00	1,385.91	405.09
4067	8/15/2017	TITMUS V4 VISION SCREENER	3,234.19	2,502.66	731.53
4068	5/6/2017	HPLI M630 MFP - OHP REGISTRATION	2,200.96	2,200.96	-
4145	6/1/2017	OFFICE MAX	3,043.27	3,043.27	-
4146	6/1/2017	DELL SERVER / SPLIT 3 WAYS	1,443.20	1,443.20	-
4147	6/1/2017	NEW BAT MACHINE	1,191.92	950.73	241.19
4148	6/1/2017	PHILLIPS HEARTSTART AED (2)	1,749.00	1,395.05	353.95
4149	6/1/2017	CARTS - 1 FOR NS	1,806.62	1,441.00	365.62
4152	6/1/2017	DIAG SYS/SHARPS COLLECTOR	947.63	755.87	191.76
4153	6/1/2017	DIAG SYS	903.55	720.70	182.85
4154	6/1/2017	RECONDITIONED HEARING BOOTH FOR NORTH CLINIC	4,275.51	3,410.24	865.27
4670	10/29/2015	WELCH ALLYN PROPAQ CS VITALS MACHINE	2,800.00	2,800.00	-
4743	7/24/2020	DELPHI THERMAL DETECTOR SYSTEM	1,478.70	510.50	968.20
4006	6/1/2017	TIME CLOCK - 24 OHP NASHVILLE RD	1,150.79	1,150.79	-
4071	5/6/2017	HPLI M630 MFP - OHP REGISTRATION	2,200.96	2,200.96	-
4101	8/21/2017	DYNAMOMETER REPAIR	6,466.76	4,927.04	1,539.72
4160	6/1/2017	OFFICEMAX-SCANNER (2)	1,514.09	1,514.09	-
4161	6/1/2017	DELL SERVER / SPLIT 3 WAYS	1,443.20	1,443.20	-
4164	6/1/2017	2 BAS 200 SLM BIO ACOUSTIC SIMULATORS	1,430.15	1,140.73	289.42
4165	6/1/2017	TREADMILL FOR PCP TESTING	857.75	684.18	173.57
4167	6/1/2017	HEARING BOOTH - ACOUSTIC SYSTEMS RE-120	1,546.01	1,233.14	312.87
4169	6/1/2017	CARTS - 2 FOR SS	3,667.56	2,925.33	742.23
4170	6/1/2017	BAT MACHINE/GAS CALIBRATION CYLINDER	1,467.53	1,170.55	296.98
4171	6/1/2017 (4)	OTOSCOPES FOR SS NEW EXAM ROOMS	3,109.19	2,479.95	629.24
4175	6/1/2017	NEW HEARING BOOTH FOR TRAILER	6,102.42	4,867.44	1,234.98

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4176	6/1/2017	AUDIOMETER RECONDITIONED	3,476.57	2,772.97	703.60
4255	11/16/2017	SIERRA SUMMITT 2-CHANNEL EMG SYSTEM	12,691.38	9,216.40	3,474.98
4341	2/12/2018	CHATTILION DFX FORCE GAUGE KIT	1,060.88	745.17	315.71
4568	5/22/2019	EASYONE AIR SPIROMETER	1,609.02	823.67	785.35
4870	3/22/2022	INTOXILYZER 400PA EVIDENTIAL BREATH ANALYZER TESTER (BAT) FOR OHP ONSITE USE	2,531.60	271.24	2,260.36
4004	6/1/2017	TIME CLOCK - 23 OHP PEACHTREE	1,150.79	1,150.79	-
4070	5/6/2017	HPLI M630 MFP - OHP REGISTRATION	2,200.96	2,200.96	-
4180	6/1/2017	DELL SERVER / SPLIT 3 WAYS	1,443.20	1,443.20	-
4181	6/1/2017	AMAZON - BEVERAGE EQUIPMENT ETC	1,874.90	1,495.44	379.46
4182	6/1/2017	PERDUE AUDIO	2,717.32	2,167.39	549.93
4185	6/1/2017	PHILLIPS HEADSTART AED	1,382.31	1,102.54	279.77
4187	6/1/2017	SPIROMETRY/VISION SCREENER/(6)DIAG SYS	9,391.58	7,490.93	1,900.65
4188	6/1/2017	BAT MACHINE	1,916.91	1,528.99	387.92
149	11/12/1992	DRAWER LATERAL	675.00	675.00	-
424	6/16/1999	DESK	1,052.05	1,052.05	-
1331	10/29/2007	CRANBERRY INFUSION RECLINER WITH TRAY	1,040.00	1,040.00	-
1332	10/29/2007	CRANBERRY INFUSION RECLINER WITH TRAY	1,040.00	1,040.00	-
1340	11/1/2007	PEBBLE GRAY MIDMARK EXAM TABLE	1,242.69	1,242.69	-
1341	11/1/2007	PEBBLE GRAY MIDMARK EXAM TABLE	1,242.70	1,242.70	-
1344	11/1/2007	WALL MOUNTED OTOSCOPE	759.02	759.02	-
1345	11/1/2007	WALL MOUNTED OTOSCOPE	759.02	759.02	-
1359	11/19/2007	INFUSION RECLINER WITH 2 TRAYS	1,040.00	1,040.00	-
1548	1/8/2009	INFUSION RECLINER 59 SERIES CHAMPION BONNIE BLUE 10191	1,228.10	1,228.10	-
1549	1/8/2009	INFUSION RECLINER 59 SERIES CHAMPION BONNIE BLUE 10191	1,228.09	1,228.09	-
1550	1/8/2009	INFUSION RECLINER 59 SERIES CHAMPION BONNIE BLUE 10191	1,228.09	1,228.09	-
1551	1/8/2009	INFUSION RECLINER 59 SERIES CHAMPION BONNIE BLUE 10191	1,228.09	1,228.09	-
1552	1/8/2009	INFUSION RECLINER 59 SERIES CHAMPION BONNIE BLUE 10191	1,228.09	1,228.09	-
1562	1/29/2009	LCD TV/DVD COMBO & MOUNT	593.58	593.58	-
1788	2/25/2010	EXECUTIVE CHAIR	544.10	544.10	-
1798	4/26/2010	CRANBERRY INFUSION RECLINER	1,381.23	1,381.23	-
2184	11/28/2012	DIGITAL SCALE	842.49	842.49	-
2234	3/27/2013	FUJITSU LIFEBOOK	1,985.26	1,985.26	-
2451	1/1/2014	FUJITSU LIFEBOOK	2,181.09	2,181.09	-
2697	9/10/2014	IV PUMP PLUM A+	1,507.09	1,507.09	-
2698	9/10/2014	IV PUMP PLUM A+	1,507.09	1,507.09	-
2699	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2701	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2707	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2708	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2709	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2710	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2711	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2712	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2713	9/10/2014	IV PUMP PLUM A+	1,507.09	1,507.09	-
2714	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2715	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2725	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
3513	6/21/2016	54 SERIES INFUSION RECLINER WITH IV POLE	1,558.51	1,447.22	111.29
3514	6/21/2016	54 SERIES INFUSION RECLINER WITH IV POLE	1,558.50	1,447.16	111.34
3515	6/21/2016	54 SERIES INFUSION RECLINER WITH IV POLE	1,558.50	1,447.16	111.34
3516	6/21/2016	54 SERIES INFUSION RECLINER WITH IV POLE	1,558.65	1,447.35	111.30
3517	6/21/2016	54 SERIES INFUSION RECLINER WITH IV POLE	1,558.17	1,446.91	111.26
4043	7/27/2017	ACCUCOLD 24 IN. REFRIGERATOR - ONCOLOGY	1,269.00	981.99	287.01
4044	7/27/2017	ACCUCOLD 24 IN. REFRIGERATOR - ONCOLOGY	1,269.00	981.99	287.01
4073	7/13/2017	2011 AED DEFIBRILLATOR	1,596.78	1,254.61	342.17
4074	7/31/2017	HPLI M630 MFP - ONCOLOGY	2,200.96	2,200.96	-
4075	7/25/2017	PLUM 360 INFUSION PUMP - GLASGOW	1,916.57	1,483.08	433.49
4076	7/25/2017	PLUM 360 INFUSION PUMP - GLASGOW	1,916.57	1,483.08	433.49
4077	7/25/2017	PLUM 360 INFUSION PUMP - GLASGOW	1,916.56	1,483.08	433.48
4078	7/25/2017	PLUM 360 INFUSION PUMP - GLASGOW	1,916.56	1,483.08	433.48
4079	7/25/2017	PLUM 360 INFUSION PUMP - GLASGOW	1,916.56	1,483.08	433.48
4080	7/25/2017	PLUM 360 INFUSION PUMP - GLASGOW	1,916.56	1,483.08	433.48
4104	8/17/2017	MIDMARK EXAM TABLE	1,316.58	1,003.10	313.48
4105	8/17/2017	MIDMARK EXAM TABLE	1,316.58	1,003.10	313.48
4106	8/17/2017	MIDMARK EXAM TABLE	1,316.57	1,003.09	313.48
4107	8/17/2017	54 SERIES INFUSION RECLINER	1,461.03	1,113.17	347.86
4108	8/17/2017	54 SERIES INFUSION RECLINER	1,461.03	1,113.17	347.86
4109	8/17/2017	54 SERIES INFUSION RECLINER	1,461.03	1,113.17	347.86
4119	9/18/2017	LAMINAR HORIZONTAL WORKSTATION - GLASGOW	3,940.02	2,955.02	985.00
4120	9/18/2017	B2 BIOLOGICAL SAFETY CABINET - GLASGOW	12,040.16	9,030.11	3,010.05
4295	1/1/2018	DIGITAL SCALE WITH STADIOMETER BMI	906.16	647.25	258.91
4320	1/22/2018	DIGITAL SCALES - ONCOLOGY	906.03	636.37	269.66
4362	3/21/2018	INFUSION RECLINER - GLASGOW ONCOLOGY	1,481.03	1,005.00	476.03
4363	3/21/2018	INFUSION RECLINER - GLASGOW ONCOLOGY	1,481.03	1,005.00	476.03
4370	3/23/2018	HPLI M631 MFP - ONCOLOGY	1,385.19	1,315.94	69.25
4388	1/10/2018	INSTALLATION OF ONCOLOGY HOOD	13,296.71	9,497.65	3,799.06
4469	11/5/2018	PRIMECARE BED MODEL P703	1,287.30	766.25	521.05
4619	8/8/2019	PLUM 360 IV INFUSION PUMP	1,908.00	931.28	976.72
4620	8/8/2019	PLUM 360 IV INFUSION PUMP - GLASGOW	1,908.00	931.28	976.72
4862	2/7/2022	HP LASERJET M610DN PRINTER - DR. SESHADRI STAFF	1,027.17	188.32	838.85
4346	3/7/2018	SUMMIT MEDICAL GRADE FRIDGE 5.5 CF W/THERMOSTAT	1,219.00	812.66	406.34
191	8/31/1994	INDIRECT SCOPE & CASE - J WENTWORTH	1,570.45	1,570.45	-
198	10/17/1994	2 KEELER ALL PUPIL BINOCULARS-WWTT	1,790.00	1,790.00	-
199	10/17/1994	MARCO V SLIT LAMP - J WENTWORTH	4,495.00	4,495.00	-
200	10/17/1994	REICHART PHOROPTER W/CYLINDER-JW	3,895.00	3,895.00	-
201	10/17/1994	RELIANCE 7720NC STAND-J WENTWORTH	3,490.00	3,490.00	-
202	10/17/1994	RELIANCE EXAM CHAIR-J WENTWORTH	3,900.00	3,900.00	-
251	11/1/1996	2 ZEISS SLIT LAMP MODEL SL 120	14,106.00	14,106.00	-
252	11/1/1996	MODEL 599 HARK REFRACTOR/KERATOMETER	13,450.00	13,450.00	-
253	11/11/1996	2 REICHERT PHOROPTOR	8,189.00	8,189.00	-
258	12/5/1996	HEINE OMEGA OPHTHALMOSCOPE	1,457.20	1,457.20	-
1432	5/13/2008	ACCUTOME STIMULI CVT PLUS - SN D40551	2,655.00	2,655.00	-
1433	5/13/2008	ACCUTOME STIMULI CVT PLUS - SN D40648	2,655.00	2,655.00	-
1434	5/13/2008	ACCUTOME STIMULI CVT PLUS - SN D40650	2,655.00	2,655.00	-
1435	5/13/2008	ACCUTOME STIMULI CVT PLUS - SN D40654	2,655.00	2,655.00	-
1436	5/13/2008	ACCUTOME STIMULI CVT PLUS - SN D40793	2,655.00	2,655.00	-
1437	5/13/2008	ACCUTOME STIMULI CVT PLUS - SN D40797	2,655.00	2,655.00	-
1620	5/5/2009	BURTON CEILING COOLSPOT II LIGHT	2,127.50	2,127.50	-
1696	8/4/2009	INDIRECT KEELER ALL PUPIL II WIRELESS	2,321.75	2,321.75	-
1697	8/4/2009	INDIRECT KEELER ALL PUPIL II WIRELESS	2,321.75	2,321.75	-
1698	8/4/2009	INDIRECT KEELER ALL PUPIL II WIRELESS	2,321.75	2,321.75	-
1699	8/4/2009	INDIRECT KEELER ALL PUPIL II WIRELESS	2,321.75	2,321.75	-
1718	8/17/2009	POWERHEART G3 DEFIBRILLATOR	1,684.46	1,684.46	-
2066	11/7/2011	DICOM UPGRADES- MED FLOW PROJECT	1,695.00	1,695.00	-
2120	5/31/2012	HAAG-STREIT 900-BM BASIC SLIT LAMP	11,065.00	11,065.00	-
2121	5/31/2012	KEELER ALL PUPIL SLIMLINE	2,467.00	2,467.00	-
2122	5/31/2012	REICHERT ULTRAMATIC PHOROPTER	3,995.00	3,995.00	-

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2123	5/31/2012	RELIANCE 6200 EXAM CHAIR	4,195.00	4,195.00	-
2124	5/31/2012	RELIANCE 7800 STAND W/2 ARMS	4,265.00	4,265.00	-
2125	5/31/2012	STAR WHEELCHAIR ACCESS GLIDE	1,299.00	1,299.00	-
2164	9/24/2012	KEELER ALL PUPIL II LED SLIMLINE	2,500.00	2,500.00	-
2461	1/1/2014	LATITUDE 14 500 SERIES	1,244.09	1,244.09	-
2494	1/1/2014	TONOMETER	4,070.40	4,070.40	-
2495	1/1/2014	TONOMETER	4,070.40	4,070.40	-
2736	9/29/2014	HAAG STREIT ADVANCED STIMULI	3,404.13	3,404.13	-
2737	9/29/2014	HAAG STREIT ADVANCED STIMULI	3,404.12	3,404.12	-
2738	9/29/2014	HAAG STREIT ADVANCED STIMULI	3,404.12	3,404.12	-
2742	10/1/2014	PENTACAM	36,995.00	36,995.00	-
2748	10/23/2014	AO ULTRAMATIC PHOROPTER	4,095.00	4,095.00	-
2749	10/23/2014	HAAG STREIT BM900 SL UNIT	12,390.00	12,390.00	-
2750	10/23/2014	RELIANCE 6200 EXAM CHAIR	4,485.00	4,485.00	-
2751	10/23/2014	RELIANCE 7800 STAND	5,856.00	5,856.00	-
2760	11/7/2014	DICOM INTERFACE	935.00	935.00	-
2860	4/15/2015	DELL LATITUDE	1,310.15	1,310.15	-
2967	7/6/2015	LEXMARK MX511DE MFP - CLINIC OPTICAL	817.97	817.97	-
3174	11/23/2015	HUMPHREY AUTOREFRACTOR 599	6,100.00	6,100.00	-
3745	8/12/2016	ICARE TAO11 TONOMETER - NASHVILLE RD	8,045.00	7,374.61	670.39
3751	8/18/2016	HAAG STREIT PROJECTION SYSTEM - NASHVILLE RD	3,266.99	2,955.83	311.16
3757	8/22/2016	HUMPHREY AUTO REFRACTOR - NASHVILLE RD	9,216.70	8,338.91	877.79
3760	8/25/2016	KEELER ALL PUPIL II - NASHVILLE RD	2,856.64	2,584.57	272.07
3942	3/27/2017	KEELER PUPIL II LED	3,710.14	3,047.62	662.52
3952	4/25/2017	AO CUSTOM CHAIR, STAND, CONSOLE	750.00	607.13	142.87
4090	5/12/2017	HPLI MS27 MFP - OPHTHALMOLOGY REGISTRATION	1,543.12	1,543.12	-
4217	4/25/2017	REICHERT/AO PHOROPTER	2,200.00	1,780.97	419.03
4218	4/25/2017	HAAG-STREIT 900 SLIT LAMP	1,500.00	1,214.31	285.69
4219	4/25/2017	BURTON CHAIR, STAND, AND CONSOLE	750.00	607.13	142.87
4220	4/25/2017	REICHERT/AO PHOROPTER	2,200.00	1,780.97	419.03
4221	4/25/2017	BURTON 1000 SLIT LAMP (HAAG STREIT 900 CLONE)	1,100.00	890.46	209.54
4222	4/25/2017	KEELER INDIRECT OPHTHALMOSCOPE	800.00	647.64	152.36
4223	4/25/2017	TOPCON CHAIR, STAND, AND CONSOLE	1,150.00	930.97	219.03
4224	4/25/2017	TOPCON PHOROPTER	2,400.00	1,942.87	457.13
4225	4/25/2017	HAAG-STREIT 900 SLIT LAMP	1,500.00	1,214.31	285.69
4226	4/25/2017	KEELER INDIRECT OPHTHALMOSCOPE	800.00	647.64	152.36
4227	4/25/2017	MARCO LENSOMETER	750.00	607.13	142.87
4683	9/26/2019	BURTON SL-3MH HAAG-STREIT SLIT LAMP	3,339.00	1,550.25	1,788.75
4704	1/7/2020	RELIANCE 6200-L EXAM CHAIR	5,313.84	2,277.36	3,036.48
4705	1/7/2020	RELIANCE 6200-L EXAM CHAIR	5,313.84	2,277.36	3,036.48
4809	7/12/2021	KEELER ALL PUPIL II LED SLIMLINE WIRELESS HEADSET	3,318.86	711.18	2,607.68
4908	7/15/2022	VISULENS 550 DIGITAL LENS METER	5,824.00	416.00	5,408.00
4731	3/15/2020	ARGOS BIOMETER A-SCANNER	65,455.00	26,493.70	38,961.30
1972	2/22/2011	ZEISS STRATUS OCT/TABEL SN 7581	26,795.00	26,795.00	-
3199	1/1/2016	OPTOVUE IFUSION SYSTEM	53,742.00	53,742.00	-
4614	7/18/2019	COMPUTER FOR OCT MACHINE	3,157.91	2,157.90	1,000.01
4789	3/31/2021	CIRRUS 6000 ANGIOPLEX OCT SCANNER	91,901.90	22,975.47	68,926.43
4871	3/17/2022	ZEISS HFA3 840 VISUAL FIELD ANALYZER	28,545.00	3,058.39	25,486.61
2743	10/1/2014	LUMENIS SELECTA II PULSED LASER SYSTEM	43,139.26	43,139.26	-
4345	2/27/2018	VK VISUALS YAG III W/O TABLE	24,773.62	17,105.60	7,668.02
4413	6/13/2018	SLT LASER REPAIR	3,690.00	2,416.06	1,273.94
4539	2/7/2019	LUMENIS SELECTA II LASER REPAIR	4,199.80	2,349.88	1,849.92
1722	8/20/2009	CAST CUTTER	1,565.00	1,565.00	-
1723	8/20/2009	CAST VACCUUM HOUSE	2,005.00	2,005.00	-
133	2/1/1992	EXAM TABLE-POTZICK	750.00	750.00	-
185	7/21/1994	BLUE TABLE SCALES	1,566.00	1,566.00	-
430	7/1/1999	EXAM TABLE	1,192.67	1,192.67	-
440	10/13/1999	PULSE OXIMETER WITH PRINTER - SN 102603642	1,344.75	1,344.75	-
854	2/3/2003	32 MEDIUM OAK GUEST CHAIRS	5,760.00	5,760.00	-
999	3/29/2005	BILICHEK NONINVASIVE BILIRUBIN SYSTEM (SN B013	4,000.07	4,000.07	-
2452	1/1/2014	FUJITSU LIFEBOOK	1,910.85	1,910.85	-
2466	1/1/2014	LATITUDE 14 5000 SERIES	1,244.09	1,244.09	-
2467	1/1/2014	LATITUDE 14 5000 SERIES	1,244.09	1,244.09	-
2469	1/1/2014	LEXMARK MX511DE MFP - LOWRY	1,396.40	1,396.40	-
2570	3/28/2014	DIGITAL TABLE SCALE	1,938.71	1,938.71	-
2602	5/7/2014	DELL LATITUDE	1,220.61	1,220.61	-
2620	5/29/2014	PEDS TABLE SCALE	2,031.78	2,031.78	-
2968	7/6/2015	LEXMARK MX511DE MFP - FOSTER	817.97	817.97	-
3027	9/1/2015	REFRIGERATOR	859.98	859.98	-
3143	10/30/2015	HIGH PERFORMANCE REFRIGERATOR	6,485.27	6,485.27	-
3386	5/23/2016	45.8 CU. FT. REFRIGERATOR - NASHVILLE RD	7,040.27	6,621.19	419.08
3411	5/23/2016	HPLI M630 MFP - PEDIATRICS NS	2,076.74	2,076.74	-
3881	1/1/2017	HPLI M527DN MFP - PEDIATRICS	1,543.85	1,543.85	-
3933	3/6/2017	FUJITSU LIFEBOOK - DR. P-STEWART	1,338.90	1,338.90	-
4515	3/6/2019	HPLI MFP M632H - SOWELL/P-STEWART	2,090.69	1,602.87	487.82
4774	2/8/2021	REPLACE EVAPORATOR COIL - PEDS SHOT ROOM FCC	2,952.50	808.43	2,144.07
140	6/26/1992	CLINIC AUDIOMETER	4,665.81	4,665.81	-
4804	6/24/2021	MAICO EROSCAN OAE SCREENER - DR. FOSTER	3,712.13	795.46	2,916.67
4825	9/9/2021	MAICO EROSCAN OAE SCREENER - DR. CHERRY	3,712.13	707.08	3,005.05
2562	3/6/2014	ISCREEN VISION SCANNER	2,967.75	2,967.75	-
2744	10/6/2014	ISCREEN VISION SCANNER	3,018.00	3,018.00	-
3040	9/21/2015	ISCREEN VISION SCREENER - PEDS ASSOC	3,018.00	3,018.00	-
3456	5/28/2016	ISCREEN VISION SCREENER - NASHVILLE RD	3,018.00	2,838.34	179.66
2589	4/14/2014	DRAEGER JAUNDICE METER	6,966.89	6,966.89	-
3229	1/18/2016	DRAEGER JAUNDICE METER	6,729.95	6,649.82	80.13
3432	5/23/2016	DRAEGER JAUNDICE METER - NASHVILLE RD	6,729.96	6,329.35	400.61
2395	8/21/2013	LEXMARK MX511DE MFP - PEDS ASSOC REG	1,396.39	1,396.39	-
3149	11/4/2015	HIGH PERFORMANCE REFRIGERATOR	6,485.27	6,485.27	-
3151	11/10/2015	TEMPERATURE GUARD REFRIGERATOR SENSOR	1,049.98	1,049.98	-
3274	3/1/2016	TIME CLOCK - 17 PEDS ASSOC	1,183.50	1,183.50	-
3437	5/25/2016	REFURBISHED M9 AUTOCLAVE	3,412.61	3,209.51	203.10
313	11/3/1997	BERGEN - MICROTYMP 2	1,985.73	1,985.73	-
567	3/2/2001	REPAIR OF TYMPANOGRAM	1,344.45	1,344.45	-
3489	5/28/2016	TYMPANOMETER MICROTYMP 3	3,450.85	3,245.45	205.40
4621	7/12/2019	ERO-SCAN PRO OAE W/ TYMPANOMETRY	5,406.00	2,703.01	2,702.99
4679	10/4/2019	ERO-SCAN PRO TYMPANOMETER SCREENER W/PRINTER	5,406.87	2,510.33	2,896.54
3028	9/1/2015	WIRING FOR NEW PHONE SYSTEM	6,926.62	3,347.90	3,578.72
3053	10/1/2015	PHONE EQUIPMENT	53,883.07	26,043.52	27,839.55
3054	10/1/2015	PHONE EQUIPMENT	3,836.00	1,854.04	1,981.96
3055	10/1/2015	PHONE HEADSETS	7,595.70	3,671.26	3,924.44
3056	10/1/2015	PHONE HEADSETS	4,582.55	2,214.88	2,367.67
3057	10/1/2015	PHONE HEADSETS	587.66	284.06	303.60
3058	10/1/2015	PHONE HEADSETS	1,549.49	748.93	800.56
3059	10/1/2015	PHONE HEADSETS	1,484.00	717.24	766.76
3060	10/1/2015	PHONE SYSTEM	715.05	345.61	369.44
3061	10/1/2015	PHONE SYSTEM	977.50	472.48	505.02
3062	10/1/2015	PHONE SYSTEM	12,155.85	5,875.33	6,280.52

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3063	10/1/2015	PHONE SYSTEM	1,430.10	691.72	738.88
3064	10/1/2015	PHONE SYSTEM	325,170.20	157,165.57	168,004.63
3065	10/1/2015	PHONE SYSTEM	2,110.25	1,019.93	1,090.32
3066	10/1/2015	PHONE SYSTEM	150,395.06	72,690.97	77,704.09
3067	10/1/2015	WIRING FOR NEW PHONE SYSTEM	7,791.83	3,766.09	4,025.74
3206	1/1/2016	PHONE IMPLEMENTATION	34,862.80	-	-
3207	1/1/2016	PHONE SYSTEM	2,519.53	2,519.53	-
3208	1/1/2016	PHONE SYSTEM	2,023.49	2,023.49	-
3209	1/1/2016	PHONE SYSTEM	3,799.03	3,799.03	-
3210	1/1/2016	PHONE SYSTEM	17,802.69	17,802.69	-
3211	1/1/2016	PHONE SYSTEM	2,797.98	2,797.98	-
3212	1/1/2016	PHONE SYSTEM IMPLEMENTATION	2,797.98	2,797.98	-
3236	1/27/2016	PHONE IMPLEMENTATION	376.62	376.62	-
3237	1/27/2016	PHONE SYSTEM IMPLEMENTATION	935.00	935.00	-
3303	3/25/2016	PHONE SYSTEM - NASHVILLE RD	28,370.00	28,370.00	-
3304	3/25/2016	PHONE SYSTEM IMPLEMENTATION	16,675.00	16,675.00	-
3322	4/11/2016	PHONE SYSTEM UPDATE	915.40	915.40	-
3328	4/14/2016	PHONE SYSTEM - SATELLITES	38,515.54	38,515.54	-
3333	4/26/2016	PHONE SYSTEM IMPLEMENTATION	175.00	173.33	1.67
3337	5/4/2016	PHONE SYSTEM IMPLEMENTATION	1,000.00	990.49	9.51
3503	6/3/2016	PHONE SYSTEM	3,022.50	2,943.36	79.14
3533	7/6/2016	PHONE SYSTEM	360.00	344.58	15.42
3781	9/8/2016	PHONE SYSTEM - FRANKLIN W/C	1,100.00	1,016.17	83.83
3815	10/12/2016	PHONE SYSTEM	1,665.00	1,510.41	154.59
3845	11/3/2016	PHONE SYSTEM	185.00	164.75	20.25
3944	3/31/2017	CISCO UPGRADE	3,545.00	2,911.97	633.03
4008	5/3/2017	CISCO UPGRADE	14,892.50	12,055.83	2,836.67
4009	6/5/2017	CISCO UPGRADE	15,110.00	12,052.02	3,057.98
4045	7/6/2017	PHONE SYSTEM UPGRADE	3,455.00	2,714.64	740.36
4081	6/1/2017	PHONE SYSTEM - SATELLITES	27,948.05	22,291.91	5,656.14
4214	11/3/2017	PHONE SYSTEM ADD-ON	7,175.00	5,295.83	1,879.17
4253	10/4/2017	PHONE SYSTEM ADD-ON	17,407.50	13,055.65	4,351.85
4296	1/1/2018	PHONE ADD-ON PROJECT	545.00	389.30	155.70
4306	1/4/2018	PHONE ADD-ON PROJECT - SATELLITES	700.00	500.00	200.00
4342	1/3/2018	MEMORY FOR VOICE GATEWAY - FRANKLIN	2,486.76	1,776.25	710.51
4353	4/4/2018	PHONE ADD-ON - MUNFORDVILLE	1,012.50	687.04	325.46
4407	3/19/2018	PHONE ADD-ON PROJECT - MUNFORDVILLE	175.00	166.25	8.75
4571	10/3/2019	PHONE SYSTEM 2019.05-UC UPGRADE	19,800.00	12,870.00	6,930.00
4572	5/31/2019	PHONE SYSTEM SITE ADD-ON - SURGERY CENTER	3,535.00	2,533.42	1,001.58
4573	5/31/2019	PHONE SYSTEM SITE ADD-ON - BROWNSVILLE	3,535.00	2,533.42	1,001.58
4685	11/1/2019	PHONE SYSTEM 2019.05-UC UPGRADE - PROJECT FINISHING / CLEANUP	2,450.00	1,551.67	898.33
4696	1/2/2020	PHONE SYSTEM 2019.05-UC UPGRADE - PROJECT TROUBLESHOOTING / SITE ADD-ONS	30,016.65	18,009.99	12,006.66
4806	4/13/2021	PHONE SYSTEM - GLASGOW CARE CENTER	5,724.53	1,362.98	4,361.55
4916	9/26/2022	IMAGICLE CALL RECORDING SOFTWARE (BILLING DEPT)	34,559.45	1,727.97	32,831.48
226	5/24/1996	EXAM ROOM CURTAINS	1,020.00	1,020.00	-
356	6/12/1998	HOWARDS SCHWINN EXERCISE BIKE	649.00	649.00	-
483	4/3/2000	PERITRON V - SN 5806	595.00	595.00	-
888	10/20/2003	AR1-70 SOLARIS 708 - SN 780199	3,795.00	3,795.00	-
945	8/3/2004	PARALLEL BARS	815.00	815.00	-
955	8/17/2004	WALL MOUNT PULLEY	1,073.63	1,073.63	-
971	12/2/2004	CLUSTER PROBE - AR 10-450 SLD	1,320.00	1,320.00	-
1581	3/12/2009	SPORTS ART TREADMILL T650M	4,749.00	4,749.00	-
1618	4/29/2009	QUANTUM 210 MEDICAL ELLIPTICAL	2,824.00	2,824.00	-
2108	4/23/2012	ULTRASOUND DYNATRON SOLARIS	2,895.00	2,895.00	-
2119	5/29/2012	HYDRO FITNESS SCIFIT PRO2 TOTAL BODY EXERCISER	3,572.85	3,572.85	-
2203	2/6/2013	BIODEX BALANCE SYSTEM SD	12,390.00	12,390.00	-
2238	4/3/2013	ANTIGRAVITY TREADMILL F320 W/ ASSY VMS 3.0	39,988.50	39,988.50	-
2790	1/1/2015	PRO1 SPORT UPPER BODY EXERCISER	3,585.17	3,585.17	-
3301	3/24/2016	HPLI M527 MFP - PT	1,559.93	1,559.93	-
3499	5/31/2016	GRPRO 2.1 COLD PACK SYSTEM	2,036.00	1,914.83	121.17
3816	10/14/2016	CERVICAL TRACTION SYSTEM	1,242.59	1,109.44	133.15
3817	10/14/2016	CHATT HI-LO TRACTION PACKAGE	9,339.66	8,339.00	1,000.66
3945	3/31/2017	CHATTANOOGA HYDROCOLLATOR HEATING UNIT	1,345.51	1,105.26	240.25
4010	8/1/2017	DYNATRON 709 - FRANKLIN	3,925.00	2,803.60	1,121.40
4082	7/26/2017	SOLARIS PLUS 708 ULTRASOUND - P.T.	4,254.24	3,291.98	962.26
4083	8/1/2017	COLPAC FREEZER - FRANKLIN	807.40	576.70	230.70
4084	9/1/2017	TRACTION PACKAGE - FRANKLIN	8,508.04	6,077.20	2,430.84
4085	8/1/2017	HYDRO COLLATOR HEATING UNIT - FRANKLIN	623.23	445.15	178.08
4086	8/1/2017	SCIFIT PRO EXERCISER - FRANKLIN	4,708.55	3,363.25	1,345.30
4206	7/13/2017	WEIGHT RACK - W/KU	1,371.12	1,077.34	293.78
4267	11/3/2017	SPORTSTART TREADMILL - FRANKLIN	6,090.69	4,350.50	1,740.19
4311	1/1/2018	4-SIDED WEIGHT RACK	1,371.12	979.40	391.72
4412	7/10/2018	HPLI M632H MFP - PT	1,688.75	1,085.63	603.12
4542	4/29/2019	DYNATRONICS D7197 ELECTROTHERAPY / ULTRASOUND / ESTIM	3,850.00	2,016.67	1,833.33
883	9/2/2003	RESPIRONICS OXYGEN CONCENTRATOR - SN 60012804	775.00	775.00	-
1365	12/21/2007	PEBBLE GRAY MIDMARK EXAM TABLE	964.17	964.17	-
1366	12/21/2007	PEBBLE GRAY MIDMARK EXAM TABLE	964.17	964.17	-
1367	12/21/2007	PEBBLE GRAY MIDMARK EXAM TABLE	964.17	964.17	-
1389	1/29/2008	PEBBLE GRAY MIDMARK EXAM TABLE	965.59	965.59	-
1594	4/16/2009	2 SEAT GUEST CHAIR	667.00	667.00	-
1595	4/16/2009	2 SEAT GUEST CHAIR	667.00	667.00	-
1596	4/16/2009	2 SEAT GUEST CHAIR	667.00	667.00	-
1597	4/16/2009	2 SEAT LA-Z-BOY GUEST CHAIR	694.00	694.00	-
1598	4/16/2009	2 SEAT LA-Z-BOY GUEST CHAIR	694.00	694.00	-
1599	4/16/2009	2 SEAT LA-Z-BOY GUEST CHAIR	694.00	694.00	-
1600	4/16/2009	2 SEAT LA-Z-BOY GUEST CHAIR	694.00	694.00	-
1601	4/16/2009	BIARIATRIC GUEST CHAIR	679.00	679.00	-
1602	4/16/2009	BIARIATRIC GUEST CHAIR	679.00	679.00	-
1603	4/16/2009	BIARIATRIC GUEST CHAIR	679.00	679.00	-
1864	9/15/2010	EXAM TABLE	986.51	986.51	-
2663	7/30/2014	DELL LATITUDE LAPTOP	1,220.62	1,220.62	-
3838	10/28/2016	MIDMARK EXAM TABLE	1,275.44	1,133.38	142.06
3839	10/28/2016	MIDMARK EXAM TABLE	1,275.44	1,133.38	142.06
4254	10/2/2017	MIDMARK EXAM TABLE	1,397.63	1,048.22	349.41
4372	3/23/2018	HPLI M631 MFP - DR. HANSBROUGH	2,689.86	2,555.36	134.50
4765	9/11/2020	BUTTERFLY IQ LIGHTNING ULTRASOUND	2,123.00	707.68	1,415.32
895	11/18/2003	HAND HELD OXIMETER (REFURBISHED)	623.28	623.28	-
1003	3/29/2005	WRISTOX PULSE OXIMETER	686.89	686.89	-
1025	8/19/2005	2 OXYGEN BOXES	2,350.00	2,350.00	-
1304	8/28/2007	EXEC LEATHER HIGHPOINT RECLINER CHAIR - PULMO	850.00	850.00	-
1306	8/29/2007	WRISTOX PULSE OXIMETER	693.74	693.74	-
1307	8/29/2007	WRISTOX PULSE OXIMETER	693.74	693.74	-
1640	6/16/2009	WRISTOX OXIMETER	654.64	654.64	-
2614	5/23/2014	PHYS CHOICE ENCORE - TWR/BOX	46,500.00	46,500.00	-
2615	5/23/2014	PHYS CHOICE ENCORE TOWER	30,379.00	30,379.00	-
2920	5/29/2015	OPTI CCA-TS BLOOD GAS ANALYZER	5,565.10	5,565.10	-
2943	6/16/2015	AVOXIMETER 4000 CO-OXIMETER	6,000.00	6,000.00	-

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2976	7/10/2015	VMAX ENCORE UNIT ASSEMBLY	3,100.17	3,100.17	-
2982	7/23/2015	REFRIGERATED MERCHANDISER	2,027.98	2,027.98	-
3216	1/1/2016	VMAX ENCORE 22 UNIT ASSEMBLY	3,070.00	-	-
3763	9/1/2016	AVOXIMETER 4000 - ANALYZER INTERFACE	2,050.00	1,854.78	195.22
3923	2/20/2017	NIOX VERO	2,299.96	1,916.66	383.30
3924	2/20/2017	NIOX VERO	2,299.97	1,916.66	383.31
4473	11/5/2018	HPLI M6S2 COLOR PRINTER - PFT	1,104.02	920.00	184.02
4792	4/15/2021	VMAX ENCORE 22 UNIT ASSEMBLY	5,059.20	1,264.80	3,794.40
4861	2/4/2022 (2)	VMAX WIN 10 SOFTWARE UPGRADES	6,400.00	1,173.33	5,226.67
354	6/1/1998	AMER HEALTH CARE - ROPES FOR RECEPTIONS AREAS	567.65	567.65	-
355	6/8/1998	AMER HEALTH CARE - ROPES FOR RECEPTION DESKS	1,639.82	1,639.82	-
509	9/1/2000	REUPHOLSTER 20 CHAIRS	2,100.00	2,100.00	-
843	12/2/2002	PARTITIONS	998.00	998.00	-
1260	6/21/2007	3 SOFAS FOR LOBBY	4,095.25	4,095.25	-
1261	6/21/2007	6 CHAIRS FOR LOBBY	4,900.21	4,900.21	-
1472	6/19/2008	12 - LA-Z-BOY 4 SEATER GUEST CHAIRS	9,553.08	9,553.08	-
1473	6/19/2008	LA-Z-BOY 3 SEATER GUEST CHAIR	647.39	647.39	-
2131	6/25/2012	INFORMATION BOARD	3,167.35	3,167.35	-
2132	6/25/2012	INFORMATION BOARD	3,167.35	3,167.35	-
2133	6/25/2012	INFORMATION BOARD	3,167.35	3,167.35	-
2134	6/25/2012	INFORMATION BOARD	3,167.35	3,167.35	-
2151	8/30/2012	FLORIN 4 SEAT GUEST CHAIR FOR LOBBY	1,146.25	1,146.25	-
2152	8/30/2012	FLORIN 4 SEAT GUEST CHAIR FOR LOBBY	1,146.25	1,146.25	-
2153	8/30/2012	FLORIN 4 SEAT GUEST CHAIR FOR LOBBY	1,146.25	1,146.25	-
2154	8/30/2012	FLORIN 4 SEAT GUEST CHAIR FOR LOBBY	1,146.25	1,146.25	-
2155	8/30/2012	FLORIN 4 SEAT GUEST CHAIR FOR LOBBY	1,146.25	1,146.25	-
2223	3/19/2013	LA-Z-BOY 2 SEAT GUEST CHAIR	662.47	662.47	-
2224	3/19/2013	LA-Z-BOY 3 SEAT GUEST CHAIR	949.58	949.58	-
2225	3/19/2013	LA-Z-BOY 3 SEAT GUEST CHAIR	949.58	949.58	-
2226	3/19/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2227	3/19/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2228	3/19/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2229	3/19/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2230	3/19/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2231	3/19/2013	LA-Z-BOY GUEST CHAIR	556.91	556.91	-
2366	7/25/2013 (10)	LA-Z-BOY 3 SEAT GUEST CHAIRS	9,495.80	9,495.80	-
2367	7/25/2013 (7)	LA-Z-BOY 2 SEAT GUEST CHAIRS	4,637.29	4,637.29	-
2368	7/25/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2369	7/25/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2370	7/25/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
2371	7/25/2013	LA-Z-BOY 4 SEAT GUEST CHAIR	1,266.24	1,266.24	-
4476	7/28/2016	HARDWARE - KIOSKS - 2 FREES	13,501.22	13,501.22	-
4477	7/28/2016	SOFTWARE - KIOSK SOLUTION	8,717.44	8,717.44	-
4738	7/27/2020	FEVER DETECTION CAMERA SYSTEM	9,010.00	3,110.59	5,899.41
495	6/20/2000	5 DRAWER LATERAL FIL - NC HON665LL	651.05	651.05	-
544	1/22/2001	PLATFORM SCALE - SN 0011A0867	1,368.00	1,368.00	-
737	6/14/2002	EXAM TABLE	804.77	804.77	-
738	6/14/2002	EXAM TABLE	804.77	804.77	-
1102	5/18/2006	MOBILE NOTEBOOK WORKSTATION CART	580.00	580.00	-
1347	11/14/2007	PEBBLE GRAY MIDMARK EXAM TABLE	965.59	965.59	-
1348	11/14/2007	PEBBLE GRAY MIDMARK EXAM TABLE	965.58	965.58	-
2148	8/21/2012	MIDMARK EXAM TABLE	1,159.85	1,159.85	-
2343	6/25/2013	LEXMARK MX511DE MFP - DRUG STUDY	1,396.40	1,396.40	-
4055	5/12/2017	HPLI M527 MFP - DR. FRASER	1,543.12	1,543.12	-
4505	7/28/2015	HPLI M630H MFP - DR. PANSURIA	1,807.61	1,807.61	-
2416	9/19/2013	ULTRASOUND SONOSITE M-MSK SYSTEM	23,320.00	23,320.00	-
4087	7/21/2017	SECURITY CAMERAS AND SOFTWARE	14,134.50	10,937.44	3,197.06
293	7/21/1997	GLASS DOOR REFRIGERATOR	2,021.25	2,021.25	-
314	11/3/1997	BERGEN STERILIZER ULTRACLAIVE M11	3,165.90	3,165.90	-
1134	9/28/2006	BURGUNDY INFUSION RECLINER	1,659.71	1,659.71	-
1497	9/2/2008	DEVICE SPOT VITAL SIGNS PB & MBL STAND - 2008	756.35	756.35	-
1506	10/3/2008 (2)	INFUSION RECLINERS - 54 SERIES 98180/9818	2,578.10	2,578.10	-
2638	7/8/2014	REFRIGERATOR - MAB SHOT ROOM	2,927.37	2,927.37	-
2649	7/24/2014	RECLINER - MAB INFUSION	1,445.63	1,445.63	-
2650	7/24/2014	RECLINER - MAB INFUSION	1,445.62	1,445.62	-
2681	8/25/2014	LEXMARK MX511DE MFP - INFUSION	790.81	790.81	-
2682	8/25/2014	RECLINER - MAB INFUSION	1,448.25	1,448.25	-
2716	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2717	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2718	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2719	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2720	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2722	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2723	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2724	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2726	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2727	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2728	9/10/2014	IV PUMP PLUM A+	1,507.08	1,507.08	-
2801	1/9/2015	RITTER M11 STERILIZER	4,004.25	4,004.25	-
2929	6/1/2015	SPOT VITAL SIGNS BLOOD PRESSURE MACHINE	981.57	981.57	-
3098	10/15/2015	RITTER M11 STERILIZER	3,999.00	3,999.00	-
3346	5/12/2016	IV PUMP PLUM A+	2,341.58	2,230.07	111.51
3347	5/12/2016	IV PUMP PLUM A+	2,339.77	2,228.34	111.43
3385	5/23/2016	45.8 CU FT. REFRIGERATOR - SHOT ROOM - NASHVILLE RD	6,650.72	6,476.51	174.21
3938	3/14/2017	54 SERIES INFUSION RECLINER	1,559.79	1,299.84	259.95
4011	4/17/2017	IV PUMP PLUM A+	1,925.66	1,558.90	366.76
4088	7/25/2017	IV PUMP PLUM 360	1,916.56	1,483.08	433.48
4089	7/25/2017	IV PUMP PLUM 360	1,916.56	1,483.08	433.48
4102	8/29/2017	CHAMPION INFUSION RECLINER	1,541.91	1,174.78	367.13
4546	4/25/2019	BIARIATRIC INFUSION CHAIR	1,452.20	743.40	708.80
4547	4/25/2019	BIARIATRIC INFUSION CHAIR	1,452.20	743.40	708.80
4548	4/25/2019	STANDARD INFUSION CHAIR	1,384.11	708.53	675.58
4549	4/25/2019	STANDARD INFUSION CHAIR	1,384.10	708.53	675.57
4550	4/25/2019	STANDARD INFUSION CHAIR	1,384.10	708.53	675.57
4587	6/21/2019	GRAHAM FIELD INFUSION RECLINER CHAIR	1,401.96	700.98	700.98
4630	7/3/2019	CLINICCOOL ULTRA REFRIGERATOR MODEL LHU-47-SGPH - INFUSION ROOM	4,444.21	2,222.11	2,222.10
4632	9/1/2019	LAMINAR HORIZONTAL AIRFLOW HOOD	5,107.08	2,431.94	2,675.14
4633	9/1/2019	LAMINAR HORIZONTAL AIRFLOW HOOD	5,107.08	2,431.94	2,675.14
563	3/1/2001	FINESIGNS	730.00	730.00	-
1203	3/22/2007	CHESTNUT STREET ENTRANCE SIGN	1,188.00	1,188.00	-
1785	2/20/2010	RIVERSIDE SIGNS	2,737.50	2,737.50	-
1803	6/22/2010	PULMONARY AND SLEEP MEDICINE SIGNS	1,115.00	1,115.00	-
2524	2/11/2014	BUILDING SIGNS - DR. KAMAL SINGH	3,178.19	3,178.19	-
4461	10/24/2018	UPDATE PRIMECARE SIGN	1,720.17	1,023.93	696.24
280	4/11/1997	18 TEAL CHAIRS @ 256	4,608.00	4,608.00	-
282	4/11/1997	SETTEE	645.00	645.00	-
283	4/11/1997	SETTEE	645.00	645.00	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
284	4/17/1997	2 BEDROOM SETS	2,489.00	2,489.00	-
482	4/3/2000	BEDROOM SUITE	874.75	874.75	-
884	9/17/2003	BIARIATRIC INVACARE ELECTRIC BED	2,292.62	2,292.62	-
1178	1/11/2007	2 BED FRAMES & MATTRESSES	1,874.00	1,874.00	-
1719	8/17/2009	POWERHEART G3 DEFIBRILLATOR	1,684.46	1,684.46	-
3321	4/11/2016	NONON RESPENSE CAPNOGRAPH	2,000.00	1,928.61	71.39
4405	5/31/2018	PHILIPS RESPIRONICS ALICE 6 SLEEP STUDY SYSTEM	75,000.00	49,107.16	25,892.84
4715	1/1/2020	CHAMPION SLEEPER RECLINER 526	1,074.28	460.41	613.87
4874	4/14/2022	INSPIRE PHYSICIAN PROGRAMMER DEVICE	2,596.53	278.20	2,318.33
366	8/25/1998	RITTER 75 EXAM TABLE W/GRAY TOP - COLIN	6,315.36	6,315.36	-
411	4/1/1999	2 TREATMENT CABINETS	8,312.60	8,312.60	-
1154	10/18/2006	SOUND BOOTH ACOUSTIC SYSTEM RE-146MC - 5/N HC	10,726.00	10,726.00	-
1520	11/3/2008	MIDMARK 491 CHAIR (POWER) - V670670	7,157.30	7,157.30	-
1521	11/3/2008	MIDMARK 491 CHAIR (POWER) - V671176	7,157.30	7,157.30	-
1736	9/2/2009	MAXI TALL TREATMENT CABINET	6,265.00	6,265.00	-
4483	12/1/2008	OPT MAGNIFIER W/ HALOGEN VN00008297 B64110028	965.06	965.06	-
4650	1/1/2015	TRUSCULPT SYSTEM - DR. SOUTH	85,065.00	85,065.00	-
4651	1/1/2015	XEO CONSOLE/TITAN - DR. SOUTH	98,050.00	98,050.00	-
4652	1/20/2015	MAESTRO 4 MOTOR FACIAL BED CHAIR	2,647.06	2,647.06	-
4653	10/29/2015	IV PUMP	1,200.00	1,200.00	-
4654	10/29/2015	NST & CABINET	2,877.00	2,877.00	-
4655	10/29/2015	NST & CABINET	2,877.00	2,877.00	-
4659	10/29/2015	RITTER 230 TABLE	5,500.00	5,500.00	-
4660	6/16/2017	MONALISA TOUCH LASER SYSTEM	127,938.11	100,522.79	27,415.32
4668	10/29/2015	LEEP MACHINE	2,292.00	2,292.00	-
4879	5/24/2022	WELCH ALLYN CP150 EKG - SPARE (HELD IN SUPPLY DEPT)	2,800.95	233.41	2,567.54
403	1/21/1999	DESK	1,436.50	1,436.50	-
565	3/2/2001	DESK W/ RIGHT PEDESTAL & LEFT RETURN	683.00	683.00	-
2057	9/26/2011	SHELVING UNITS FOR NEW SUPPLY ROOM	10,982.67	10,982.67	-
2082	12/22/2011	DESK- JERRY SHOEMAKER	1,391.52	1,391.52	-
2425	11/12/2013	38000 SERIES DESK	1,565.46	1,565.46	-
3338	5/5/2016	WORKSTATION CUBICLES	6,015.29	5,958.02	57.27
166	10/20/1993	ULTRACLAVE	2,483.71	2,483.71	-
218	11/8/1995	EXAM TABLE	5,375.00	5,375.00	-
263	1/15/1997	RITTER EXAM TABLE - USED	3,500.00	3,500.00	-
497	6/20/2000	REPAIR CHAIR	1,091.75	1,091.75	-
729	6/11/2002	SURGERY/ SURGERY LIGHT	2,798.00	2,798.00	-
739	6/14/2002	EXAM TABLE	804.77	804.77	-
740	6/14/2002	EXAM TABLE	804.77	804.77	-
741	6/14/2002	EXAM TABLE	804.77	804.77	-
742	6/14/2002	EXAM TABLE	804.77	804.77	-
896	11/18/2003	MAMMOTOME BREAST BIOPSY SYSTEM	32,863.00	32,863.00	-
3909	1/12/2017	HPLI M527 MFP W/TRAYS - WIERSON/ CHAMBERS	1,731.07	1,731.07	-
3998	4/26/2017	HPLI M527 MFP - HAASE	1,730.33	1,730.33	-
4411	7/13/2018	RITTER M11 ULTRACLAVE STERILIZER - WEIRSON/CHAMBERS	4,265.60	2,742.17	1,523.43
553	2/8/2001	USED LEOPARD ULTRASOUND SCANNING SYSTEM EO173	8,649.00	8,649.00	-
4767	12/5/2020	BUTTERFLY IQ LIGHTNING ULTRASOUND	2,024.00	602.38	1,421.62
2018	5/5/2011	MYLAB 5 PORTABLE ULTRASOUND SYSTEM	25,500.00	25,500.00	-
4297	1/1/2018	ESAOTE MYLAB ULTRASOUND REPAIR	7,138.93	5,099.25	2,039.68
189	8/5/1994	ALO MICROSCOPE	700.00	700.00	-
1087	4/3/2006	CORE BIOPSY INST	804.16	804.16	-
1164	11/16/2006	MIDMARK EXAM TABLE	975.67	975.67	-
1165	11/16/2006	MIDMARK EXAM TABLE	975.66	975.66	-
1193	3/1/2007	ENOCHS POWER 2000 HIGH-LOW EXAM TABLE	3,984.00	3,984.00	-
1364	12/17/2007	HYFREATOR 2000 - SN 07JGU298	911.27	911.27	-
1494	8/21/2008	FLEXIBLE GRASPER FORCEP 5FR CM73 270232E	1,140.00	1,140.00	-
1615	4/29/2009	EXAM TABLE	1,120.39	1,120.39	-
1616	4/29/2009	EXAM TABLE	1,120.39	1,120.39	-
1617	4/29/2009	EXAM TABLE	1,120.38	1,120.38	-
1656	7/14/2009	MIDMARK M11 ULTRACLAVE STERILIZER	4,096.29	4,096.29	-
1693	8/4/2009	GRASPING FORCEP SHARK TOOTH	699.00	699.00	-
1694	8/4/2009	GRASPING FORCEP SHARK TOOTH	684.00	684.00	-
1700	8/4/2009	LMD 1420 MD MEDICAL GRADE	925.00	925.00	-
1706	8/11/2009	MIDMARK M11 ULTRACLAVE STERILIZER	4,096.16	4,096.16	-
1734	8/28/2009	LIGHT GUIDE 7MM X 3M AUTOCLAVE	710.00	710.00	-
1735	8/28/2009	SURGICAL CART	2,137.58	2,137.58	-
1762	10/29/2009	RONGEUR FORCEPS 8FR	711.00	711.00	-
1778	1/4/2010	LIGHT GUIDE 7MM X 3M AUTOCLAVE	610.00	610.00	-
1793	3/12/2010	GRASPING FORCEP SHARK TOOTH	769.99	769.99	-
1868	9/21/2010	MIDMARK EXAM TABLE	1,144.21	1,144.21	-
1869	9/21/2010	MIDMARK EXAM TABLE	1,144.21	1,144.21	-
1870	9/21/2010	MIDMARK EXAM TABLE	1,144.21	1,144.21	-
2207	2/8/2013	LIGHT GUIDE 7MM X 3M AUTOCLAVE	814.40	814.40	-
2624	6/5/2014	GENERATOR BUGBEE ELECTROSURGICAL	5,524.24	5,524.24	-
2625	6/5/2014	GENERATOR BUGBEE ELECTROSURGICAL	336.02	336.02	-
2863	4/20/2015	MIDMARK POWER PROCEDURE TABLE	9,626.57	9,626.57	-
2962	7/1/2015	HYFREATOR 2000	794.95	794.95	-
3049	9/30/2015	RITTER M11 STERILIZER	3,999.43	3,999.43	-
3069	10/5/2015	MAYO STAND WITH TRAY	1,050.35	1,050.35	-
3100	10/16/2015	FLEXIBLE GRASPING FORCEPS	834.29	834.29	-
3101	10/16/2015	FLEXIBLE GRASPING FORCEPS	834.28	834.28	-
3150	11/10/2015	FLEXIBLE GRASPING FORCEPS	855.25	855.25	-
3293	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3294	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3295	3/22/2016	DELL LATITUDE E5450	1,436.13	1,436.13	-
3324	4/13/2016	FLEXIBLE BIOPSY FORCEPS	880.54	849.08	31.46
3339	5/9/2016	ACCUCOLD REFRIGERATOR	1,819.00	1,801.69	17.31
3539	7/10/2016	HOPKINS RIGID 70 DEGREE SCOPE	1,086.50	1,008.93	77.57
3766	9/2/2016	BARD MAGNUM BIOPSY INSTRUMENT	1,995.95	1,805.89	190.06
3896	1/1/2017	FLEXIBLE CYSTOSCOPE	7,904.70	6,775.44	1,129.26
3897	1/1/2017	RECHARGEABLE BATTERY LIGHT SOURCE 11301DF	863.69	740.34	123.35
3898	1/1/2017	RECHARGEABLE BATTERY LIGHT SOURCE 11301DF	863.69	740.34	123.35
3899	1/1/2017	CHARGING UNIT FOR LIGHT SOURCE 11301DG	846.49	725.58	120.91
3900	1/1/2017	FLEXCYSTO GRASP FORCEP SHARK	803.15	688.44	114.71
3918	2/3/2017	HOPKINS II 30' TELESCOPE	1,113.00	940.75	172.25
4047	7/6/2017	ENOCHS HORIZON TREATMENT TABLE	3,778.56	2,968.90	809.66
4424	7/10/2018	HPLI M632H MFP - UROLOGY	1,688.75	1,519.88	168.87
4642	5/30/2019	HOPKINS 30' RIGID TELESCOPE	1,837.13	940.45	896.68
4643	5/30/2019	HOPKINS 70' RIGID TELESCOPE	1,837.13	940.45	896.68
4644	5/30/2019	TELESCOPE BRIDGE AND SHEATH/OBTURATOR	1,467.10	751.03	716.07
4881	5/27/2022	ENDOSCOPY STAND FOR TELEPACK LIGHT SOURCE/MONITOR	2,173.22	181.10	1,992.12
4882	5/27/2022	ENDOSCOPY STAND FOR TELEPACK LIGHT SOURCE/MONITOR	2,173.21	181.10	1,992.11
4883	5/27/2022	ENDOSCOPY STAND FOR TELEPACK LIGHT SOURCE/MONITOR	2,173.21	181.10	1,992.11
4884	5/27/2022	KARL STORZ TELEPACK + CCU/LIGHT SOURCE/MONITOR	12,318.46	1,026.54	11,291.92
4885	5/27/2022	KARL STORZ TELEPACK + CCU/LIGHT SOURCE/MONITOR	12,318.46	1,026.54	11,291.92
4886	5/27/2022	KARL STORZ TELEPACK + CCU/LIGHT SOURCE/MONITOR	15,368.94	1,280.75	14,088.19
4887	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	16,753.30	1,396.11	15,357.19

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
4888	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	16,753.30	1,396.11	15,357.19
4889	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	16,753.30	1,396.11	15,357.19
4890	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	16,753.30	1,396.11	15,357.19
4891	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	10,786.45	898.87	9,887.58
4893	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	10,786.45	898.87	9,887.58
4894	5/27/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	10,786.45	898.87	9,887.58
4901	8/1/2022	SUMMIT ACCUCOOLD REFRIGERATOR ARS6PV	1,274.00	75.83	1,198.17
4902	8/26/2022	MIDMARK 204 EXAM TABLE	1,680.20	80.01	1,600.19
4903	8/26/2022	MIDMARK 204 EXAM TABLE	1,680.20	80.01	1,600.19
4904	8/26/2022	MIDMARK 204 EXAM TABLE	1,680.21	80.01	1,600.20
4905	8/26/2022	MIDMARK 204 EXAM TABLE	1,680.21	80.01	1,600.20
4906	8/26/2022	MIDMARK 204 EXAM TABLE	1,680.21	80.01	1,600.20
4909	8/25/2022	ENDOSCOPY STAND FOR TELEPACK LIGHT SOURCE/MONITOR	2,173.21	103.49	2,069.72
4910	8/25/2022	ENDOSCOPY STAND FOR TELEPACK LIGHT SOURCE/MONITOR	2,173.21	103.49	2,069.72
4911	8/25/2022	KARL STORZ TELEPACK + CCU/LIGHT SOURCE/MONITOR	10,594.70	504.51	10,090.19
4912	8/25/2022	KARL STORZ TELEPACK + CCU/LIGHT SOURCE/MONITOR	10,594.70	504.51	10,090.19
4918	10/31/2022	KARL STORZ HD FLEXIBLE VIDEO CYSTOSCOPE	10,037.03	238.99	9,798.04
3500	5/31/2016	PORTASCAN 3D BLADDER SCANNER	8,450.00	7,947.01	502.99
4474	10/5/2018	BLADDER PHANTOM	1,050.46	637.80	412.66
4601	7/1/2019	PORTASCAN 3D BLADDER SCANNER	8,565.00	4,282.50	4,282.50
4867	2/18/2022	PORTASCAN 3D BLADDER SCANNER	8,468.34	1,008.14	7,460.20
4897	8/1/2022	PORTASCAN 3D BLADDER SCANNER	9,078.90	540.41	8,538.49
4420	8/22/2018	ANALOGIC BK 3000 ULTRASOUND	137,181.49	84,921.89	52,259.60
4425	9/7/2018	MIM SYMPHONY SOFTWARE FOR FUSION BIOPSY ULTRASOUNDS	31,250.00	19,345.26	11,904.74
3917	2/3/2017	LABORIE GOBY URODYNAMIC SYSTEM	19,488.10	16,472.11	3,015.99
4813	6/29/2021	SONESTA S3 PROCEDURE TABLE	20,617.00	4,417.93	16,199.07
2565	3/6/2014	SONOSITE M-TURBO ULTRASOUND	30,143.96	30,143.96	-
1135	9/28/2006	HOYER PATIENT LIFT	1,023.74	1,023.74	-
3165	11/17/2015	HPLJ M630 MFP - WKONA R'VILLE REGIST	1,807.61	1,807.61	-
3555	7/28/2016	1701 SPEED SCRUBBER	2,198.44	2,015.22	183.22
3561	7/28/2016	ADVANCE ADPHIBIAN CARPET CLEANER	2,069.12	2,069.12	-
3562	7/28/2016	APC SYNNETRA LX 12K VA RA	7,924.81	7,264.44	660.37
3563	7/28/2016	APC SYNNETRA LX RACKMOUNT	1,444.53	1,324.14	120.39
3564	7/28/2016	APC SYNNETRA LX RACKMOUNT	1,444.53	1,324.14	120.39
3566	7/28/2016	AUTOMATIC SHADES CONFERENCE ROOM	1,235.96	1,132.99	102.97
3571	7/28/2016	DELL A-E POWEREDGE R710 SE	1,724.62	1,724.62	-
3572	7/28/2016	DELL A-E POWEREDGE R710 SE	1,724.62	1,724.62	-
3573	7/28/2016	DELL POWER VAULT NX3200 X	1,691.76	1,691.76	-
3574	7/28/2016	DELL POWEREDGE R620 DUAL XEON E5-2640	3,080.36	3,080.36	-
3575	7/28/2016	DELL POWEREDGE R620 DUAL XEON E5-2640	3,080.36	3,080.36	-
3576	7/28/2016	DELL POWEREDGE R620 DUAL XEON E5-2640	3,080.36	3,080.36	-
3585	7/28/2016	FUJITSU 6140Z SCANNER	819.38	819.38	-
3592	7/28/2016	INTEL IS QUAD CORE 120GB 16GB	1,255.04	1,255.04	-
3593	7/28/2016	INTEL IS QUAD CORE DVD BURNER	756.84	756.84	-
3594	7/28/2016	INTEL IS QUAD CORE DVD BURNER	756.84	756.84	-
3595	7/28/2016	INTEL IS QUAD CORE DVD BURNER	756.84	756.84	-
3596	7/28/2016	INTEL IS QUAD CORE DVD BURNER	756.84	756.84	-
3597	7/28/2016	INTEL IS QUAD CORE DVD BURNER	756.84	756.84	-
3598	7/28/2016	INTEL IS QUAD CORE DVD BURNER	756.84	756.84	-
3599	7/28/2016	INTEL IS QUAD CORE DVD BURNER	802.42	802.42	-
3600	7/28/2016	INTEL IS QUAD CORE DVD BURNER	802.42	802.42	-
3601	7/28/2016	INTEL IS QUAD CORE DVD BURNER	802.42	802.42	-
3602	7/28/2016	INTEL IS QUAD CORE DVD BURNER	802.42	802.42	-
3603	7/28/2016	INTEL IS QUAD CORE DVD BURNER	802.42	802.42	-
3604	7/28/2016	INTEL IS QUAD CORE DVD BURNER	802.42	802.42	-
3605	7/28/2016	INTEL IS QUAD CORE DVD BURNER	824.68	824.68	-
3606	7/28/2016	INTEL IS QUAD CORE DVD BURNER	824.68	824.68	-
3607	7/28/2016	INTEL IS QUAD CORE DVD BURNER	824.68	824.68	-
3608	7/28/2016	INTEL IS QUAD CORE DVD BURNER	824.68	824.68	-
3609	7/28/2016	INTEL IS QUAD CORE DVD BURNER	824.68	824.68	-
3610	7/28/2016	INTEL IS QUAD CORE DVD BURNER	824.68	824.68	-
3611	7/28/2016	INTEL IS QUAD CORE DVD BURNER	848.00	848.00	-
3612	7/28/2016	INTEL IS QUAD CORE DVD BURNER	848.00	848.00	-
3613	7/28/2016	INTEL IS QUAD CORE DVD BURNER	848.00	848.00	-
3614	7/28/2016	INTEL IS QUAD CORE DVD BURNER	848.00	848.00	-
3615	7/28/2016	INTEL IS QUAD CORE DVD BURNER	848.00	848.00	-
3616	7/28/2016	INTEL IS QUAD CORE DVD BURNER	848.00	848.00	-
3617	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,122.79	1,122.79	-
3618	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,122.79	1,122.79	-
3619	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,122.79	1,122.79	-
3620	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,122.79	1,122.79	-
3621	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,122.79	1,122.79	-
3622	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,122.79	1,122.79	-
3623	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,237.94	1,237.94	-
3624	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,237.94	1,237.94	-
3625	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,237.94	1,237.94	-
3626	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,237.94	1,237.94	-
3627	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,237.94	1,237.94	-
3628	7/28/2016	INTEL IS QUAD CORE PC 120GB	1,237.94	1,237.94	-
3631	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	919.02	919.02	-
3632	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	919.02	919.02	-
3633	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	919.02	919.02	-
3634	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	919.02	919.02	-
3635	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	938.10	938.10	-
3636	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	938.10	938.10	-
3637	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	938.10	938.10	-
3638	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	938.10	938.10	-
3639	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	938.10	938.10	-
3640	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	938.10	938.10	-
3641	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	986.86	986.86	-
3642	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	986.86	986.86	-
3643	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	986.86	986.86	-
3644	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	986.86	986.86	-
3645	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	986.86	986.86	-
3646	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	986.86	986.86	-
3647	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,019.72	1,019.72	-
3648	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,019.72	1,019.72	-
3649	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,019.72	1,019.72	-
3650	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,019.72	1,019.72	-
3651	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,019.72	1,019.72	-
3652	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,019.72	1,019.72	-
3653	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,046.22	1,046.22	-
3654	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,046.22	1,046.22	-
3655	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,046.22	1,046.22	-
3656	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,046.22	1,046.22	-
3657	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,046.22	1,046.22	-
3658	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,046.22	1,046.22	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
3659	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,071.66	1,071.66	-
3660	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,071.66	1,071.66	-
3661	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,071.66	1,071.66	-
3662	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,071.66	1,071.66	-
3663	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,071.66	1,071.66	-
3664	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,071.66	1,071.66	-
3665	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,103.46	1,103.46	-
3666	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,103.46	1,103.46	-
3667	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,103.46	1,103.46	-
3668	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,103.46	1,103.46	-
3669	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,103.46	1,103.46	-
3670	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD DDR3	1,103.46	1,103.46	-
3671	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	870.26	870.26	-
3672	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	870.26	870.26	-
3673	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	870.26	870.26	-
3674	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	870.26	870.26	-
3675	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	870.26	870.26	-
3676	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	870.26	870.26	-
3677	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	896.76	896.76	-
3678	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	896.76	896.76	-
3679	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	896.76	896.76	-
3680	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	896.76	896.76	-
3681	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	896.76	896.76	-
3682	7/28/2016	INTEL IS QUAD CORE PC 120GB DVD MW8	896.76	896.76	-
3684	7/28/2016	LEVONO LAPTOP	1,460.70	1,460.70	-
3685	7/28/2016	LEVONO LAPTOP	1,460.70	1,460.70	-
3686	7/28/2016	LG 50 LCD FLAT PANEL TV"	1,539.12	1,539.12	-
3687	7/28/2016	MICROSOFT SOFTWARE	2,184.66	2,184.66	-
3688	7/28/2016	MSFT P-72-04219 OPEN WINDOWS SERVER SOFTWARE	1,525.34	1,525.34	-
3701	7/28/2016	SCOUT 9 35 BATTERY SWEEPER"	2,030.96	1,861.73	169.23
3704	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	1,388.72	1,273.00	115.72
3705	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	1,388.72	1,273.00	115.72
3706	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	1,388.72	1,273.00	115.72
3707	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	1,714.33	1,571.50	142.83
3708	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	1,714.33	1,571.50	142.83
3709	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	1,388.72	1,273.00	115.72
3710	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	2,395.45	2,195.85	199.60
3711	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE	2,395.45	2,195.85	199.60
3712	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE - 3	7,186.34	6,587.48	598.86
3713	7/28/2016	SPEC MIDWAY MEDIUM BACK, STRAIGHT LINE - 3	7,186.34	6,587.48	598.86
3718	7/28/2016	STRIVE COMPACT CARPET CLEANER	1,878.32	1,878.32	-
3719	7/28/2016	SUPPLY BASE AND WALL CAB	1,202.04	1,101.88	100.16
3734	8/3/2016	EXAM TABLE	1,257.72	1,182.89	74.83
3743	8/11/2016	HPLI M630 MFP - WKONA MED REC	2,356.75	2,356.75	-
3786	9/12/2016	CAST CUTTER	2,974.82	2,691.54	283.28
3847	11/4/2016	SCANPRO DOCUMENT CAPTURE SOFTWARE	1,300.00	1,300.00	-
3901	1/1/2017	AED PLUS	1,438.48	1,233.00	205.48
3911	1/17/2017	MANITOWOC ICE DISPENSER	4,281.00	3,618.46	662.54
3921	2/17/2017	AED PLUS	1,686.10	1,405.08	281.02
3922	2/17/2017	AED PLUS	1,686.09	1,405.08	281.01
3936	3/9/2017	HPLI FLOW M630 MFP - WKONA ADMIN	3,113.22	3,113.22	-
4014	3/29/2017	HPLI M630 MFP	2,076.74	2,076.74	-
4018	3/10/2017	TIME CLOCK - 15 WKONA	1,150.78	1,150.78	-
4072	5/6/2017	HPLI M630 MFP - WKONA SPECIALTY HAND OFFICE	2,200.96	2,200.96	-
4358	3/2/2015	HPLI M630Z PRINTER - SURGERY SCHEDULING	3,113.20	3,113.20	-
4377	4/12/2018	HPLI M632 MFP - WKONA GLASGOW REGISTRATION	2,092.00	1,987.40	104.60
4406	7/5/2018	AED PLUS DEFIBRILLATOR	1,356.75	872.19	484.56
4435	8/27/2018	XLT-225A SURGICAL HEADLIGHT - DR. SINGER	2,097.00	1,298.14	798.86
4485	5/23/2016	HOSHIZAKI ICE MAKER	2,884.88	2,884.88	-
4506	11/13/2015	HPLI M630h MFP - WKONA RECEPTION	1,807.61	1,807.61	-
4512	2/8/2019	HPLI MFP M630 - WKONA CHECKOUT	1,522.00	1,192.23	329.77
4637	9/9/2019	ULTRACLAVE RITTER M9 AUTOCLAVE	3,636.65	1,731.73	1,904.92
4895	5/24/2022	HP ELITE 800 GO DESKTOP COMPUTER	1,138.20	132.79	1,005.41
4896	5/24/2022	HP ELITE 600 GO DESKTOP COMPUTER	1,055.96	123.21	932.75
3553	7/28/2016	(4) MIDWAY TWO SEATERS WITH ARMS - P.T.	4,466.45	4,094.28	372.17
3556	7/28/2016	2 - 4-CH INT XT COMBO+CART - P.T.	5,502.80	5,044.28	458.52
3557	7/28/2016	3 - MIDWAY THREE SEATERS WITH ARMS - P.T.	4,825.11	4,423.01	402.10
3558	7/28/2016	4-CH INT XT COMBO+CART - 3	2,501.62	2,293.19	208.43
3559	7/28/2016	ABDOMINAL/BACK EXTENSION	785.85	720.40	65.45
3560	7/28/2016	ADP400 TRACTION TABLE	3,135.48	2,874.22	261.26
3565	7/28/2016	AUDIO SYSTEM PT. DEPT	1,079.08	1,079.08	-
3583	7/28/2016	FLUIDO SINGLE EXT/110D	982.74	900.85	81.89
3584	7/28/2016	FREE MOTION DUAL CABLE CROSS	3,296.60	3,021.87	274.73
3588	7/28/2016	HI-LO TRAC PKG, IMPBLU + CASTER	1,433.82	1,314.34	119.48
3590	7/28/2016	HORIZONTAL LEG PRESS QIS 803	1,253.23	1,148.79	104.44
3591	7/28/2016	HYDROCOLLATOR MODEL M-2 - P.T.	824.68	755.95	68.73
3683	7/28/2016	KANGOO MOBILE SUPER MAX RACK - P.T.	1,166.88	1,069.66	97.22
3689	7/28/2016	MULTI HIP W/ASR QIS 8550	764.60	700.89	63.71
3690	7/28/2016	MVP ELITE SHUTTLE SYSTEM - P.T.	4,031.98	3,696.01	335.97
3695	7/28/2016	PRO1000/W ADJ. ARMS & SEAT - 2	1,738.28	1,593.45	144.83
3696	7/28/2016	RECLINING BIKE	1,732.04	1,587.75	144.29
3700	7/28/2016	S-SERIES TREADMILL S-TRX	2,200.56	2,017.21	183.35
3702	7/28/2016	SHUTTLE 2000-1 CLIN PLUS	1,467.49	1,345.19	122.30
3714	7/28/2016	S-SERIES TOTAL BODY S-TBT	764.20	700.51	63.69
3715	7/28/2016	S-SERIES TREADMILL S-TRC - 2	1,945.27	1,783.19	162.08
3716	7/28/2016	STORAGE CABINET PT AREA	791.82	744.70	47.12
3717	7/28/2016	STORAGE CABINET PT AREA	791.82	744.70	47.12
3721	7/28/2016	UCS X-20 HALF RACK WITH WEIGHT STORAGE - P.T.	1,254.55	1,150.00	104.55
3725	7/28/2016	WHITEHALL 12PK HYDROCOLL	872.38	799.71	72.67
3925	3/3/2017	HPLI M604 MFP - PT REG	1,730.37	1,730.37	-
4376	4/20/2018	MATRIX RECLINING CYCLE	2,407.58	1,605.05	802.53
4408	6/20/2018	HPLI M631 MFP - WKONA PT	3,378.79	3,040.92	337.87
4409	7/11/2018	METRON ELITE HI-LOW TABLE - KORT	1,400.09	900.05	500.04
4410	7/11/2018	METRON ELITE HI-LOW TABLE - KORT	1,400.09	900.05	500.04
4440	10/8/2018	BASIC ERGONOMICS FORCE TEST KIT	1,090.86	662.32	428.54
4441	10/1/2018	GRPRO 2.1 GAME READY CONTROL WITH ATTACHMENTS	4,032.70	3,427.80	604.90
4472	11/19/2018	SCIFIT PRO2 EXERCISE BIKE - KORT	4,357.56	2,541.92	1,815.64
4487	1/1/2019	METRON HI-LO TABLES	1,385.37	791.64	593.73
4488	1/1/2019	METRON HI-LO TABLES	1,385.37	791.64	593.73
4489	1/1/2019	METRON HI-LO TABLES	1,385.37	791.64	593.73
4490	1/1/2019	METRON HI-LO TABLES	1,385.37	791.64	593.73
4491	1/1/2019	METRON HI-LO TABLES	1,385.38	791.64	593.74
4508	2/7/2019	METRON ELITE HI-LO TREATMENT TABLE - KORT	1,450.32	811.49	638.83
3480	5/28/2016	MRI SCANNER	328,584.21	309,025.62	19,558.59
3577	7/28/2016	X-RAY - DIGITAL X-RAY EQUIPMENT	9,570.00	8,772.48	797.52
3578	7/28/2016	DRYPX LITE WITH (1) 14X17 FILM DRAWER"	17,557.42	16,094.29	1,463.13
3691	7/28/2016	X-RAY - MXR INTEGRITY 200 FMT RADIOGRAPHIC SYSTEM	28,423.90	26,055.27	2,368.63

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
3722	7/28/2016	X-RAY - VIDAR SIERRA ADVANTAGE FILM DIGITIZER (SCANS X-RAY FILMS)	3,293.42	3,018.98	274.44
3727	7/28/2016	X-RAY - SIEMENS X-RAY EQUIPMENT (3) MULTIX PROS - (3) X-RAY ROOMS	23,497.02	21,538.95	1,958.07
3728	7/28/2016	X-RAY SERVER	866.02	793.88	72.14
3731	8/1/2016	HARVEST LICENSE - WKONA	3,000.00	3,000.00	-
3732	8/1/2016	HARVEST LICENSE - WKONA	3,000.00	3,000.00	-
3733	8/1/2016	HARVEST LICENSE - WKONA	3,000.00	3,000.00	-
4378	4/12/2018	HPLI M632 MFP - WKONA MRI	2,092.00	1,987.40	104.60
4513	1/19/2019	X-RAY TUBE REPLACEMENT FOR MULTIX PRO (LOC. 400-200552)	22,221.14	12,433.26	9,787.88
4514	2/19/2019	X-RAY TUBE REPLACEMENT FOR MULTIX PRO (LOC. 400-200551)	25,003.43	13,692.37	11,311.06
4524	3/23/2019	MULTIX PRO X-RAY REPAIR (400-200546) - BACKPLANE D54	10,315.61	5,526.22	4,789.39
4797	3/10/2021	KONICA AERO DR HD ADVANCED 14X17 X-RAY DETECTOR - ROOM 3	64,662.61	16,935.45	47,727.16
4798	3/10/2021	KONICA AERO DR HD ADVANCED 14X17 X-RAY DETECTOR - ROOM 4	64,662.61	16,935.45	47,727.16
4799	3/10/2021	KONICA AERO DR HD ADVANCED 14X17 X-RAY DETECTOR - ROOM 1	64,662.60	16,935.45	47,727.15
4800	3/10/2021	KONICA AERO DR HD ADVANCED 14X17 X-RAY DETECTOR - GLASGOW	64,662.60	16,935.45	47,727.15
230	5/31/1996	MAMMOGRAPHY PATIENT MANAGER	3,505.50	3,505.50	-
359	7/30/1998	MAMMO PATIENT MANAGER SOFTWARE	615.12	615.12	-
394	12/18/1998	DENSITOMETER X-RITE	2,507.02	2,507.02	-
687	3/8/2002	MOBILE BARRIER	2,789.68	2,789.68	-
897	11/25/2003	PACS SYSTEM	416,442.79	416,442.79	-
1090	4/13/2006	DICOM SINGLE DEVICE LICENSE	4,825.00	4,825.00	-
1210	4/3/2007	DICOM MAMMOGRAPHY/PACS INTERFACE	1,750.00	1,750.00	-
1311	9/5/2007	DICOM SINGLE DEVICE LICENSE - MAMMOGRAPHY INT	3,500.00	3,500.00	-
1505	10/2/2008	BUCKY DIAGNOST FLOOR SYSTEM - MAB	62,980.20	62,980.20	-
1511	10/16/2008	DIGITALDIAGNOST DUAL DETECTOR X-RAY - FLAT FILM ROOM #2	346,765.95	346,765.95	-
1646	7/1/2009	DICOM MODALITY WORKLIST CLIENT	2,500.00	2,500.00	-
1647	7/1/2009	DICOM MODALITY WORKLIST CLIENT	2,500.00	2,500.00	-
1648	7/1/2009	DICOM MODALITY WORKLIST CLIENT	2,500.00	2,500.00	-
1863	9/13/2010	MRI COMPATIBLE SLING TRANSPORT GURNEY	991.32	991.32	-
1951	12/9/2010	TABLE SOUND PRO ULTRASOUND	9,497.86	9,497.86	-
2024	6/13/2011	EASYDIAGNOST ELEV DRF - FLUORO ROOM #3	420,417.50	420,417.50	-
2039	7/1/2011	ELECTRICAL INSTALLATION OF XRAY #1	13,718.45	3,944.04	9,774.41
2047	8/8/2011	DIGITALDIAGNOST SINGLE 2.X - FLAT FILM ROOM #1	199,984.00	199,984.00	-
2048	8/8/2011	DIGITALDIAGNOSTIC SINGLE 2.X INSTALLATION - FLAT FILM ROOM #1	49,996.00	49,996.00	-
2050	8/18/2011	ELECTRICAL INSTALLATION OF X-RAY #2	4,994.49	4,994.49	-
2222	3/15/2013	OMNICARE NETWORK MODULE LICENSE	2,700.00	2,700.00	-
2264	5/9/2013	PULSE OXIMETER WITH CABLE	2,199.25	2,199.25	-
2273	5/15/2013	PACS SOFTWARE PROJECT RUSSELLVILLE & SMITHS GROVE	11,315.00	11,315.00	-
2280	5/28/2013	PICOM ONLINE ADMIN	5,250.00	5,250.00	-
2284	5/29/2013	PACS SOFTWARE PROJECT	9,404.00	9,404.00	-
2365	7/16/2013	X-RAY GENERATOR CABLES AND COLLIMATOR	11,654.15	11,654.15	-
2375	8/1/2013	HP WORKSTATION 2420	1,708.02	1,708.02	-
2378	8/7/2013	POWER CONNECTIONS AND RACEWAY FOR EQUIPMENT	3,187.00	3,187.00	-
2396	8/21/2013	PACS SOFTWARE PROJECT	2,867.00	2,867.00	-
2419	10/31/2013	ORCHARD SOFTWARE HARVEEST LICENSE - X-RAY	2,250.00	2,250.00	-
2434	1/1/2014	BLOOD DRAWING CHAIR	764.25	764.25	-
2509	1/17/2014	PACS PROJECT - MORGANTOWN	2,899.71	2,899.71	-
2552	2/27/2014	PINNACLE X-RAY EQUIP - MORGANTOWN	22,843.00	22,843.00	-
2576	4/11/2014	DELL PRECISION T3610	2,113.97	2,113.97	-
2577	4/11/2014	DELL PRECISION T3610	2,113.97	2,113.97	-
2578	4/11/2014	DELL PRECISION T3610	2,113.97	2,113.97	-
2579	4/11/2014	DELL PRECISION T3610	2,113.98	2,113.98	-
2580	4/11/2014	DELL PRECISION T3610	2,113.97	2,113.97	-
2581	4/11/2014	DELL PRECISION T3610	2,113.97	2,113.97	-
2582	4/11/2014	DELL PRECISION T3610	2,113.97	2,113.97	-
2586	4/11/2014	LEXMARK MX511 de MFP - MRI OFFICE	806.68	806.68	-
2642	7/11/2014	PACS LICENSE - MOBILE ULTRASOUND	2,250.00	2,250.00	-
2643	7/11/2014	PACS LICENSE - WKU	2,250.00	2,250.00	-
2687	9/2/2014	UPGRADE SCIMAGE SOFTWARE	5,150.00	5,150.00	-
2783	1/1/2015	FUJIFILM FCR XL-1 RADIOGRAPH COLLORMATOR	3,250.00	3,250.00	-
2800	1/7/2015	SEAMLESS POWER EXAM TABLE W/ BASE	5,457.50	5,457.50	-
2835	3/20/2015	PINNACLE WIRELESS DR PANEL INTERFACE	31,076.02	31,076.02	-
2836	3/20/2015	UPGRADE TO PACS SYSTEM	18,815.00	18,815.00	-
2898	5/1/2015	X-RAY DEVELOPER	2,549.96	2,549.96	-
2899	5/1/2015	X-RAY MACHINE	5,000.00	5,000.00	-
2906	5/18/2015	HOLOGIC DIMENSIONS TOMO 5000 MAMMOGRAPHY SYSTEM	413,496.00	413,496.00	-
2910	5/25/2015	TOSHIBA AQUILION CT SCANNER	450,500.00	450,500.00	-
2911	5/27/2015	I-STAT DISTRIBUTOR KIT FOR ANALYZER	12,141.01	12,141.01	-
2936	6/5/2015	OMNICARE TRACKING MODULE	10,200.00	10,200.00	-
2938	6/12/2015	3D9 MOTORIZED TRANSDUCER	8,250.00	8,250.00	-
2983	7/24/2015	IU22 ULTRASOUND TRANSDUCER	6,890.00	6,890.00	-
2997	8/5/2015	DICOM SERVER LICENSE - SCIMAGE	6,300.00	6,300.00	-
3012	8/25/2015	PHILIPS TRANSDUCER	6,500.00	6,500.00	-
3013	8/25/2015	PHILIPS TRANSDUCER	6,890.00	6,890.00	-
3234	1/27/2016	MAVIQ SUSPENSION PLATE	1,004.41	992.47	11.94
3235	1/27/2016	OPTIVANTAGE SUSPENSION PLATE FOR INJECTION SYSTEM	20,357.54	20,115.19	242.35
3243	2/3/2016	PINNACLE GENERATOR - DR. PANDEYA	7,018.26	6,934.72	83.54
3279	3/8/2016	TRANSDUCER PROBE	6,913.36	6,748.74	164.62
3307	4/1/2016	DELL OPTIPLEX 790	1,382.02	1,332.65	49.37
3313	4/1/2016	X-RAY SYSTEM - PSP	6,097.88	5,880.13	217.75
3331	4/20/2016	PINNACLE GENERATOR - DR. PANDEYA	7,018.26	6,684.07	334.19
3332	4/20/2016	PINNACLE GENERATOR - PRIMECARE	9,328.00	8,883.80	444.20
3344	5/12/2016	HP Z240 TOWER WORKSTATION	1,686.17	1,686.17	-
3345	5/12/2016	HP Z240 TOWER WORKSTATION	1,686.17	1,686.17	-
3351	5/13/2016	QUANTUM RADIOGRAPHIC TABLE - M'VILLE	5,830.00	5,552.40	277.60
3419	5/23/2016	MEDIA WARMER - READY BOX - NASHVILLE RD	874.67	822.59	52.08
3420	5/23/2016	MRI SLING GURNEY - NASHVILLE RD	1,458.58	1,371.77	86.81
3421	5/23/2016	MRI WHEELCHAIR - NASHVILLE RD	2,419.42	2,275.40	144.02
3431	5/23/2016	USED GE GOLDSEAL LOGIQ S8 ULTRASOUND - NASHVILLE RD	69,988.01	65,822.08	4,165.93
3442	5/28/2016	TOSHIBA AQUILION RXL CT SCANNER - NASHVILLE ROAD	275,600.00	259,195.25	16,404.75
3443	5/28/2016	BALANCE DUE ON CT SCANNER - N.R.	68,900.00	64,798.83	4,101.17
3444	5/28/2016	BALANCE DUE ON TITAN MRI - N.R.	205,576.82	193,340.12	12,236.70
3448	5/28/2016	GRAYSCALE MONITOR	2,862.00	2,691.66	170.34
3449	5/28/2016	GRAYSCALE MONITOR	2,862.00	2,691.66	170.34
3450	5/28/2016	GRAYSCALE MONITOR	2,862.00	2,691.66	170.34
3451	5/28/2016	GRAYSCALE MONITOR	2,862.00	2,691.66	170.34
3452	5/28/2016	GRAYSCALE MONITOR	2,862.00	2,691.66	170.34
3453	5/28/2016	GRAYSCALE MONITOR	2,862.00	2,691.66	170.34
3482	5/28/2016	PHILIPS IU22 ULTRASOUND PROBE - NASHVILLE RD	6,890.00	6,479.91	410.09
3484	5/28/2016	PORTABLE TRANSMISSION DENSITOMETER - NR	1,327.35	1,248.33	79.02
3485	5/28/2016	RADIOLOGY READING MONITOR - N. RD.	10,709.26	10,071.84	637.43
3486	5/28/2016	RADIOLOGY READING MONITOR - N. RD.	10,709.26	10,071.84	637.42
3487	5/28/2016	RADIOLOGY READING STATION - N. RD.	96,050.00	90,332.75	5,717.25
3488	5/28/2016	TOSHIBA VANTAGE TITAN MRI SYSTEM - NASHVILLE ROAD	822,307.30	773,360.43	48,946.87
3502	6/1/2016	MANMMO ACCREDITATION PHANTOM - NR	821.45	772.56	48.89
3522	6/27/2016	DICOM ENTERPRISE - SCIMAGE PACS SITE LICENSE	28,980.00	28,980.00	-
3523	6/27/2016	DICOM LICENSE - QUERY RETRIEVE	3,150.00	3,150.00	-
3530	6/30/2016	SCIMAGE DICOM PACS LICENSE - NASHVILLE RD.	3,150.00	3,150.00	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
3538	7/8/2016	WORKSTATION - NR	12,399.04	12,399.04	-
3756	8/20/2016	BIARIATRIC BLOOD DRAW CHAIR - MRI	874.95	791.61	83.34
3789	9/19/2016	TOSHIBA VANTAGE TITAN 1.5T MRI UPGRADE	621,886.10	555,255.44	66,630.66
3818	10/17/2016	HL7 TRIGGER W/ ALLSCRIPTS, HOLOGIC & PICOM	9,950.00	8,765.49	1,184.51
3858	11/29/2016	MRI KNEE/FOOT/ANKLE COIL	13,658.61	11,869.98	1,788.63
3906	1/12/2017	HPLJ M527 MFP W/TRAYS - XRAY PRECERT	1,731.07	1,731.07	-
4015	3/3/2017	PHILIPS ULTRASOUND TRANSDUCER CS-1	6,890.00	5,741.69	1,148.31
4017	6/15/2017	X-RAY HARVEST CLIENT LICENSE	3,000.00	2,392.85	607.15
4103	8/30/2017	APPLE 12.9 INCH IPAD - WILLGRUBER	1,409.77	1,409.77	-
4123	9/28/2017	ULTRASOUND TRANSDUCER	4,240.00	3,180.03	1,059.97
4124	10/24/2017	VERSADESK SIT-STAND DESK	1,756.40	1,296.43	459.97
4150	6/1/2017	X-RAY EQUIPMENT - OHP LOUISVILLE RD.	31,215.41	24,898.04	6,317.37
4168	6/1/2017	X-RAY EQUIPMENT - OHP NASHVILLE RD.	33,436.49	26,669.58	6,766.91
4184	6/1/2017	X-RAY EQUIPMENT - OHP PEACHTREE	43,693.59	34,850.83	8,842.76
4200	6/1/2017	X-RAY EQUIPMENT - OHP FRANKLIN	57,706.72	46,027.99	11,678.73
4213	10/18/2017	ISTAT BREVIO - BLOOD ANALYZER	11,978.06	8,840.94	3,137.12
4278	11/30/2017	PINNACLE X-RAY UPGRADE FOR OHP X-RAY EQUIPMENT	32,626.80	23,693.28	8,933.52
4298	1/1/2018	CANON CSDI-701C UPGRADE	43,548.74	31,106.25	12,442.49
4317	1/19/2018	PULSE OXIMETER - MRI	1,386.06	973.55	412.51
4359	4/6/2018	PRE-OWNED FUJI XL-2 CR READER W/ FDX CONSOLE - MUNFORDVILLE	3,710.00	2,517.50	1,192.50
4364	4/12/2018	PULSE OXIMETER CABLE - MRI	1,055.00	715.92	339.08
4427	10/4/2018	2009 PHILIPS IU22 ULTRASOUND	5,300.00	3,217.85	2,082.15
4451	3/6/2017	PINNACLE 40K GENERATOR	17,331.00	14,442.52	2,888.48
4458	11/1/2018	CANON AQUILION CT SCANNER	256,015.55	152,390.21	103,625.34
4466	5/8/2015	PHILIPS IU22 ULTRASOUND (FROM PRIMECARE)	50,880.00	50,880.00	-
4467	5/8/2015	TRANSVAGINAL TRANSDUCER	6,360.00	6,360.00	-
4468	9/8/2016	ULTRASOUND REPAIR (FROM PRIMECARE)	7,372.00	6,669.88	702.12
4470	10/29/2018	OPTIVANTAGE VS CT INJECTOR - RED OAK	20,966.54	12,480.08	8,486.46
4496	1/18/2019	ULTRASOUND TABLE W/ STIRRUPS	4,125.00	2,308.05	1,816.95
4500	1/1/2019	PHILIPS C8-4V U/S PROBE	4,770.00	2,725.72	2,044.28
4555	3/27/2019	PHILIPS C8-4V IU22 TRANSDUCER ULTRASOUND PROBE	4,265.92	2,285.32	1,980.60
4559	4/15/2019	INTERNET SETUP - DR. WILLGRUBER	1,898.00	1,423.50	474.50
4591	6/13/2019	PHILIPS L9-3 IU22 ULTRASOUND PROBE	3,842.10	1,966.79	1,875.31
4635	9/24/2019	REPLACE CIRCUIT BOARD / ASSEMBLY KIT - LOUISVILLE ROAD X-RAY	1,949.87	905.29	1,044.58
4639	9/1/2019	NUANCE POWERSCRIBE 360 TRANSCRIPTION SOFTWARE	57,909.94	27,576.17	30,333.77
4640	5/29/2019	NUANCE POWERSCRIBE 360 SCIMAGE INTERFACE	18,950.00	9,023.80	9,926.20
4648	11/10/2014	REFURBISHED GE GOLDEAL LOGIQ S8 ULTRASOUND (FROM DR. SOUTH OFFICE)	69,988.01	69,988.01	-
4649	7/11/2014	PACS LICENSE (FROM DR. SOUTH OFFICE)	2,250.00	2,250.00	-
4686	10/22/2019	GE PROTEUS XRF X-RAY WITH AERO DR. #GEHC00323	104,696.76	47,362.83	57,333.93
4693	1/2/2020	ALLSCRIPTS CONTRACT #337501 - POWERSCRIBE / EHR INTEGRATION	8,072.96	3,459.84	4,613.12
4714	1/31/2020	CLINTON POWER TABLE W/STIRRUPS - ULTRASOUND	2,353.53	980.64	1,372.89
4735	9/4/2020	MANUAL COLLIMATOR WITH INSTALLATION	1,877.25	871.60	1,005.65
4753	9/22/2020	PHILIPS EPIQ DIAGNOSTIC ULTRASOUND SYSTEM	95,823.67	30,800.47	65,023.20
4754	9/22/2020	PHILIPS EPIQ DIAGNOSTIC ULTRASOUND SYSTEM	95,823.68	30,800.49	65,023.19
4756	10/5/2020	OMNIGATE HL7 INTERFACE MODULE - MAMMO	7,200.00	2,314.28	4,885.72
4759	10/5/2020	SELENIA DIMENSIONS 3D PERFORMANCE MAMMO SYSTEM	289,185.00	92,952.32	196,232.68
4760	10/5/2020	DIMENSIONS SOFTWARE/W COMPUTER - MAMMO SERVER UPGRADE	7,043.00	2,263.82	4,779.18
4761	10/5/2020	SECUREVIEW DX/RT WORKSTATION COMPUTER - MAMMO	4,800.00	1,542.87	3,257.13
4762	10/5/2020	BARCO CORONIS 12MP DISPLAY - MAMMO MONITOR	28,800.00	9,257.15	19,542.85
4781	2/10/2021	GE ML6-15-D ULTRASOUND TRANSDUCER PROBE	4,425.50	1,211.75	3,213.75
4784	5/10/2021	AMRAD LX125 USED X-RAY EQUIPMENT	7,000.00	1,666.67	5,333.33
4816	8/27/2021	PHILIPS EPIQ ELITE DIAGNOSTIC ULTRASOUND SYSTEM	95,398.94	18,171.23	77,227.71
4829	10/22/2021	DELL MOBILE PRECISION WORKSTATION S550 CTO - AFTER HOURS RADIOLOGY COVERAGE	1,729.62	403.57	1,326.05
4849	11/10/2021	REPLACEMENT WIRELESS DR PANEL - RED OAK X-RAY	13,864.00	2,310.67	11,553.33
4875	4/28/2022	MACBOOK PRO 16 LAPTOP	2,383.94	317.86	2,066.08
4907	10/6/2022	FDX CONSOLE TECHNOLOGIST PC WORKSTATION	4,655.00	232.75	4,422.25
4924	11/15/2022	MEDINFORMATIX RADIOLOGY INFORMATION SYSTEM	412,526.58	9,822.06	402,704.52
4925	11/15/2022	MEDINFORMATIX RIS - SCIMAGE INTERFACE	20,190.00	480.72	19,709.28
1451	6/2/2008	MITSUBISHI XD470U PROJECTOR - SN 50001174	940.09	940.09	-
1493	8/21/2008	CONFERENCE TABLE	5,884.89	5,884.89	-
4535	4/4/2019	LG 75" 4K SMART TV - 1ST FLR. CONF. ROOM	1,059.76	794.81	264.95
832	10/22/2002	INFOCUS LP280 PROJECTOR	1,533.93	1,533.93	-
3528	6/28/2016	MANITOWOC ICE MACHINE - 3RD FLOOR CONF.	1,998.00	1,912.38	85.62
4536	4/4/2019	LG 75" 4K SMART TV - 3RD FLR. CONF. ROOM	1,059.75	794.81	264.94
2944	6/29/2015	CHAIR - DR. ALLRED	266.54	266.54	-
2947	6/29/2015	DESK - DR. ALLRED	988.01	988.01	-
1672	7/22/2009	36X72 ENGLISH CHERRY DESK- DR. BAKER	1,386.06	1,386.06	-
246	10/22/1996	2 DRAWER LAT FILE	405.45	405.45	-
247	10/22/1996	DESK	599.90	599.90	-
248	10/28/1996	HI-BACK EXEC CHAIR	467.40	467.40	-
1592	4/15/2009	DESK	599.00	599.00	-
208	2/28/1995	OFFICE FURNITURE	850.00	850.00	-
1593	4/15/2009	DESK	599.00	599.00	-
2444	1/1/2014	EXECUTIVE DESK	1,475.31	1,475.31	-
1669	7/20/2009	36X72 CHERRY YEANER DESK- DR. BUCHANAN	1,231.85	1,231.85	-
979	1/20/2005	3 CHAIRS - DR. CASTELLI	1,170.00	1,170.00	-
2646	7/17/2014	CHERRY EXECUTIVE DESK	1,475.68	1,475.68	-
1424	4/17/2008	DESK	867.92	867.92	-
588	5/11/2001	BLACK LEATHER EXEC CHAIR(PREOWNED)	711.00	711.00	-
589	5/11/2001	MEDIUM OAK DESK WITH RETURN	1,082.00	1,082.00	-
501	8/31/2000	MAHOGANY DESK (PREOWNED)	999.00	999.00	-
535	1/2/2001	BLACK EXEC CHAIR (PREOWNED)	639.00	639.00	-
360	8/25/1998	2 - GUEST CHAIRS	318.00	318.00	-
362	8/25/1998	CORNER TABLE	125.00	125.00	-
363	8/25/1998	EXECUTIVE CHAIR	227.00	227.00	-
364	8/25/1998	MEDIUM OAK DESK	830.00	830.00	-
365	8/25/1998	MEDIUM OAK STORAGE CENTER	379.00	379.00	-
404	3/1/1999	CHAIR	559.00	559.00	-
405	3/1/1999	DESK	1,005.50	1,005.50	-
406	3/1/1999	LOVESEAT	459.00	459.00	-
1801	5/7/2010	WRITING DESK	1,300.00	1,300.00	-
325	1/2/1998	BOISE CASCADE BLACK LEATHER CHAIR	543.40	543.40	-
392	11/17/1998	REGENT DESK WITH KEYBOARD	1,005.50	1,005.50	-
244	10/17/1996	5 DRAWER LAT FILE	525.80	525.80	-
590	5/21/2001	MED CHERRY DESK W/ RIGHT RETURN	1,996.00	1,996.00	-
1867	9/17/2010	CHERRY VENEER EXECUTIVE DESK DR. HURT	1,276.36	1,276.36	-
2948	6/29/2015	DESK - DR. J. SINGH	1,397.48	1,397.48	-
186	8/1/1994	DESK	1,114.00	1,114.00	-
193	9/3/1994	GREEN EXECUTIVE CHAIR	489.00	489.00	-
196	9/24/1994	GREEN LOVESEAT	439.00	439.00	-
2637	7/2/2014	DESK - DR. JARBOE	1,397.48	1,397.48	-
2945	6/29/2015	CHAIR - DR. JONES	266.54	266.54	-
145	9/17/1992	MAHOGONEY DESK - PREOWNED - LIN	965.00	965.00	-
150	11/25/1992	MAHOGANY SIDE CHAIRS (2) - PREOWNED - WIERS	550.00	550.00	-
584	5/1/2001	AERON ADJUSTABLE WORK CHAIR	747.93	747.93	-
586	5/3/2001	2 DRAWER CHERRY LATERAL FILE	589.00	589.00	-
882	9/2/2003	OFFICE FURNITURE	213.98	213.98	-

System Number	Acquisition Date	Description	Book Original Cost	Book Accumulated Depreciation	Book Net Book Value
910	3/1/2004	FURNITURE-LOSEKAMP	337.78	337.78	-
923	3/25/2004	TELEVISION STAND	174.90	174.90	-
958	9/20/2004	SOFA - LOSEKAMP	599.95	599.95	-
2946	6/29/2015	CHAIR - DR. LUMBANG	266.54	266.54	-
2949	6/29/2015	DESK - DR. LUMBANG	988.01	988.01	-
1720	8/19/2009	EXECUTIVE DESK	1,275.00	1,275.00	-
345	5/20/1998	2 STACKING FILE CABINETS	441.88	441.88	-
387	11/17/1998	2 - 84 BOOKCASES	506.68	506.68	-
388	11/17/1998	CABINET W/GLASS DOORS	232.14	232.14	-
391	11/17/1998	OAK L-SHAPED DESK	1,406.94	1,406.94	-
828	10/9/2002	HUTCH TOP BOOKSHELF	421.35	421.35	-
167	11/19/1993	2 BUR ARM CHAIR-PREOWNED DAUGHERTY	746.20	746.20	-
169	11/19/1993	GRAY SWIV CHR- PREOWNED DAUGHERTY	423.10	423.10	-
170	11/19/1993	MAH LAT FILE- PREOWNED DAUGHERTY	273.10	273.10	-
171	11/19/1993	MAHOGANY DESK-PREOWNED DAUGHERTY	693.10	693.10	-
2414	9/9/2013	CHERRY DESK	1,029.91	1,029.91	-
1674	7/28/2009	EXECUTIVE DESK	1,166.77	1,166.77	-
2640	7/11/2014	36X72 EXEC. DESK DR NAJMUDDIN	1,475.67	1,475.67	-
480	4/3/2000	2 BOOKCASES	1,198.00	1,198.00	-
1721	8/19/2009	EXECUTIVE DESK	1,575.00	1,575.00	-
1677	7/30/2009	EXECUTIVE DESK	1,166.77	1,166.77	-
148	11/12/1992	DESK/CHAIR	964.60	964.60	-
176	3/21/1994	CHAIR	425.00	425.00	-
187	8/1/1994	DESK	1,439.00	1,439.00	-
192	9/1/1994	BERRY CHROMCRAFT CHAIR	459.95	459.95	-
3526	6/28/2016	DESK	1,058.94	1,013.58	45.36
144	9/17/1992	COMPUTER WORKSTATION	188.95	188.95	-
1627	5/11/2009	NAPA COMPUTER DESK AND RETURN	1,922.42	1,922.42	-
712	6/3/2002	2 BOOKCASES	730.00	730.00	-
713	6/3/2002	2 GUEST CHAIRS	370.00	370.00	-
714	6/3/2002	DESK	641.00	641.00	-
715	6/3/2002	EXECUTIVE CHAIR	199.00	199.00	-
716	6/3/2002	LATERAL FILE CABINET	400.00	400.00	-
376	10/20/1998	CHAIR	539.00	539.00	-
1333	11/1/2007	DESK - DR. SMITH	1,293.43	1,293.43	-
1634	6/16/2009	EXECUTIVE DESK	1,575.00	1,575.00	-
2377	8/5/2013	EXECUTIVE HARDWOOD DESK	1,899.00	1,899.00	-
3525	6/28/2016	DESK	1,058.94	1,013.58	45.36
137	5/18/1992	4 DRAWER FILE	119.95	119.95	-
4091	7/27/2017	DESK - DR. TIWARI	941.28	728.38	212.90
4092	7/27/2017	DESK CHAIR	426.65	330.16	96.49
4093	7/27/2017	2 GUEST CHAIRS	509.86	394.56	115.30
1461	6/16/2008	72 DESK	1,214.07	1,214.07	-
1500	9/16/2008	LEATHER EC EXEC OFFICE CHAIR	881.10	881.10	-
324	1/2/1998	BOISE CASCADE - DESK MED OAK	1,019.15	1,019.15	-
603	7/1/2001	DESK	1,194.00	1,194.00	-
755	8/1/2002	BURGANDY DESK CHAIR	1,270.94	1,270.94	-
			\$ 28,757,872.36	\$ 22,569,283.26	\$ 6,188,589.10

Fill in this information to identify the case:

Debtor name Gilbert, Barbee, Moore & McIlvoy, P.S.C.

United States Bankruptcy Court for the: WESTERN DISTRICT OF KENTUCKY

Case number (if known) 22-10763

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A	Column B
		Amount of claim	Value of collateral that supports this claim
		Do not deduct the value of collateral.	
<p>2.1</p> <p>Alcon Laboratories, Inc.</p> <p><small>Creditor's Name</small></p> <p>6201 S. Freeway Fort Worth, TX 76134</p> <p><small>Creditor's mailing address</small></p> <p><small>Creditor's email address, if known</small></p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien</p> <hr/> <p>Describe the lien UCC Financing Statement</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>Unknown</p>	<p>Unknown</p>
<p>2.2</p> <p>ASD Specialty Healthcare, LLC</p> <p><small>Creditor's Name</small></p> <p>d/b/a Besse Medical 2801 Horace Shepard Drive Dothan, AL 36303</p> <p><small>Creditor's mailing address</small></p> <p><small>Creditor's email address, if known</small></p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property?</p>	<p>Describe debtor's property that is subject to a lien</p> <p>All personal property and other assets</p> <hr/> <p>Describe the lien UCC Financing Statement</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply</p>	<p>\$771,224.16</p>	<p>\$32,525,565.40</p>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.** Case number (if known) **22-10763**
Name

- No
 Yes. Specify each creditor, including this creditor and its relative priority.
- Contingent
 Unliquidated
 Disputed

2.3	Canon Financial Services, Inc.	Describe debtor's property that is subject to a lien Leased equipment	\$51,439.00	Unknown
	<small>Creditor's Name</small>			
	158 Gaither Drive Mount Laurel, NJ 08054			
	<small>Creditor's mailing address</small>	Describe the lien Finance Lease		
	<small>Creditor's email address, if known</small>	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.4	Cisco Systems Capital Corp.	Describe debtor's property that is subject to a lien	Unknown	Unknown
	<small>Creditor's Name</small>			
	1111 Old Eagle School Road Wayne, PA 19087			
	<small>Creditor's mailing address</small>	Describe the lien		
	<small>Creditor's email address, if known</small>	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.5	Echosens North America, Inc.	Describe debtor's property that is subject to a lien Fibroscan ultrasound equipment and accessories	\$78,440.00	\$78,440.00
	<small>Creditor's Name</small>			
	950 Winter St. Waltham, MA 02451			
	<small>Creditor's mailing address</small>	Describe the lien Finance Lease		

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763
Name

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
 Check all that apply
 Contingent
 Unliquidated
 Disputed

Creditor's email address, if known _____

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

<p>2.6 McKesson Corp. <small>Creditor's Name</small></p> <p>401 Mason Road La Vergne, TN 37086 <small>Creditor's mailing address</small></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien _____</p> <p style="text-align: right;">Unknown</p> <p>Describe the lien _____</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p style="text-align: right;">Unknown</p>
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<p>2.7 U.S. Bank Nat'l Assoc <small>Creditor's Name</small></p> <p>500 East Main Street Bowling Green, KY 42101 <small>Creditor's mailing address</small></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien _____</p> <p style="text-align: right;">\$21,682,600.00</p> <p>All real and personal property</p> <p>Describe the lien _____</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p style="text-align: right;">\$57,173,865.40</p>
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Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
Name

Case number (if known) **22-10763**

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$22,583,703.16**

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 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

**BESSE MEDICAL SUPPLY
AMERISOURCEBERGEN
PO BOX 978526
DALLAS, TX 75397-8526**

Line 2.2

**Mark V. Bossi
Thompson Coburn LLP
One US Bank Plaza
Saint Louis, MO 63101**

Line 2.7

Fill in this information to identify the case:

Debtor name Gilbert, Barbee, Moore & McIlvoy, P.S.C.

United States Bankruptcy Court for the: WESTERN DISTRICT OF KENTUCKY

Case number (if known) 22-10763

Check if this is an amended filing

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.

Part 1: List All Creditors with PRIORITY 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.

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	
3.1	Nonpriority creditor's name and mailing address 484 Golden Autumn, LLC c/o Kevin C Brooks 1010 College Street Bowling Green, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities at leased premises</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$8,034.66</u>
3.2	Nonpriority creditor's name and mailing address A-M SYSTEMS PO BOX 850 CARLSBORG, WA 98324 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$435.00</u>
3.3	Nonpriority creditor's name and mailing address AAA SYSTEMS 1101 SHIVE LANE BOWLING GREEN, KY 42103-8032 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>maintenance call</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$377.50</u>
3.4	Nonpriority creditor's name and mailing address AARP UHC Medicare Complete HMO PO Box 30974 Salt Lake City, UT 84130 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$20.65</u>

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.5 Nonpriority creditor's name and mailing address AARP/United Healthcare Payor 36273 PO Box 740819 Atlanta, GA 30374-0819 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175.82
3.6 Nonpriority creditor's name and mailing address ABCO COURIER PO BOX 1112 BOWLING GREEN, KY 42102-1112 Date(s) debt was incurred Dec-22 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: COURIER SERVICES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$123.50
3.7 Nonpriority creditor's name and mailing address ACS DIAGNOSTICS, INC 1 HUGHES IRVINE, CA 92618 Date(s) debt was incurred 12/20/22 - 12/26/22 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: HOLTER SCANNING SERVICE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.00
3.8 Nonpriority creditor's name and mailing address Aetna Better Health of Kentucky (Mcaid) PO Box 982969 EI Paso, TX 79998-9269 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,759.72
3.9 Nonpriority creditor's name and mailing address Aetna CC Payor 60054 PO Box 981106 EI Paso, TX 79998-1106 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,314.09
3.10 Nonpriority creditor's name and mailing address Aetna Medicare PO Box 981106 EI Paso, TX 79998-1106 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20.00
3.11 Nonpriority creditor's name and mailing address Aetna Payor 60054 PO Box 14079 Lexington, KY 40512-4079 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65.16

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.12 Nonpriority creditor's name and mailing address Aetna Senior Supplemental Ins PO Box 14770 Lexington, KY 40512 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$194.08
3.13 Nonpriority creditor's name and mailing address AIRGAS USA, LLC PO BOX 532609 ATLANTA, GA 30353-2609 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: supplies - dry ice Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,989.82
3.14 Nonpriority creditor's name and mailing address ALCON VISION, LLC DALLAS JPMC BANK/LOCKBOX 735843 P O BOX 735843 DALLAS, TX 75373-5843 Date(s) debt was incurred 12/9/2022 : 6/9/22-6/8/23 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: service contract Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$633.02
3.15 Nonpriority creditor's name and mailing address Yakelin Alfaro c/o Brian E. Clare 600 W. Main St., Suite 300 Louisville, KY 40202 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,333,122.00
3.16 Nonpriority creditor's name and mailing address ALK- ABELLO, INC. 7806 SOLUTION CENTER CHICAGO, IL 60677-7806 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,878.00
3.17 Nonpriority creditor's name and mailing address All Savers PO Box 31375 Salt Lake City, UT 84131-0375 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5.00
3.18 Nonpriority creditor's name and mailing address Allergan USA, Inc. 12975 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693-0129 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt supplies - drugs Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,562.60

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763
Name

3.19 Nonpriority creditor's name and mailing address **Alliance Coal**
PO Box 211577
Eagan, MN 55121
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$0.02

3.20 Nonpriority creditor's name and mailing address **Allied Benefit Systems Inc**
PO Box 2417
Chicago, IL 60690-2417
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$48.36

3.21 Nonpriority creditor's name and mailing address **Allied Benefit Systems Inc**
PO Box 909786
Chicago, IL 60690-9786
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$403.89

3.22 Nonpriority creditor's name and mailing address **Allied Universal**
1920 Goldsmith Lane
Louisville, KY 40218
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$125.00

3.23 Nonpriority creditor's name and mailing address **Allscripts, LLC**
24630 NETWORK PLACE
CHICAGO, IL 60673-1246
 Date(s) debt was incurred Oct 2022
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Trade Debt
Computers/Software

Is the claim subject to offset? No Yes

\$214,442.56

3.24 Nonpriority creditor's name and mailing address **Allstate**
PO Box 2874
Clinton, IA 52733
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$50.33

3.25 Nonpriority creditor's name and mailing address **ALSCO**
3101 CHARLOTTE AVE
NASHVILLE, TN 37209
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _

Is the claim subject to offset? No Yes

\$1,958.80

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.26 Nonpriority creditor's name and mailing address ALTERA DIGITAL HEALTH, INC. PO BOX #735183 CHICAGO, IL 60673-5183 Date(s) debt was incurred <u>11/18, 12/2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Computers/Software Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,704.50
3.27 Nonpriority creditor's name and mailing address American Financial Security Life PO Box 14833 Lexington, KY 40512-4833 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.54
3.28 Nonpriority creditor's name and mailing address AMERICAN PAPER & TWINE CO. P O BOX 90348 Nashville, TN 37209 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: supplies - office/janitorial Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,808.34
3.29 Nonpriority creditor's name and mailing address American Proficiency Institute Department 9526 PO Box 30516 LANSING, MI 48909-8016 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,026.00
3.30 Nonpriority creditor's name and mailing address Anthem PO Box 105187 Atlanta, GA 30348-5187 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,693.87
3.31 Nonpriority creditor's name and mailing address Anthem Blue Medicare Access Po Box 105187 Atlanta, GA 30348-5187 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.95
3.32 Nonpriority creditor's name and mailing address Anthem Ky Medicaid PO Box 61010 Virginia Beach, VA 23466-1010 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,472.71

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.33 Nonpriority creditor's name and mailing address AppSalute, Inc. 2210 Goldsmith Lane, Suite 225 LOUISVILLE, KY 40218 Date(s) debt was incurred <u>11/29/2022, no term</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Computers/Software Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,644.52
3.34 Nonpriority creditor's name and mailing address ARTS OF SOUTHERN KENTUCKY PO BOX 748 BOWLING GREEN, KY 42102 Date(s) debt was incurred <u>11/18/2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: PHYSICIANS DINNER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,008.00
3.35 Nonpriority creditor's name and mailing address AS Carriers, Inc. 216 Century St Ste 100 Bowling Green, KY 42101-7577 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.36 Nonpriority creditor's name and mailing address Aspirant 500 N. Hurstbourne Pkwy Suite 100 Louisville, KY 40222 Date(s) debt was incurred <u>Dec 2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Self-Insured Health Plan -- claims paid Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$813,620.53
3.37 Nonpriority creditor's name and mailing address ASR Health Benefits CC PO Box 6392 Grand Rapids, MI 49516-6392 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$56.08
3.38 Nonpriority creditor's name and mailing address AT & T BellSouth 4119 Broadway 8TH Floor San Antonio, TX 78209 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95.00
3.39 Nonpriority creditor's name and mailing address Atlantic Coast Life PO Box 27248 Salt Lake City, UT 84127-0248 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45.57

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.40 Nonpriority creditor's name and mailing address Aultworks Occ Med 4650 Hills and Dales Road Canton, OH 44708 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3.41 Nonpriority creditor's name and mailing address Auto Zone 660 HWY 31 Bypass Bowling Green, KY 42103 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74.83
3.42 Nonpriority creditor's name and mailing address AVANTI PO BOX 825337 PHILADELPHIA, PA 19182 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44.84
3.43 Nonpriority creditor's name and mailing address Avesis Vision Claims Dept P O Box 38300 Phoenix, AZ 85069-8300 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68.00
3.44 Nonpriority creditor's name and mailing address Avotec, Inc. 609 NW Buck Hendry Way Stuart, FL 34994 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.00
3.45 Nonpriority creditor's name and mailing address PRAVIN AVULA, MD PO BOX 399 SMITHS GROVE, KY 42171 Date(s) debt was incurred 22-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: SLEEP EXPENSE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$120.00
3.46 Nonpriority creditor's name and mailing address B & B CLEANING COMPANY, INC. 4681 RUSSELLVILLE RD BOWLING GREEN, KY 42101 Date(s) debt was incurred 9-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Janitorial Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$694.30

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.47 Nonpriority creditor's name and mailing address Bankers Fidelity PO Box 105185 Atlanta, GA 30348-5185 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24.26
3.48 Nonpriority creditor's name and mailing address Bankers Life PO Box 1902 Carmel, IN 46082 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.40
3.49 Nonpriority creditor's name and mailing address Bankers Life and Casualty PO Box 1935 Carmel, IN 46082-1935 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41.56
3.50 Nonpriority creditor's name and mailing address BARREN RIVER UPHOLSTERY INC. 513 EAST 6TH STREET Bowling Green, KY 42101 Date(s) debt was incurred <u>12/21/2022 12/22/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: furniture repair Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,655.30
3.51 Nonpriority creditor's name and mailing address BAYER HEALTHCARE PO BOX 10435 PALATINE, IL 60055-0435 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$119,340.60
3.52 Nonpriority creditor's name and mailing address BECKMAN COULTER INC. DEPT CH 10164 Palatine, IL 60055-0164 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,043.89
3.53 Nonpriority creditor's name and mailing address Becton, Dickinson and Company PO Box 28983 NEW YORK, NY 10087 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,354.27

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C.		Case number (if known) 22-10763	
Name _____			
3.54	Nonpriority creditor's name and mailing address Benefit Administrative Systems, LLC PO Box 2920 Milwaukee, WI 53201-2920 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156.63
3.55	Nonpriority creditor's name and mailing address BEST BUSINESS SYSTEMS 93 PARKER AVENUE P.O. BOX 1500 Bowling Green, KY 42102-1500 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,693.92
3.56	Nonpriority creditor's name and mailing address BIO-RAD LABORATORIES PO BOX 849740 Los Angeles, CA 90084-9740 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,327.06
3.57	Nonpriority creditor's name and mailing address Bioteque America, Inc. 2051 JUNCTION AVENUE SUITE 128 SAN JOSE, CA 95131 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$210.50
3.58	Nonpriority creditor's name and mailing address BK MEDICAL HOLDING CO. INC PO BOX 22035 NEW YORK, NY 10087-2035 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$699.70
3.59	Nonpriority creditor's name and mailing address Blue Cross Blue Shield P O Box 105187 Atlanta, GA 30348-5187 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13.46
3.60	Nonpriority creditor's name and mailing address BLUE RIDGE X-RAY 120 VISTA BOULEVARD ARDEN, NC 28704 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,586.50

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.61 Nonpriority creditor's name and mailing address Blue Shield of Tenn Payor ZBKY40 PO Box 105187 Atlanta, GA 30348-5187 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,088.08
3.62 Nonpriority creditor's name and mailing address BOSTON SCIENTIFIC CORP PO BOX 951653 DALLAS, TX 75395-1653 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$846.15
3.63 Nonpriority creditor's name and mailing address BOWLING GREEN AREA CHAMBER 710 COLLEGE ST BOWLING GREEN, KY 42101 Date(s) debt was incurred <u>10/14/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ADVERTISING Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.00
3.64 Nonpriority creditor's name and mailing address BOWLING GREEN WINLECTRIC CO. 1052 PEDIGO WAY BOWLING GREEN, KY 42103 Date(s) debt was incurred <u>12/22/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: maintenance supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.71
3.65 Nonpriority creditor's name and mailing address BOYD COMPANY DEPT 8326 CAROL STREAM, IL 60122-8326 Date(s) debt was incurred <u>12/24/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: MAITNENANCE/REPAIR Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,055.43
3.66 Nonpriority creditor's name and mailing address BRIGGS HOLDING COMPANY, LLC 331 EASTLAND CT CAVE CITY, KY 42127 Date(s) debt was incurred <u>Dec-22</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: JANITORAL Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.67 Nonpriority creditor's name and mailing address BUECKER ENTERPRISES (BEI) 44 PARK RD FORT WRIGHT, KY 41011 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: RECRUITING CONSULTING FEES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.68 Nonpriority creditor's name and mailing address C R BARD INC. PO BOX 75767 Charlotte, NC 28275 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$413.40
3.69 Nonpriority creditor's name and mailing address C-TECH CONTROLS 33 INDUSTRIAL PARK DR HENDERSONVILLE, TN 37075-2824 Date(s) debt was incurred <u>12/12/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>MAINTENANCE/REPAIR</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$543.00
3.70 Nonpriority creditor's name and mailing address Chrissy Cagle Adx. of Estate of Linda Sowders c/o Jennifer Hall 1103 Colony Drive Elizabethtown, KY 42701 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Pending lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,600.00
3.71 Nonpriority creditor's name and mailing address CALVERT SPRING WATER CO PO BOX 175 SCOTTSVILLE, KY 42164 Date(s) debt was incurred <u>Various Dates</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Water</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$717.06
3.72 Nonpriority creditor's name and mailing address CAMBRIDGE MARKET 830 FAIRVIEW AVE BOWLING GREEN, KY 42101 Date(s) debt was incurred <u>12/27/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Entertainment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$163.24
3.73 Nonpriority creditor's name and mailing address CANCER DIAGNOSTICS, INC PO BOX 748545 ATLANTA, GA 30374-8545 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$151.35
3.74 Nonpriority creditor's name and mailing address CANON MEDICAL SYSTEMS USA, INC P.O. Box 7476 CAROL STREAM, IL 60197 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,600.00

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.75 Nonpriority creditor's name and mailing address Cardinal Health Medical Products and Services PO 730112 DALLAS, TX 75373 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,350.63
3.76 Nonpriority creditor's name and mailing address Cardinal Health 414, LLC Nuclear Pharmacy Services P.O. Box 70609 Chicago, IL 60673-0609 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,948.41
3.77 Nonpriority creditor's name and mailing address CARDIORISK LABORATORIES, INC 9677 SOUTH 700 EAST, SUITE A SANDY, UT 84070 Date(s) debt was incurred <u>11/30/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CIMT reads</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.78 Nonpriority creditor's name and mailing address CARESFIELD LLC DEPT CH 17958 PALATINE, IL 60055-7958 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,891.13
3.79 Nonpriority creditor's name and mailing address CAROLINA DIAGNOSTIC PO BOX 427 CHAPIN, SC 29036 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$704.29
3.80 Nonpriority creditor's name and mailing address CCMSI PO Box 43909 Louisville, KY 40253-0909 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$165.00
3.81 Nonpriority creditor's name and mailing address CDW Government, Inc. 75 Remittance Drive Suite 1515 CHICAGO, IL 60675 Date(s) debt was incurred <u>11/28, 12/5, 12/6/, 12/16/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Computers/Software</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,141.10

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763

3.82 Nonpriority creditor's name and mailing address **CEPHEID**
P O BOX 74007537
CHICAGO, IL 60674-7537
 Date(s) debt was incurred 11/30/2022
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Trade Debt**
Service Agreement

Is the claim subject to offset? No Yes

\$63,764.98

3.83 Nonpriority creditor's name and mailing address **Champva VHA**
PO Box 30750
Tampa, FL 33630-3750
 Date(s) debt was incurred
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$330.04

3.84 Nonpriority creditor's name and mailing address **CHC Med Cntr Health**
PO Box 2920
Clinton, IA 52733-2920
 Date(s) debt was incurred
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$255.65

3.85 Nonpriority creditor's name and mailing address **CHRISTIAN FAMILY RADIO**
PO BOX 539
BOWLING GREEN, KY 42102-0539
 Date(s) debt was incurred Dec-22
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **ADVERTISING**

Is the claim subject to offset? No Yes

\$600.00

3.86 Nonpriority creditor's name and mailing address **Church Mutual**
PO Box 342
Merrill, WI 54452
 Date(s) debt was incurred
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$50.11

3.87 Nonpriority creditor's name and mailing address **Cigna**
PO Box 12047
Chattanooga, TN 37401
 Date(s) debt was incurred
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$100.00

3.88 Nonpriority creditor's name and mailing address **Cigna CC Payor 62308**
PO Box 188061
Chattanooga, TN 37422-8061
 Date(s) debt was incurred
 Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$386.12

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.89 Nonpriority creditor's name and mailing address Cigna CC Payor 62308 PO Box 182223 Chattanooga, TN 37422-7223 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,035.57
3.90 Nonpriority creditor's name and mailing address Cigna CC Payor 62308 PO Box 188004 Chattanooga, TN 37422-8004 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26.80
3.91 Nonpriority creditor's name and mailing address Cigna Healthcare CC PO Box 2546 Sherman, TX 75091-2546 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28.05
3.92 Nonpriority creditor's name and mailing address Cigna Medicare Supplement PO Box 5710 Scranton, PA 18505-5710 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$446.60
3.93 Nonpriority creditor's name and mailing address CINTAS CORPORATION P.O. BOX 630921 CINCINNATI, OH 45263-0921 Date(s) debt was incurred <u>12/20/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Janitorial supplies Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$527.53
3.94 Nonpriority creditor's name and mailing address CINTAS CORPORATION P.O. BOX 630921 CINCINNATI, OH 45263-0921 Date(s) debt was incurred <u>12/28/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Contract Buyout Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,426.00
3.95 Nonpriority creditor's name and mailing address CIOX HEALTH PO BOX 409669 ATLANTA, GA 30384 Date(s) debt was incurred <u>11/25/22 - 12/25/22</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: POSTAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$161.84

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3.96	Nonpriority creditor's name and mailing address CLARK BEVERAGE GROUP, INC KENTUCKY DIVISION PO BOX 3090 BOWLING GREEN, KY 42102-3090 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$632.16
3.97	Nonpriority creditor's name and mailing address CLASSIC CLEAN COMPANY, LLC 44 REBECAH AVE TOMPKINSVILLE, KY 42167 Date(s) debt was incurred <u>12/25/2022, no dates</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Janitorial</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,520.79
3.98	Nonpriority creditor's name and mailing address Clearpath Mutual 9960 Corporate Campus Dr Suite 1400 Louisville, KY 40223 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,202.52
3.99	Nonpriority creditor's name and mailing address CLINIC PHARMACY 201 PARK STREET BOWLING GREEN, KY 42101-1759 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,921.40
3.100	Nonpriority creditor's name and mailing address CMI, INC. P O BOX 896870 CHARLOTTE, NC 28289-6870 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$650.85
3.101	Nonpriority creditor's name and mailing address Coker Group Holdings, LLC ATTN: David Julian, CPA 2400 Lakeview Pkwy, Ste 400 ALPHARETTA, GA 30009 Date(s) debt was incurred <u>NOV + DEC DATES</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>legal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,553.75
3.102	Nonpriority creditor's name and mailing address David & Carolyn Coldwell c/o Dolt Thompson Shepherd & Conway PSC 13800 Lake Point Circle Louisville, KY 40223 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C. Name	22-10763	
3.103 Nonpriority creditor's name and mailing address COLE & MOORE PSC 921 COLLEGE STREET PO BOX 10240 Bowling Green, KY 42102-7240 Date(s) debt was incurred <u>Oct-22</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>legal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,512.50
3.104 Nonpriority creditor's name and mailing address Brianna & Justin Cole c/o Schachter, Hendy & Johnson, PSC 909 Wright's Summit Parkway, Suite 210 Covington, KY 41011 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,034,107.90
3.105 Nonpriority creditor's name and mailing address COLLEGE HEIGHTS HERALD 1906 COLLEGE HEIGHTS BLVD. #11084 BOWLING GREEN, KY 42101-1084 Date(s) debt was incurred <u>12/7/2022, NOV 2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>advertising</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,920.00
3.106 Nonpriority creditor's name and mailing address Colonial Manor Care and Rehab Center 2365 Nashville Rd Bowling Green, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4.90
3.107 Nonpriority creditor's name and mailing address Colonial Penn Life Ins Co PO Box 1935 Carmel, IN 46082 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2.85
3.108 Nonpriority creditor's name and mailing address COMMONWEALTH BROADCASTING PO BOX 457 GLASGOW, KY 42142 Date(s) debt was incurred <u>DEC DATES</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ADVERTISING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,647.00
3.109 Nonpriority creditor's name and mailing address Community Action of Southern KY 921 Beauty Ave Bowling Green, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00

Debtor Name	Case number (if known)	
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3.110 Nonpriority creditor's name and mailing address COMMUNITY WELLNESS TECHNOLOGY INC 1821 S. BASCOM AVE #383 CAMPBELL, CA 95008 Date(s) debt was incurred <u>NOV + DEC</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,232.00
3.111 Nonpriority creditor's name and mailing address Comprehensive Benefits PO Box 14357 Hauppauge, NY 11788-0419 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5.65
3.112 Nonpriority creditor's name and mailing address Comprehensive Health Services INC 8600 Astronaut Blvd Cape Canaveral, FL 32920 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5.00
3.113 Nonpriority creditor's name and mailing address Consociate Group PO Box 1068 Decatur, IL 62525-1068 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,054.74
3.114 Nonpriority creditor's name and mailing address Consolidated Paper Group P.O. BOX 51866 Bowling Green, KY 42102 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$772.68
3.115 Nonpriority creditor's name and mailing address Continental General Insurance Co PO Box 30010 Austin, TX 78755-3010 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24.26
3.116 Nonpriority creditor's name and mailing address Cooper Surgical PO Box 712280 Cincinnati, OH 45271-2280 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,186.90

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Name _____			
3.117	Nonpriority creditor's name and mailing address CORNERSTONE DIAGNOSTICS PO BOX 2279 RUSSELL SPRINGS, KY 42642 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$333.90
3.118	Nonpriority creditor's name and mailing address COST MANAGEMENT SOLUTIONS, INC. 101 WALKER DRIVE P.O. BOX 1557 RUSSELLVILLE, KY 42276 Date(s) debt was incurred <u>12/6, 12/8</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Janitorial supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.78
3.119	Nonpriority creditor's name and mailing address CREDIT BUREAU SYSTEMS PO BOX 9200 PADUCAH, KY 42002 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>COLLECTION FEES + OUTS LABOR</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44,026.55
3.120	Nonpriority creditor's name and mailing address CROWD SOUTH 410 E 10TH AVE BOWLING GREEN, KY 42101 Date(s) debt was incurred <u>Dec-22</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ADVERTISING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,927.30
3.121	Nonpriority creditor's name and mailing address Crystal Springs PO BOX 660579 DALLAS, TX 75266-0579 Date(s) debt was incurred <u>11/9/2022</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>water</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$224.93
3.122	Nonpriority creditor's name and mailing address Custom Medical Specialties Inc PO Box 177 330 EAST MAIN ST Pine Level, NC 27568 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$452.62
3.123	Nonpriority creditor's name and mailing address DAILY NEWS PO BOX 90012 BOWLING GREEN, KY 42101 Date(s) debt was incurred <u>12/4/22 - 12/30/22</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ADVERTISING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,630.00

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Name			
3.124	Nonpriority creditor's name and mailing address DAROB PO BOX 99085 Louisville, KY 40269 Date(s) debt was incurred <u>NOV 2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: MEDICAL WASTE DISPOSAL Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,766.53
3.125	Nonpriority creditor's name and mailing address DC COMMUNICATIONS 520 PROCTOR TRAIL BOWLING GREEN, KY 42101 Date(s) debt was incurred <u>12/19/2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: CABLING Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70.00
3.126	Nonpriority creditor's name and mailing address DISC (DOCUMENT IMAGING SYSTEMS CORP) 249 N. KIRKWOOD RD KIRKWOOD, MO 63122 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,870.45
3.127	Nonpriority creditor's name and mailing address DIXIE PHARMACY 124 N MAIN STREET SMITHS GROVE, KY 42171 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$130.00
3.128	Nonpriority creditor's name and mailing address DJO, LLC P.O. BOX 650777 DALLAS, TX 75265 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,182.64
3.129	Nonpriority creditor's name and mailing address DK INDUSTRIES 215 ELIZABETH ST ELIZABETHTOWN, KY 42701 Date(s) debt was incurred <u>12/28/2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$838.00
3.130	Nonpriority creditor's name and mailing address Doctors Park Associates c/o Bale Realty LLC 205 Norris Court Glasgow, KY 42141 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Utilities at leased premises Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,857.20

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3.131	Nonpriority creditor's name and mailing address Dollar General Rising Solutions PO Box 3083 Milwaukee, WI 53201-3083 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$136.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132	Nonpriority creditor's name and mailing address DR. VIRAG PANDEYA 950 MAIN ST MUNFORDVILLE, KY Date(s) debt was incurred Dec-22 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,352.64 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Landlord Other Operating Expenses (non-utilities) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address Gary & Marketta Dubree c/o Morris & Player 1211 Herr Lane, Suite 205 Louisville, KY 40222 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134	Nonpriority creditor's name and mailing address Alice Duff c/o Gardner Law 5920 Timber Ridge Drive Prospect, KY 40059 Date(s) debt was incurred 7/29/2022 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,310,887.24 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Tort Judgment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135	Nonpriority creditor's name and mailing address Lloyd Dean Duff c/o Gardner Law 5920 Timber Ridge Drive Prospect, KY 40059 Date(s) debt was incurred 7/29/2022 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,000,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Tort Judgment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.136	Nonpriority creditor's name and mailing address DUSA PHARMACEUTICALS, INC PO BOX 21778 NEW YORK, NY 10087-1778 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$18,513.82 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.137	Nonpriority creditor's name and mailing address E3 DIAGNOSTICS ATTN: ACCOUNTS RECEIVABLE 3333 N Kennicott Ave ARLINGTON HEIGHTS, IL 60004 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$585.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.138 Nonpriority creditor's name and mailing address EATON MANUFACTURING CORP P.O. BOX 41706 Memphis, TN 38174-1706 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$595.00
3.139 Nonpriority creditor's name and mailing address EFFECTIVE MAIL MARKETING PO BOX 1135 Bowling Green, KY 42102-1135 Date(s) debt was incurred <u>DEC 2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>POSTAGE METERING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,260.00
3.140 Nonpriority creditor's name and mailing address EFFECTTV PO BOX 415949 BOSTON, MA 02241-5949 Date(s) debt was incurred <u>12/25/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ADVERTISING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$767.00
3.141 Nonpriority creditor's name and mailing address Employers Ins Co PO Box 32036 Lakeland, FL 33802-2036 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$348.96
3.142 Nonpriority creditor's name and mailing address Employers Risk Services PO Box 628 Bowling Green, KY 42102-0628 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4.56
3.143 Nonpriority creditor's name and mailing address Victoria Epley Adx. of Estate of Linda Ross c/o The Simpson Firm 908 State Street Bowling Green, KY 42102-3480 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.144 Nonpriority creditor's name and mailing address eScreen Inc. PO Box 734764 DALLAS, TX 75373-4764 Date(s) debt was incurred <u>Nov-22</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lab tests</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,059.25

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.145 Nonpriority creditor's name and mailing address TONI LYNN EVANS 105 WOODVIEW DR RUSSELLVILLE, KY 42276 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>JANITORIAL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,021.00
3.146 Nonpriority creditor's name and mailing address Express Employment 1649 Scottsville Road Bowling Green, KY 42104 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10.00
3.147 Nonpriority creditor's name and mailing address Eye Med Attn Claims Dept PO Box 8504 Mason, OH 45040-7111 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20.00
3.148 Nonpriority creditor's name and mailing address Farm Bureau Health Plans PO Box 300 Columbia, TN 38403 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3.29
3.149 Nonpriority creditor's name and mailing address Farm Bureau Pip-Auto PO Box 20600 Louisville, KY 40250 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.00
3.150 Nonpriority creditor's name and mailing address Farmer's International PO Box 268993 Oklahoma City, OK 73126 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$734.46
3.151 Nonpriority creditor's name and mailing address FedEx PO Box 371461 Pittsburgh, PA 15250-7461 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>shipping</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$627.66

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.152 Nonpriority creditor's name and mailing address FFF Enterprises, LLC P.O. BOX 840150 Los Angeles, CA 90084-0150 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,060.27
3.153 Nonpriority creditor's name and mailing address FISHER HEALTHCARE 13551 COLLECTIONS CTR DR Chicago, IL 60693 Date(s) debt was incurred _ Last 4 digits of account number 4003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784,603.51
3.154 Nonpriority creditor's name and mailing address Foley Carrier Services LLC 10 New England Business Center Dr Ste 20 Andover, MA 01810 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
3.155 Nonpriority creditor's name and mailing address Foot Management, Inc. 7201 Friendship Road PITTSVILLE, MD 21850 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.00
3.156 Nonpriority creditor's name and mailing address Forethought Life Ins Co PO Box 16500 Clearwater, FL 33766 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26.23
3.157 Nonpriority creditor's name and mailing address Frantz Building Services, Inc. P.O. BOX 2001 OWENSBORO, KY 42302 Date(s) debt was incurred <u>12/01/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Janitorial Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65,229.15
3.158 Nonpriority creditor's name and mailing address Friends of the L&N Depot, Inc. 401 Kentucky Street Bowling Green, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities at leased premises</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,037.12

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.159 Nonpriority creditor's name and mailing address Fringe Benefit Group Inc PO Box 21854 Eagan, MN 55121 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.60
3.160 Nonpriority creditor's name and mailing address GE PRECISION HEALTHCARE LLC P.O. BOX 96483 Chicago, IL 60693 Date(s) debt was incurred Dec-22 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: maintenance contracts Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,715.84
3.161 Nonpriority creditor's name and mailing address Genzyme 62665 Collections Center Dr CHICAGO, IL 60693-0626 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,300.70
3.162 Nonpriority creditor's name and mailing address GEORGE TIEMANN & COMPANY 25 PLANT AVENUE HAUPPAUGE, NY 11788 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102.36
3.163 Nonpriority creditor's name and mailing address GHI Payor 13551 PO Box 3000 New York, NY 10116-3000 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2.68
3.164 Nonpriority creditor's name and mailing address Glaxosmithkline Pharmaceutical P.O. Box 740415 Atlanta, GA 30374-0415 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160,771.58
3.165 Nonpriority creditor's name and mailing address GLOBAL RX MANAGEMENT LIMITED SUITE #819 1321 UPLAND DR. HOUSTON, TX 77043 Date(s) debt was incurred 12/1/22 - 12/15/22 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: prescriptions Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,798.77

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763
 Name _____

3.166 Nonpriority creditor's name and mailing address **GPM Life**
PO Box 2679
Omaha, NE 68103-2679
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$2.99**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment
 Is the claim subject to offset? No Yes

3.167 Nonpriority creditor's name and mailing address **Graham Packaging Company**
496 Central Ave
Bowling Green, KY 42101
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$25.00**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment
 Is the claim subject to offset? No Yes

3.168 Nonpriority creditor's name and mailing address **GREEN RIVER SCRUBS & UNIFORMS**
900 FAIRFIEW
SUITE 2
BOWLING GREEN, KY 42101
 Date(s) debt was incurred NOV + DEC DATES
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$4,071.20**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: UNIFORMS
 Is the claim subject to offset? No Yes

3.169 Nonpriority creditor's name and mailing address **Greenwood Nursing & Rehab Center**
5079 Scottsville Rd
Bowling Green, KY 42102
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$4.01**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment
 Is the claim subject to offset? No Yes

3.170 Nonpriority creditor's name and mailing address **GREER LABORATORIES, INC.**
PO BOX 603081
CHARLOTTE, NC 28260-3081
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$9,455.97**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.171 Nonpriority creditor's name and mailing address **Ground Effects**
4505 Rhodes Drive
N8E 5R8
Windsor, ON
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$55.00**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment
 Is the claim subject to offset? No Yes

3.172 Nonpriority creditor's name and mailing address **Guerbet LLC**
DEPT 3917
CAROL STREAM, IL 60132
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$10,637.74**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.173 Nonpriority creditor's name and mailing address H2 HEALTH PO BOX 932184 Atlanta, GA 31193-2184 Date(s) debt was incurred <u>DEC'2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74,413.28
3.174 Nonpriority creditor's name and mailing address Hall's Parking Lot Sweeping 635 Newberry Street Bowling Green, KY 42103 Date(s) debt was incurred <u>Qtrly , no dates</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>parking lot sweeping service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,182.52
3.175 Nonpriority creditor's name and mailing address Health Net(sec ins) PO Box 14702 Lexington, KY 40512-4702 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24.52
3.176 Nonpriority creditor's name and mailing address Henry Schein, Inc. Dept. CH 10241 Palatine, IL 60055-0241 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63,691.77
3.177 Nonpriority creditor's name and mailing address Highland Couriers P.O. Box 2213 GLASGOW, KY 42142 Date(s) debt was incurred <u>11/28 - 12/25/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>courier service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,205.00
3.178 Nonpriority creditor's name and mailing address Hill Manufacturing Company Inc 1500 Jonesboro Road SE ATLANTA, GA 30315 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.69
3.179 Nonpriority creditor's name and mailing address HILLCREST CREDIT AGENCY PO BOX 2220 Bowling Green, KY 42102 Date(s) debt was incurred <u>Dec-22</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>COLLECTION FEES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,672.72

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.180 Nonpriority creditor's name and mailing address Hillrom P.O. Box 5059 WHITE PLAINS, NY 10602 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,515.53
3.181 Nonpriority creditor's name and mailing address Holiday Inn Plaza 1021 Wilkinson Trace Bowling Green, KY 42103 Date(s) debt was incurred <u>12/09/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,656.20
3.182 Nonpriority creditor's name and mailing address Hughes & Coleman PO Box 10120 Bowling Green, KY 42102 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5.00
3.183 Nonpriority creditor's name and mailing address Humana PO Box 14609 Lexington, KY 40512-4609 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156.71
3.184 Nonpriority creditor's name and mailing address Humana Medicare PYR 61101 PO Box 14601 Lexington, KY 40512-4601 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,067.95
3.185 Nonpriority creditor's name and mailing address Humana CC Payor 61101 PO Box 14601 Lexington, KY 40512-4601 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,909.06
3.186 Nonpriority creditor's name and mailing address Humana Medicaid Healthy Horizons PO Box 14601 Lexington, KY 40512-4601 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,946.19

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C.		Case number (if known) 22-10763
3.187	Nonpriority creditor's name and mailing address IAFAX 16575 SW 72ND AVE PORTLAND, OR 97224 Date(s) debt was incurred <u>12/10/22 - 01/09/23</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$4,502.43
3.188	Nonpriority creditor's name and mailing address ICU Medical, Inc. PO Box 848908 LOS ANGELES, CA 90084-8908 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$13,291.51
3.189	Nonpriority creditor's name and mailing address Imaging Specialists, PLLC Attn: Teresa Fann 750 OLD HICKORY BLVD STE 1-260 BRENTWOOD, TN 37027 Date(s) debt was incurred <u>Nov-22</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>MRI reads</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$66,920.00
3.190	Nonpriority creditor's name and mailing address India Oven 1755 Scottsville Rd. Ste 2 BOWLING GREEN, KY 42104 Date(s) debt was incurred <u>12/9/2022</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Entertainment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$10,576.00
3.191	Nonpriority creditor's name and mailing address INFUSYSTEM PO BOX 734370 CHICAGO, IL 60673-4355 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>AMBULATORY PUMP SVC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,477.64
3.192	Nonpriority creditor's name and mailing address INNOVATIVE CONCEPTS 2804 EWING BEND DR BOWLING GREEN, KY 42103 Date(s) debt was incurred <u>12/12/22 - 01/06/22</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>JANITORIAL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$7,025.68
3.193	Nonpriority creditor's name and mailing address INTELLISUITE TECHNOLOGIES, INC 1100 E. WOODFIELD ROAD STE 100 SCHAUMBURG, IL 60173-5167 Date(s) debt was incurred <u>11/27/22 - 12/03/22</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>IT services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$11,440.00

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C.		Case number (if known) 22-10763	
Name			
3.194	Nonpriority creditor's name and mailing address INTERSTATE IMAGING P.O. BOX 144 EVANSVILLE, IN 47701 Date(s) debt was incurred <u>Inv 12/1/2022, no term</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>maintenance contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,565.00</u>
3.195	Nonpriority creditor's name and mailing address INVENTORY OPTIMIZATION SOLUTIONS PO BOX 842175 DALLAS, TX 75284-2175 Date(s) debt was incurred <u>Dec-22</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PURCHASING SOFTWARE</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,475.00</u>
3.196	Nonpriority creditor's name and mailing address Iscreen 748 WALNUT KNOLL LN STE1 CORDOVA, TN 38018 Date(s) debt was incurred <u>Dec-22</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>IMAGE ANALYSIS SVC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,516.90</u>
3.197	Nonpriority creditor's name and mailing address IZI MEDICAL PRODUCTS, LLC PO BOX 83270 CHICAGO, IL 60691-0270 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$267.05</u>
3.198	Nonpriority creditor's name and mailing address J&J Healthcare Systems, Inc. PO Box 406663 Atlanta, GA 30384-6663 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$49,055.00</u>
3.199	Nonpriority creditor's name and mailing address JEAM 619 MARBLEGATE CIRCLE ALVATON, KY 42122 Date(s) debt was incurred <u>DECEMBER DATES</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EMG READS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$35,615.00</u>
3.200	Nonpriority creditor's name and mailing address Eric & Allison Jenkins c/o Dolt Thompson Shepherd & Conway PSC 13800 Lake Point Circle Louisville, KY 40223 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$32,784,354.70</u>

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.201 Nonpriority creditor's name and mailing address John Conti PO BOX 32189 LOUISVILLE, KY 40232 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$537.23
3.202 Nonpriority creditor's name and mailing address Jubilant HollisterStier LLC 14110 Collections Center Drive CHICAGO, IL 60693-0141 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,764.58
3.203 Nonpriority creditor's name and mailing address JULIUS ZORN, INC. P O BOX 1088 CUYAHOGA FALLS, OH 44223 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$103.75
3.204 Nonpriority creditor's name and mailing address KACO PO Box 436499 Louisville, KY 40253-6499 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$129.54
3.205 Nonpriority creditor's name and mailing address Karl Storz Endoscopy-America FILE NO. 53514 LOS ANGELES, CA 90074-3514 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,870.19
3.206 Nonpriority creditor's name and mailing address KEMI - ATTN:Claims PO Box 4208 Clinton, IA 52733-4208 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55.08
3.207 Nonpriority creditor's name and mailing address Krystal Kendall 19192 Pleasant Ridge Church Road Adolphus, KY 42120 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.208 Nonpriority creditor's name and mailing address KENTUCKIANA URODYNAMICS PLLC 4018 Druid Hills Rd LOUISVILLE, KY 40207 Date(s) debt was incurred <u>12/14/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Urodynamic Study</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
3.209 Nonpriority creditor's name and mailing address Kentucky Farm Bureau PO Box 20500 Louisville, KY 40250-0500 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$534.00
3.210 Nonpriority creditor's name and mailing address KENTUCKY STATE TREASURER DEPARTMENT OF HOUSING ELEVATOR INSPECTION 500 MERO ST., 1ST FLOOR FRANKFORT, KY 40601-1987 Date(s) debt was incurred <u>12/7/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>elevator inspection + xray tube</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$491.25
3.211 Nonpriority creditor's name and mailing address Key Risk PO Box 14817 Lexington, KY 40512-4817 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$366.43
3.212 Nonpriority creditor's name and mailing address KLC C/O Equinan PO Box 14880 Lexington, KY 40512 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$272.59
3.213 Nonpriority creditor's name and mailing address KNIGHTS MECHANICAL 4250 LEITCHFIELD RD CECILIA, KY 42724 Date(s) debt was incurred <u>12/19/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Maint/Repair</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,729.15
3.214 Nonpriority creditor's name and mailing address KONE, INC. P.O BOX 734874 CHICAGO, IL 60673-4874 Date(s) debt was incurred <u>12/1/2022 - 2/28/2023</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Elevator maintenance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$439.99

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Name		Case number (if known) 22-10763
3.215	Nonpriority creditor's name and mailing address KY Anthem Medicare MedibblueDualAdv HMO PO Box 105187 Atlanta, GA 30348-5187 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$304.12 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.216	Nonpriority creditor's name and mailing address KY Farm Bureau Pip Unit-Auto PO Box 20600 Louisville, KY 40250-0600 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217	Nonpriority creditor's name and mailing address LAB CORP OF AMERICA HOLDINGS PO BOX 12140 Burlington, NC 27216-2140 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$34,959.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.218	Nonpriority creditor's name and mailing address Laborie Medical Tech PO BOX 734615 CHICAGO, IL 60673-4615 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,092.44 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.219	Nonpriority creditor's name and mailing address LANGUAGE LINE SERVICES PO BOX 202564 DALLAS, TX 75320-2564 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,018.44 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.220	Nonpriority creditor's name and mailing address David Lariscy, MD 154 Chesapeake Harbor Blvd Hendersonville, TN 37075 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$36,348.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Employee 4Q productivity bonus in excess of 507(a)(4) cap Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.221	Nonpriority creditor's name and mailing address LEICA MICROSYSTEMS 14008 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$101.66 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.222 Nonpriority creditor's name and mailing address Leukemia & Lymphoma Society PO Box 12268 Newport News, VA 23612 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61.43
3.223 Nonpriority creditor's name and mailing address LIBERTY IMAGING 3021 Nashville Road BOWLING GREEN, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,651.82
3.224 Nonpriority creditor's name and mailing address Liberty Mutual PO Box 7203 London, KY 40742 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$119.00
3.225 Nonpriority creditor's name and mailing address LINCOLN DIAGNOSTICS P.O. BOX 1128 Decatur, IL 62525 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,807.97
3.226 Nonpriority creditor's name and mailing address Logan Aluminum COVID PO Box 3000 Russellville, KY 42276-3000 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.30
3.227 Nonpriority creditor's name and mailing address Loomis Benefits PO Box 13668 Reading, PA 19612-3814 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83.85
3.228 Nonpriority creditor's name and mailing address LOWES CREDIT CARD PO BOX 530954 ATLANTA, GA 30353-0954 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$863.03

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.229 Nonpriority creditor's name and mailing address Lucent Health PO Box 1984 Nashville, TN 37202-1984 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$492.99
3.230 Nonpriority creditor's name and mailing address LYNN MEDICAL P.O. Box 930459 WIXOM, MI 48393-0459 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$794.55
3.231 Nonpriority creditor's name and mailing address M & L Technical Systems, LLC 6060 Scottsville Road BOWLING GREEN, KY 42104 Date(s) debt was incurred <u>11/29/2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Annual Fire Alarm Inspection Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,120.00
3.232 Nonpriority creditor's name and mailing address Mail Handlers Benefit Plan Payor 62413 PO BOX 8402 London, KY 40742-8402 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48.82
3.233 Nonpriority creditor's name and mailing address Manhattan Life Ins Company 10777 North West Freeway Ste 600 Houston, TX 77092 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3.65
3.234 Nonpriority creditor's name and mailing address Jerrilyn McAdoo 681 Amber White Road Bowling Green, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.235 Nonpriority creditor's name and mailing address Lindsay McGehee, APRN 2450 Rabbit Ridge Road Elkton, KY 42220 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Employee 4Q productivity bonus in excess of 507(a)(4) cap Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,205.16

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.236 Nonpriority creditor's name and mailing address McGregor & Associates, Inc 997 Governors Ln Ste 175 Lexington, KY 40513-1185 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$123.44
3.237 Nonpriority creditor's name and mailing address McKESSON MEDICAL SURGICAL P.O. BOX 933027 ATLANTA, GA 31193-3027 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$148,637.89
3.238 Nonpriority creditor's name and mailing address MCKESSON SPECIALTY 15212 Collections Center Drive CHICAGO, IL 60693 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,936,555.67
3.239 Nonpriority creditor's name and mailing address Med Ben CC PO Box 1099 Newark, OH 43058-1099 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,361.51
3.240 Nonpriority creditor's name and mailing address Medicaid Unisys Corporation PO BOX 2101 Frankfort, KY 40602-2101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,079.39
3.241 Nonpriority creditor's name and mailing address Medicare ADMINASTAR OF KY 1 Cameron Hill Cir Ste 61 Chattanooga, TN 37402-0061 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,948.57
3.242 Nonpriority creditor's name and mailing address Medicare Jurisdiction B DME PO Box 20007 Nashville, TN 37202 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11.57

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.243 Nonpriority creditor's name and mailing address Medicare Supplement PO Box 10858 Clearwater, FL 33757-8858 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66.47
3.244 Nonpriority creditor's name and mailing address Medico Insurance Company PO Box 21660 Eagan, MN 55121 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$127.55
3.245 Nonpriority creditor's name and mailing address Medline Industries, Inc. P.O. Box 382075 Pittsburgh, PA 15251-8075 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,596.45
3.246 Nonpriority creditor's name and mailing address MERCEDES MEDICAL P.O. BOX 850001 ORLANDO, FL 32885-0123 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$332.95
3.247 Nonpriority creditor's name and mailing address MERCK SHARP AND DOHME CORP P.O. BOX 5254 CAROL STREAM, IL 60197-5254 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$143,180.33
3.248 Nonpriority creditor's name and mailing address METHAPHARM INC PO BOX 749512 ATLANTA, GA 30374-9512 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133.50
3.249 Nonpriority creditor's name and mailing address MODIO HEALTH, INC 2228 W GREAT NECK RD SUITE 205 VIRGINIA BEACH, VA 23451 Date(s) debt was incurred 22-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$950.00

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763
 Name

3.250 Nonpriority creditor's name and mailing address **Ann Mondardo, MD** **2113 E. Lincoln Ave.** **Royal Oak, MI 48067** **\$40,000.00**
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Physician signing bonus**
 Is the claim subject to offset? No Yes

3.251 Nonpriority creditor's name and mailing address **MOSAIC MEDICAL LLC** **10 GLEN LAKE PARKWAY** **SUITE 130** **ATLANTA, GA 30328** **\$345.55**
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.252 Nonpriority creditor's name and mailing address **MRIEQUIP.COM** **6248 Bittersweet Lane** **NISSWA, MN 56468** **\$139.41**
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.253 Nonpriority creditor's name and mailing address **Mutual Of Omaha** **PO Box 3300** **Mutual of Omaha Plaza** **Omaha, NE 68103-0300** **\$39.12**
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Insurance Overpayment**
 Is the claim subject to offset? No Yes

3.254 Nonpriority creditor's name and mailing address **MXR IMAGING** **4909 MURPHY CANYON RD** **SUITE 120** **SAN DIEGO, CA 92123** **\$9,010.00**
 Date(s) debt was incurred 22-Mar
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **service contract**
 Is the claim subject to offset? No Yes

3.255 Nonpriority creditor's name and mailing address **NALC Health Benefit Plan** **PO Box 188004** **Chattanooga, TN 37422** **\$3.24**
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Insurance Overpayment**
 Is the claim subject to offset? No Yes

3.256 Nonpriority creditor's name and mailing address **National General Accident & Health** **PO Box 3252** **Milwaukee, WI 53201-3252** **\$4.64**
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Insurance Overpayment**
 Is the claim subject to offset? No Yes

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763
Name

3.257 Nonpriority creditor's name and mailing address **National Guardian Life Ins Co**
PO Box 27248
Salt Lake City, UT 84127-0248
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$6.80

3.258 Nonpriority creditor's name and mailing address **NATIONAL TOXICOLOGY SPECIALISTS, INC.**
1425 ELM HILL PIKE
NASHVILLE, TN 37210
 Date(s) debt was incurred 22-Nov
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **drug screens**

Is the claim subject to offset? No Yes

\$5,726.00

3.259 Nonpriority creditor's name and mailing address **Nationwide Insurance**
PO Box 4113
Clinton, IA 52733-4112
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Insurance Overpayment**

Is the claim subject to offset? No Yes

\$61.95

3.260 Nonpriority creditor's name and mailing address **NATUS MEDICAL INC.**
PO BOX 3604
CAROL STREAM, IL 60132-3604
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _

Is the claim subject to offset? No Yes

\$305.28

3.261 Nonpriority creditor's name and mailing address **NEAL TURNER REALTY**
1401 SCOTTSVILLE RD
Bowling Green, KY 42104
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **PROPERTY ANALYSIS**

Is the claim subject to offset? No Yes

\$500.00

3.262 Nonpriority creditor's name and mailing address **NEW COVENANT CLEANERS INC**
P.O. BOX 983
Glasgow, KY 42142
 Date(s) debt was incurred 22-Dec
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: **Janitorial**

Is the claim subject to offset? No Yes

\$2,106.32

3.263 Nonpriority creditor's name and mailing address **NEWCOMER SUPPLY, INC.**
2505 PARVIEW ROAD
MIDDLETON, WI 53562
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _

Is the claim subject to offset? No Yes

\$60.10

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.264 Nonpriority creditor's name and mailing address Michelle Nordike c/o Dan F. Partin, Esq. 424 Lewis Hargett Circle Suite 250 Lexington, KY 40503 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,193,350.10
3.265 Nonpriority creditor's name and mailing address NORTHERN KY SERVICES FOR THE DEAF PO BOX 121318 COVINGTON, KY 41012-1318 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>INTERPRETING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$357.50
3.266 Nonpriority creditor's name and mailing address NORTON CHILDREN'S HOSPITAL FOUNDATION ATTN: DANA MATUKAS P O BOX 50714 BOWLING GREEN, KY 42102 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.267 Nonpriority creditor's name and mailing address NOVARIS 901 DOVE STREET SUITE 210 NEWPORT BEACH, CA 92660 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SUBSCRIPTION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,530.98
3.268 Nonpriority creditor's name and mailing address NUANCE PO BOX 2561 Carol Stream, IL 60132-2561 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SOFTWARE/LICENSE SUBSCRIPTION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,388.94
3.269 Nonpriority creditor's name and mailing address NYX-RCM PARTNERS PO BOX 983 GORHAM, ME 04038 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$114,750.00
3.270 Nonpriority creditor's name and mailing address OASIS COMPUTER SOLUTIONS 9401 WILLIAMSBURG PLAZA SUITE 101 LOUISVILLE, KY 40222 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SAGE SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$107.50

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C. Name	22-10763	
3.271 Nonpriority creditor's name and mailing address Office Depot PO Box 633301 CINCINNATI, OH 45263-3301 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,499.05
3.272 Nonpriority creditor's name and mailing address Office Resources, INC PO BOX 43339 LOUISVILLE, KY 40253 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$291.92
3.273 Nonpriority creditor's name and mailing address OHIO COUNTY HOSPITAL 1211 MAIN STREET HARTFORD, KY 42347-1619 Date(s) debt was incurred <u>Nov-Dec 2022</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>RENT/PERSONNEL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,438.26
3.274 Nonpriority creditor's name and mailing address ORIGIN HEALTHCARE SOLUTIONS (PRECISION B PO BOX 83445 WOBURN, MA 01813-3445 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SOFTWARE USAGE MONTHLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,226.00
3.275 Nonpriority creditor's name and mailing address Palmetto GBA Railroad Medicare PO BOX 10066 Augusta, GA 30999-0001 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24.26
3.276 Nonpriority creditor's name and mailing address Virag Pandeya, MD 950 Main Street Munfordville, KY 42765 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities and other expenses at leased premises</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,197.74
3.277 Nonpriority creditor's name and mailing address PARAGARD DIRECT 12601 COLLECTION CENTER DR CHICAGO, IL 60693 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,649.50

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.278 Nonpriority creditor's name and mailing address Paramount Care, INC PO Box 497 Toledo, OH 43697-0497 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22.45
3.279 Nonpriority creditor's name and mailing address PARSON'S LOCKSMITH 2504 RUSSELLVILLE RD Bowling Green, KY 42101 Date(s) debt was incurred 22-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LOCKSET Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$577.00
3.280 Nonpriority creditor's name and mailing address Passport Medicaid by Molina Healthcare PO Box 36090 Louisville, KY 40233-6090 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,183.14
3.281 Nonpriority creditor's name and mailing address Patient Advocate Foundation 421 Butler Farm Rd Hampton, VA 23666 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$109.39
3.282 Nonpriority creditor's name and mailing address PENNYRILE RADIOLOGY, PSC 215 W 17TH STREET Hopkinsville, KY 42240 Date(s) debt was incurred DEC 2022 Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERPRETATION SERVICES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,456.28
3.283 Nonpriority creditor's name and mailing address PERFECT PROMOTIONS 6990 BUDDY MILLER DR ALVATON, KY 42122 Date(s) debt was incurred 22-Nov Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: promotional items Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,079.21
3.284 Nonpriority creditor's name and mailing address PERFORMANCE HEALTH PO BOX 93040 CHICAGO, IL 60673-3040 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$828.60

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.285 Nonpriority creditor's name and mailing address PFIZER, INC. P.O. BOX 100539 ATLANTA, GA 30384-0539 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160,047.98
3.286 Nonpriority creditor's name and mailing address PHAMILY (JAAN HEALTH, INC) 10921 REED HARTMAN HIGHWAY SUITE 121 CINCINNATI, OH 45242 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,600.00
3.287 Nonpriority creditor's name and mailing address PHILIPS HEALTHCARE PO BOX 100355 Atlanta, GA 30384-0355 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Agreement Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,265.30
3.288 Nonpriority creditor's name and mailing address PHILIPS RS NORTH AMERICA LLC P O BOX 405740 ATLANTA, GA 30384-5740 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,740.00
3.289 Nonpriority creditor's name and mailing address Plum Tree Educational Services 436 Plum Springs Rd Bowling Green, KY 42101 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
3.290 Nonpriority creditor's name and mailing address Pohl, Kiser & Aubrey PSC 11901 Brinley Ave Louisville, KY 40243 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26.25
3.291 Nonpriority creditor's name and mailing address PRECISION DYNAMICS CORP (PDC) PO BOX 71549 CHICAGO, IL 60694-1995 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$216.06

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C. Case number (if known) 22-10763
Name

3.292 Nonpriority creditor's name and mailing address **Precision Strip Inc**
86 South Ohio Street
Minster, OH 45865
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$50.00

3.293 Nonpriority creditor's name and mailing address **Premier Access Inc**
PO Box 1468
Arlington, TX 76004-1468
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$19.34

3.294 Nonpriority creditor's name and mailing address **Priority Healthcare Dist.**
DBA CuraScript Dist
P.O. Box 978510
DALLAS, TX 75397-8510
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _

Is the claim subject to offset? No Yes

\$22,419.41

3.295 Nonpriority creditor's name and mailing address **PYE-BARKER FIRE SAFETY**
PO BOX 735358
DALLAS, TX 75373-5358
 Date(s) debt was incurred 22-Dec
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: FIRE MAINT

Is the claim subject to offset? No Yes

\$776.92

3.296 Nonpriority creditor's name and mailing address **Quest Diagnostics**
1201 S Collegeville Rd CV 3035
Collegeville, PA 19426
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: Insurance Overpayment

Is the claim subject to offset? No Yes

\$98.20

3.297 Nonpriority creditor's name and mailing address **QUEST DIAGNOSTICS**
PO BOX 740709
Atlanta, GA 30374-0709
 Date(s) debt was incurred _
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: lab tests

Is the claim subject to offset? No Yes

\$204.01

3.298 Nonpriority creditor's name and mailing address **R&R CONTROLS**
72 R&R WAY, SUITE B
BROWNSVILLE, KY 42210
 Date(s) debt was incurred 22-Nov
 Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*
 Contingent
 Unliquidated
 Disputed

Basis for the claim: HVAC repair

Is the claim subject to offset? No Yes

\$972.02

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.299 Nonpriority creditor's name and mailing address RECKER CONSULTING (PATHFORWARD) PO BOX 715554 CINCINNATI, OH 45271-5554 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ANSWERING SVC Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,296.86
3.300 Nonpriority creditor's name and mailing address REVENUE CYCLE CODING STRATEGIES LLC PO BOX 676583 DALLAS, TX 75267-6583 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$596.95
3.301 Nonpriority creditor's name and mailing address Amber Riley, APRN 221 Village Way Bowling Green, KY 42103 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Employee 4Q productivity bonus in excess of 507(a)(4) cap Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$727.31
3.302 Nonpriority creditor's name and mailing address ROCHE DIAGNOSTICS CORP. PRODUCT Mail Code 5508 PO Box 71209 CHARLOTTE, NC 28272-1209 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185,710.19
3.303 Nonpriority creditor's name and mailing address ROCHE DIAGNOSTICS CORP. SERVICE Mail Code 5508 PO Box 71209 CHARLOTTE, NC 28272-1209 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,018.99
3.304 Nonpriority creditor's name and mailing address Linda Ross c/o The Simpson Firm 908 State Street, 2nd Floor PO Box 3480 Bowling Green, KY 42102 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,000,000.00
3.305 Nonpriority creditor's name and mailing address Rural Carrier Benefit Plan CC (Quest) PO Box 14079 Lexington, KY 40512-4079 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.61

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C.		Case number (if known) 22-10763
Name		
3.306	Nonpriority creditor's name and mailing address Safeco Insurance PO Box 5014 Scranton, PA 18505 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1.43
3.307	Nonpriority creditor's name and mailing address Sanofi Pasteur, Inc. 12458 Collections Center Dr Chicago, IL 60693 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$40,447.36
3.308	Nonpriority creditor's name and mailing address Schardein Mechanical 1810 Outer Loop LOUISVILLE, KY 40219 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Building maintenance/repair</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$3,512.93
3.309	Nonpriority creditor's name and mailing address Scimage, Inc. 4916 El Camino Real STE 200 Los Altos, CA 94022 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$210.60
3.310	Nonpriority creditor's name and mailing address Sedgwick PO Box 14661 Lexington, KY 40512 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$10.00
3.311	Nonpriority creditor's name and mailing address Sedgwick PO Box 14490 Lexington, KY 40512 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$120.00
3.312	Nonpriority creditor's name and mailing address Sedgwick Claims PO Box 14516 Lexington, KY 40512 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$15.64

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3.313 Nonpriority creditor's name and mailing address **SELECT MEDICAL CORPORATION** As of the petition filing date, the claim is: *Check all that apply.* \$307,642.02
ATTN: AUTUMN BUTZ Contingent
225 GRANDVIEW AVE Unliquidated
Camp Hill, PA 17011 Disputed
 Date(s) debt was incurred DEC 2022 Basis for the claim: PHYSICAL THERAPY SERVICES
 Last 4 digits of account number Is the claim subject to offset? No Yes

3.314 Nonpriority creditor's name and mailing address **SHELDON'S LOOK SHARP DRY CLEANERS** As of the petition filing date, the claim is: *Check all that apply.* \$262.46
830 FAIRVIEW AVE Contingent
BOWLING GREEN, KY 42101 Unliquidated
 Date(s) debt was incurred 22-Dec Basis for the claim: DRY CLEANING
 Last 4 digits of account number Is the claim subject to offset? No Yes

3.315 Nonpriority creditor's name and mailing address **SIEMENS MEDICAL SOLUTIONS** As of the petition filing date, the claim is: *Check all that apply.* \$17,472.00
USA INC.DEPT CH 14195 Contingent
PALATINE, IL 60055-4195 Unliquidated
 Date(s) debt was incurred 22-Dec Basis for the claim: EQUIP DEPOSIT
 Last 4 digits of account number Is the claim subject to offset? No Yes

3.316 Nonpriority creditor's name and mailing address **SIGNATURE SIGNS** As of the petition filing date, the claim is: *Check all that apply.* \$742.00
1736 US 31-W BY-PASS Contingent
SUITE 3 Unliquidated
Bowling Green, KY 42101 Disputed
 Date(s) debt was incurred 22-Dec Basis for the claim: Uniforms
 Last 4 digits of account number Is the claim subject to offset? No Yes

3.317 Nonpriority creditor's name and mailing address **Silac Health** As of the petition filing date, the claim is: *Check all that apply.* \$6.04
PO Box 11642 Contingent
Winston Salem, NC 27116 Unliquidated
 Date(s) debt was incurred Basis for the claim: Insurance Overpayment
 Last 4 digits of account number Is the claim subject to offset? No Yes

3.318 Nonpriority creditor's name and mailing address **SMILE MAKERS** As of the petition filing date, the claim is: *Check all that apply.* \$557.70
P.O. BOX 2543 Contingent
Spartanburg, SC 29304-9824 Unliquidated
 Date(s) debt was incurred Basis for the claim:
 Last 4 digits of account number Is the claim subject to offset? No Yes

3.319 Nonpriority creditor's name and mailing address **SOLE SUPPORTS, INC.** As of the petition filing date, the claim is: *Check all that apply.* \$149.00
PO BOX 400 Contingent
Bon Aqua, TN 37025-0400 Unliquidated
 Date(s) debt was incurred Basis for the claim:
 Last 4 digits of account number Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)	
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3.320 Nonpriority creditor's name and mailing address SOUTHERN TOUCH LAWN & LANDSCAPES PO BOX 50431 Bowling Green, KY 42102 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: SNOW REMOVAL Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,287.70
3.321 Nonpriority creditor's name and mailing address VALERIE SPENCE 4210 CEMETERY RD SCOTTSVILLE, KY 42164 Date(s) debt was incurred <u>22-Nov</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERPRETING SVC Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.00
3.322 Nonpriority creditor's name and mailing address SPHERE PO BOX 208308 DALLAS, TX 75320-8308 Date(s) debt was incurred <u>23-Oct</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74.97
3.323 Nonpriority creditor's name and mailing address STARKEY PO BOX 856915 MINNEAPOLIS, MN 55485-6915 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$222.00
3.324 Nonpriority creditor's name and mailing address State Farm PO Box 106170 Atlanta, GA 30348-6170 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$163.76
3.325 Nonpriority creditor's name and mailing address State Farm Medicare Supplement PO Box 339403 Greeley, CO 80633-9403 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3.65
3.326 Nonpriority creditor's name and mailing address STATE VOLUNTEER MUTUAL INS CO MSC 30036 PO BOX 415000 NASHVILLE, TN 37241-5000 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,000.00

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3.327	<p>Nonpriority creditor's name and mailing address STATLAB P.O. BOX 678056 DALLAS, TX 75267-8056</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$510.15</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.328	<p>Nonpriority creditor's name and mailing address Sterling National PO Box 11547 Winston-Salem, NC 27116</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$37.34</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.329	<p>Nonpriority creditor's name and mailing address STEWART RICHEY CONSTRUCTION, INC 2137 GLEN LILY ROAD BOWLING GREEN, KY 42101</p> <p>Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$578.40</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>maintenance/building repair</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.330	<p>Nonpriority creditor's name and mailing address Stupp Bridge Company 445 Century St Bowling Green, KY 42101</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$139.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.331	<p>Nonpriority creditor's name and mailing address Sumitomo Electric Wiring Systems 1018 Ashley Street Bowling Green, KY 42102</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.332	<p>Nonpriority creditor's name and mailing address Jeffrey Taylor c/o Timothy L. Stevenson PO Box 51248 Bowling Green, KY 42102</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$120,000.00</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Lawsuit pending</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.333	<p>Nonpriority creditor's name and mailing address TB Ventures, LLC 6868 Buddy Miller Dr Alvaton, KY 42122-9610</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$28,154.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Property taxes at leased premises</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	Gilbert, Barbee, Moore & McIlvoy, P.S.C. Name	Case number (if known)	22-10763
3.334	Nonpriority creditor's name and mailing address Teleflex Medical Incorporated P O BOX 936729 ATLANTA, GA 31193-6729 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$385.52
3.335	Nonpriority creditor's name and mailing address THE EDMONSON VOICE PO BOX 94 BROWNSVILLE, KY 42210 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ADVERTISING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,050.00
3.336	Nonpriority creditor's name and mailing address THE HILSINGER CO. dba HILCO P O BOX 643792 PITTSBURGH, PA 15264-3792 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$463.16
3.337	Nonpriority creditor's name and mailing address The Murphy Elevator Co. Inc. 128 East Main Street LOUISVILLE, KY 40202 Date(s) debt was incurred <u>22-Dec</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>elevator maintenance contract</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$189.51
3.338	Nonpriority creditor's name and mailing address TMC Transportation PO Box 1774 Des Moines, IA 50306 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3.339	Nonpriority creditor's name and mailing address TMR PO Box 1548 MANGO, FL 33550-9902 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$286.14
3.340	Nonpriority creditor's name and mailing address Tokio Marine PO Box 483 Jersey City, NJ 07303-9805 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$263.16

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.341 Nonpriority creditor's name and mailing address Transamerica Life Ins Co PO Box 310 Grapevine, TX 76099-0310 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$93.82
3.342 Nonpriority creditor's name and mailing address Triage 4 Pediatrics P.O. Box 261923 PLANO, TX 75026 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$226.00
3.343 Nonpriority creditor's name and mailing address Tricare East Humana PO Box 7981 Madison, WI 53707-7981 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,369.47
3.344 Nonpriority creditor's name and mailing address Tricare For Life PO BOX 7890 Madison, WI 53708-7890 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$282.58
3.345 Nonpriority creditor's name and mailing address TROCAR SUPPLIES 126 NULF DRIVE COLUMBIANA, OH 44408 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$678.40
3.346 Nonpriority creditor's name and mailing address Billy & Patricia Tweedy 1551 Lawler Road Munfordville, KY 42765 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.347 Nonpriority creditor's name and mailing address U.S. BANK CREDIT CARD P.O. BOX 6343 FARGO, ND 58125-6343 Date(s) debt was incurred 22-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: credit cards Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,508.18

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Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.348 Nonpriority creditor's name and mailing address UHC Community Plan (Medicaid) PO Box 5270 Kingston, NY 12402-5270 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$243.77
3.349 Nonpriority creditor's name and mailing address UKG INC. P O BOX 930953 ATLANTA, GA 31193-0953 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: payroll Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,551.94
3.350 Nonpriority creditor's name and mailing address UMR Payor 39026 PO Box 30541 Salt Lake City, UT 84130-0541 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,529.77
3.351 Nonpriority creditor's name and mailing address UMR (UHC) P O Box 145804 Cincinnati, OH 45250-5804 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$56.09
3.352 Nonpriority creditor's name and mailing address UMWA Health and Retirement Funds PO Box 99002 Lubbock, TX 79490-9002 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.29
3.353 Nonpriority creditor's name and mailing address United American PO Box 8080 McKinney, TX 75070-8080 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.15
3.354 Nonpriority creditor's name and mailing address United Healthcare PO Box 31350 Salt Lake City, UT 84131-0350 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.64

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.355 Nonpriority creditor's name and mailing address United Healthcare Payor 64159 PO Box 740810 Atlanta, GA 30374-0810 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$797.06
3.356 Nonpriority creditor's name and mailing address United Healthcare Payor 87726 PO Box 30557 Salt Lake City, UT 84130-0557 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.13
3.357 Nonpriority creditor's name and mailing address United Healthcare Payor 87726 PO Box 740800 Atlanta, GA 30374-0800 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,559.16
3.358 Nonpriority creditor's name and mailing address United Healthcare Payor 87726 PO Box 740809 Atlanta, GA 30374-0809 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67.20
3.359 Nonpriority creditor's name and mailing address United Healthcare/Mcare Solutions PO Box 31362 Salt Lake City, UT 84131-0362 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,526.06
3.360 Nonpriority creditor's name and mailing address UNITED PARCEL SERVICE LOCKBOX 577 CAROL STREAM, IL 60132-0577 Date(s) debt was incurred 22-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: shipping Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$151.68
3.361 Nonpriority creditor's name and mailing address United World 3316 Farnam Street Omaha, NE 68175-0001 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$94.47

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.362 Nonpriority creditor's name and mailing address UnitedHealth Shared Services Pyr 39026 PO Box 30783 Salt Lake City, UT 84130-0783 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
3.363 Nonpriority creditor's name and mailing address UNIVERSAL LINEN SERVICE, LLC 1807 COMMERCE RD. LOUISVILLE, KY 40208 Date(s) debt was incurred 22-Nov Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: linens Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,103.95
3.364 Nonpriority creditor's name and mailing address US Marshall Service 601 W Broadway Room 162 Louisville, KY 40202 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.20
3.365 Nonpriority creditor's name and mailing address USAA Insurance PO Box 5000 Daphne, AL 36526 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104.00
3.366 Nonpriority creditor's name and mailing address USAA Life Insurance PO Box 12750 Pensacola, FL 32591-2750 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3.88
3.367 Nonpriority creditor's name and mailing address UV&S PO BOX 1723 HUTCHINSON, KS 67504-1723 Date(s) debt was incurred 22-Dec Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: SHREDDING Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,030.00
3.368 Nonpriority creditor's name and mailing address VACCN Optum UHC PO Box 202117 Florence, SC 29502-2117 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,517.90

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.369 Nonpriority creditor's name and mailing address Various Patients **SEPARATE MATRIX FILED UNDER SEAL** Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Overpayment on accounts Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275,495.18
3.370 Nonpriority creditor's name and mailing address Victig 14441 S Center Point Way Bluffdale, UT 84065 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3.371 Nonpriority creditor's name and mailing address Waystar Inc. 1311 Solutions Center Chicago, IL 60677-1311 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54.76
3.372 Nonpriority creditor's name and mailing address WBKO PO BOX 14200 TALLAHASSEE, FL 32317-4200 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ADVERTISING Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,470.00
3.373 Nonpriority creditor's name and mailing address Wellcare Medicare PO Box 31224 Tampa, FL 33631-3224 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,393.20
3.374 Nonpriority creditor's name and mailing address WellCare of Kentucky MCO PO Box 31224 Tampa, FL 33631-3224 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,202.02
3.375 Nonpriority creditor's name and mailing address Wellfleet PO Box 15369 Springfield, MA 01115-5369 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.28

Debtor Name	Case number (if known)	
Gilbert, Barbee, Moore & McIlvoy, P.S.C.	22-10763	
3.376 Nonpriority creditor's name and mailing address Western Ky Orthopaedic Rental Associates c/o Christopher M. Patton, MD 165 Natchez Trace Suite 100 Bowling Green, KY 42103 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Utilities at leased premises Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,199.02
3.377 Nonpriority creditor's name and mailing address Kenneth A. Williams, Jr. PO Box 50475 Bowling Green, KY 42102 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$750,000.00
3.378 Nonpriority creditor's name and mailing address WNKY PO BOX 149 BOWLING GREEN, KY 42102 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ADVERTISING Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,230.00
3.379 Nonpriority creditor's name and mailing address Roger Woosley 5150 Nolin Dam Road Mammoth Cave, KY 42259 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Lawsuit pending Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,663,716.27
3.380 Nonpriority creditor's name and mailing address Workforce Essentials Inc 523 Madison St, Ste A Clarksville, TN 37040-3619 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
3.381 Nonpriority creditor's name and mailing address Workforce QA Accts Payable 1430 S Main St Salt Lake City, UT 84115-5338 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$830.00
3.382 Nonpriority creditor's name and mailing address XBS OFFICE SOLUTIONS 790 N Dixie Ave Ste 500 ELIZABETHTOWN, KY 42701 Date(s) debt was incurred 22-Nov Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: maintenance contract Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,873.68

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
Name

Case number (if known) **22-10763**

3.383	Nonpriority creditor's name and mailing address ZO SKIN HEALTH INC PO BOX 743031 LOS ANGELES, CA 90074-3031 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,705.88
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3.384	Nonpriority creditor's name and mailing address Zurich PO Box 968023 Schaumburg, IL 60196 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Insurance Overpayment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
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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 address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	484 Golden Autumn, LLC 350 Scotty's Way Bowling Green, KY 42101	Line 3.1 <input type="checkbox"/> Not listed. Explain ____	—
4.2	Doctors Park Associates 107 Terrace Manor Glasgow, KY 42141	Line 3.130 <input type="checkbox"/> Not listed. Explain ____	—
4.3	Paul A. Casi 801 East Main St Louisville, KY 40206	Line 3.346 <input type="checkbox"/> Not listed. Explain ____	—
4.4	Louis Carl Schneider Thomas Law Offices 9418 Norton Commons Blvd Suite 200 Prospect, KY 40059	Line 3.207 <input type="checkbox"/> Not listed. Explain ____	—
4.5	Joel Zimmerman 1009 S. Fourth Street Louisville, KY 40203	Line 3.379 <input type="checkbox"/> Not listed. Explain ____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">Total of claim amounts</td> </tr> <tr> <td style="width: 5%;">5a.</td> <td style="width: 50%;">\$ 0.00</td> </tr> <tr> <td>5b.</td> <td>+ \$ 123,676,378.49</td> </tr> <tr> <td>5c.</td> <td>\$ 123,676,378.49</td> </tr> </table>	Total of claim amounts		5a.	\$ 0.00	5b.	+ \$ 123,676,378.49	5c.	\$ 123,676,378.49
Total of claim amounts									
5a.	\$ 0.00								
5b.	+ \$ 123,676,378.49								
5c.	\$ 123,676,378.49								
5a. Total claims from Part 1									
5b. Total claims from Part 2									
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.									

Fill in this information to identify the case:

Debtor name Gilbert, Barbee, Moore & McIlvoy, P.S.C.

United States Bankruptcy Court for the: WESTERN DISTRICT OF KENTUCKY

Case number (if known) 22-10763

Check if this is an amended filing

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, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form 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 contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property*

(Official Form 206A/B).

2. List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease	
2.1. 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	Lease of medical office space; debtor is tenant Expires 02/28/26	1065 Holdings, LLC c/o Suzanne Cottrell 1065 Ashley Street Suite 100 Bowling Green, KY 42103
2.2. 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	Leases of medical office space at 484 Gold Autumn Lane, Bowling Green, KY; debtor is tenant Expires 05/08/39	484 Golden Autumn, LLC c/o Kevin C Brooks 1010 College Street Bowling Green, KY 42101
2.3. 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	Lease of medical office space; debtor is tenant Month-to-month	John Adams II, MD 119 Memorial Drive Franklin, KY 42134
2.4. 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	Lease of medical office space; debtor is tenant by assignment from Wilson, E.N.T., P.S.C Month-to-month	Orlando F. Bravo 2277 N. Jackson Highway Glasgow, KY 42141

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space; debtor is tenant**

State the term remaining **Expires 09/30/23**

List the contract number of any government contract _____

**Briggs Holding Company, LLC
 400 N. Dixie Highway
 Cave City, KY 42127**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office suite 6807 Louisville Road Unit A; debtor is tenant by assignment**

State the term remaining **Expires 11/13/24**

List the contract number of any government contract _____

**Commonwealth Health Corporation, Inc.
 1260 Campbell Lane, Suite 100
 Bowling Green, KY 42104**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office suite 5796 Nashville Road Units A & B; debtor is tenant by assignment**

State the term remaining **Expires 06/30/23**

List the contract number of any government contract _____

**Commonwealth Health Corporation, Inc.
 1260 Campbell Lane, Suite 100
 Bowling Green, KY 42104**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space; debtor is tenant**

State the term remaining **Expires 07/31/27**

List the contract number of any government contract _____

**Doctors Park Associates
 c/o Bale Realty LLC
 205 Norris Court
 Glasgow, KY 42141**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Lease of parking lot; debtor is lessor**

State the term remaining **Month-to-month**

List the contract number of any government contract _____

**Family Auto Mart, Inc.
 129 US 31W Bypass
 Bowling Green, KY 42101**

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.10. State what the contract or lease is for and the nature of the debtor's interest **Sublease of medical practice office at 1325 Andrea Street, Suite 200, Bowling Green, KY. Debtor is sublessor**
 State the term remaining **Month-to-month**
 List the contract number of any government contract _____
**First Urology, PSC
 c/o Steven A. Goodman
 Lynch, Cox, Gilman, Mahan
 500 W. Jefferson St., Ste 2100
 Louisville, KY 40202**

2.11. State what the contract or lease is for and the nature of the debtor's interest **Lease of office space; debtor is tenant**
 State the term remaining **Expires 12/31/25**
 List the contract number of any government contract _____
**Friends of the L&N Depot, Inc.
 401 Kentucky Street
 Bowling Green, KY 42101**

2.12. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office; debtor is tenant**
 State the term remaining **Expires 05/31/23**
 List the contract number of any government contract _____
**G.A.A.R. LLC
 408 East Maple St.
 PO Box 607
 Caneyville, KY 42721**

2.13. State what the contract or lease is for and the nature of the debtor's interest **Agreement to pay rent and utilities due under lease agreement between Medical Plaza Partners (landlord) and Diana Granese, MD (tenant)**
 State the term remaining **Expires 06/30/23**
 List the contract number of any government contract _____
**Diana Granese, MD
 720 Second Street
 Suite 303
 Bowling Green, KY 42101**

2.14. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office Suite 101; debtor is tenant**
 State the term remaining **Expires 12/31/24**
 List the contract number of any government contract _____
**Greenview Hospital, Inc.
 c/o Greenview Regional Hospital
 1801 Ashley Circle
 Bowling Green, KY 42104**

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.15. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office Suite 200; debtor is tenant**

State the term remaining **Expires 03/31/24**

List the contract number of any government contract _____

**Greenview Hospital, Inc.
 c/o TriStar Greenview Regional Hospital
 1801 Ashley Circle
 Bowling Green, KY 42104**

2.16. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office Suite 209; debtor is tenant**

State the term remaining **Expires 07/31/24**

List the contract number of any government contract _____

**Greenview Hospital, Inc.
 c/o TriStar Greenview Regional Hospital
 1801 Ashley Circle
 Bowling Green, KY 42104**

2.17. State what the contract or lease is for and the nature of the debtor's interest **Lease of residential real property; debtor is lessor**

State the term remaining **Month-to-month**

List the contract number of any government contract _____

**Vivian Hampton
 119 Chestnut St.
 Bowling Green, KY 42101**

2.18. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space at 1225 Fairway Street, Bowling Green, KY; debtor is tenant**

State the term remaining **Expires 01/31/27**

List the contract number of any government contract _____

**Gary and Dianne Howerton
 416 E. 12th Ave.
 Bowling Green, KY 42101**

2.19. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space; debtor is tenant**

State the term remaining **Expires 06/14/23**

List the contract number of any government contract _____

**Anson Hsieh, MD
 1402 Andrea Street
 Bowling Green, KY 42103**

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.20. State what the contract or lease is for and the nature of the debtor's interest **Lease of 1211 Ashley Circle, Bowling Green, KY; debtor is tenant**

State the term remaining **Expires 07/31/23**

List the contract number of any government contract _____

**JZC Enterprises LLC
 1211 Ashley Circle
 Bowling Green, KY 42104**

2.21. State what the contract or lease is for and the nature of the debtor's interest **Month-to-month warehouse storage**

State the term remaining _____

List the contract number of any government contract _____

**Kentucky Mid-South Storage, Inc.
 423 State Street
 Bowling Green, KY 42101**

2.22. State what the contract or lease is for and the nature of the debtor's interest **Sublease/timeshare agreement for portion of medical office located at 101 W. Roberts Street, Morgantown, KY; debtor is sublessor**

State the term remaining **Month-to-month**

List the contract number of any government contract _____

**Kidney Specialists of Kentucky, PLLC
 c/o Khalid M. Bhatti
 105 Financial Drive, Suite 105
 Elizabethtown, KY 42701**

2.23. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space; debtor is tenant**

State the term remaining **Expires 06/14/23**

List the contract number of any government contract _____

**Logan Medical Associates, LLC
 285 Stacker Street
 Lewisburg, KY 42256**

2.24. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space at 1405 Nashville Road, Russellville, KY; debtor is tenant**

State the term remaining **Expires 06/14/23**

List the contract number of any government contract _____

**Logan Medical Associates, LLC
 1405 Nashville Road
 Russellville, KY 42276**

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.25. State what the contract or lease is for and the nature of the debtor's interest **Lease of premises for telecommunications and other electrical equipment, and agreement to provide internet connectivity; debtor is tenant-customer**

State the term remaining _____

List the contract number of any government contract _____

**Lost River Data Center
 801 Center Street
 PO Box 10300
 Bowling Green, KY 42102-7300**

2.26. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office; debtor is tenant**

State the term remaining **Expires 02/14/26**

List the contract number of any government contract _____

**Med Partners LLC
 205 Norris Court
 Glasgow, KY 42141**

2.27. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space; debtor is tenant**

State the term remaining **Expires 11/30/27**

List the contract number of any government contract _____

**Mitra, LLC
 3155 Blackjack Road
 Franklin, KY 42134**

2.28. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space; debtor is tenant**

State the term remaining **Expires 01/31/24**

List the contract number of any government contract _____

**Virag Pandeya, MD
 PO Box 399
 Smiths Grove, KY 42171**

2.29. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office suite 5575 Scottsville Road Suite 102; debtor is tenant by assignment**

State the term remaining **Expires 12/31/24**

List the contract number of any government contract _____

**Partners Exchange, LLC
 1240 Fairway Street
 Bowling Green, KY 42103**

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.30. State what the contract or lease is for and the nature of the debtor's interest **Lease of interior portion of 201 Park St., Bowling Green, KY; debtor is landlord**
 State the term remaining **Expires 12/31/25**
 List the contract number of any government contract _____ **Riley-White, Incorporated
 c/o Donald G. Riley
 440 S. Winter St.
 Russellville, KY 42276**

2.31. State what the contract or lease is for and the nature of the debtor's interest **Time share agreement for conference room at 2724 Nashville Road, Bowling Green, KY; debtor is landlord**
 State the term remaining **Month-to-month**
 List the contract number of any government contract _____ **Kathy Seigler, Psy.D.
 236 Beech Bend Rd
 Bowling Green, KY 42101**

2.32. State what the contract or lease is for and the nature of the debtor's interest **Sublease of medical office space at 990 Wilkinson Trace, Bowling Green, KY; debtor is subtenant**
 State the term remaining **Expires 03/31/24**
 List the contract number of any government contract _____ **TB Ventures, LLC
 c/o Troy Campbell
 6291 Hardcastle Ave
 Bowling Green, KY 42103**

2.33. State what the contract or lease is for and the nature of the debtor's interest **Sublease of premises at 990 Wilkinson Trace, Bowling Green, KY 42101; Debtor is sublessor**
 State the term remaining **Expires 06/30/23**
 List the contract number of any government contract _____ **Total Fitness Connection, LLC
 c/o Robert Dukes
 2235 Russellville Road
 Bowling Green, KY 42101**

2.34. State what the contract or lease is for and the nature of the debtor's interest **Lease of medical office space at 121 College Street, Smiths Grove, KY; debtor is tenant**
 State the term remaining **Expires 06/14/23**
 List the contract number of any government contract _____ **TruCare Medical Associates, LLC
 PO Box 399
 Smiths Grove, KY 42171**

Debtor 1 **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
First Name Middle Name Last Name

Case number (if known) **22-10763**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.35. 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

Time share lease agreement for medical office space at 484 Golden Autumn Way, Bowling Green, KY; debtor is sub-landlord Expires 10/11/23

**Vanderbilt University Medical Center
Real Estate Office
3319 West End Ave., Suite 200
Attn: Liz Dishman
Nashville, TN 37203-1050**

2.36. 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

Lease of medical office space; debtor is tenant Expires 12/31/23

**Richard Wan, MD
PO Box 129
Morgantown, KY 42261**

2.37. 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

Lease of medical office space at 165 Natchez Trace, Bowling Green, KY; debtor is tenant Expires 06/30/31

**Western Ky Orthopaedic Rental Associates
c/o Christopher M. Patton, MD
165 Natchez Trace
Suite 100
Bowling Green, KY 42103**

Fill in this information to identify the case:

Debtor name Gilbert, Barbee, Moore & McIlvoy, P.S.C.

United States Bankruptcy Court for the: WESTERN DISTRICT OF KENTUCKY

Case number (if known) 22-10763

Check if this is an amended filing

**Official Form 206H
Schedule H: Your 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.

1. Do you 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.
- Yes

2. 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	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Gilbert, Barbee, Moore & McIlvoy, P.S.C.

United States Bankruptcy Court for the: WESTERN DISTRICT OF KENTUCKY

Case number (if known) 22-10763

Check if this is an amended filing

Official Form 207
Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2022 to Filing Date

Operating a business
 Other Business Operations

\$216,031,147.00

For prior year:
From 1/01/2021 to 12/31/2021

Operating a business
 Other Business Operations

\$200,766,364.00

For year before that:
From 1/01/2020 to 12/31/2020

Operating a business
 Other Business Operations

\$178,946,486.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2022 to Filing Date

Rent Income - Clinic Pharmacy

\$26,000.00

From the beginning of the fiscal year to filing date:
From 1/01/2022 to Filing Date

Rent Income - Total Fitness

\$32,043.00

From the beginning of the fiscal year to filing date:
From 1/01/2022 to Filing Date

Rent Income - Family Auto

\$5,400.00

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case number (if known) **22-10763**

	Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Rent Income - Centennial Heart	\$3,920.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Rent Income - First Urology	\$1,140.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Rent Income - Conference Room	\$2,400.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Rent Income - Eye Institute	\$9,364.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Rent Income - 219 Chestnut St.	\$2,000.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Rent Income - Other	\$1,700.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Interest	\$35,179.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Vending Income	\$1,188.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Barren County COVID-19 Provider Relief funds	\$35,316.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	KY Health Cooperative Liquidation Settlement	\$182,215.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Cincinnati Insurance Tornado Casualty Proceeds	\$477,017.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Miscellaneous	\$3,503.00
From the beginning of the fiscal year to filing date: From 1/01/2022 to Filing Date	Gain/Loss on Investment Sales	\$15,166.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - Clinic Pharmacy	\$27,949.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - Total Fitness	\$32,043.00

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case number (if known) **22-10763**

	Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - Family Auto	\$5,400.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - Centennial Heart	\$2,800.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - First Urology	\$920.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - Conference Room	\$1,675.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - Eye Institute	\$3,100.00
For prior year: From 1/01/2021 to 12/31/2021	Rent Income - 219 Chestnut St.	\$2,400.00
For prior year: From 1/01/2021 to 12/31/2021	Interest	\$619.00
For prior year: From 1/01/2021 to 12/31/2021	Vending Income	\$822.00
For prior year: From 1/01/2021 to 12/31/2021	Federal COVID-19 Provider Relief Funds	\$3,931,379.00
For prior year: From 1/01/2021 to 12/31/2021	Miscellaneous	\$4,838.00
For prior year: From 1/01/2021 to 12/31/2021	Gain/Loss on Investment Sales	\$19,685.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - Clinic Pharmacy	\$21,659.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - Total Fitness	\$34,448.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - Family Auto	\$5,400.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - Centennial Heart	\$6,098.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - First Urology	\$480.00

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

	Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - Conference Room	\$1,488.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - Eye Institute	\$4,184.00
For year before that: From 1/01/2020 to 12/31/2020	Rent Income - 219 Chestnut St.	\$2,600.00
For year before that: From 1/01/2020 to 12/31/2020	Interest	\$25,526.00
For year before that: From 1/01/2020 to 12/31/2020	Vending Income	\$1,060.00
For year before that: From 1/01/2020 to 12/31/2020	Federal COVID-19 Provider Relief Funds	\$3,559,937.00
For year before that: From 1/01/2020 to 12/31/2020	Miscellaneous	\$1,226.00
For year before that: From 1/01/2020 to 12/31/2020	Gain/Loss on Investment Sales	\$18,431.00

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. **Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. 1065 Holdings, LLC c/o Suzanne Cottrell 1065 Ashley Street Suite 100 Bowling Green, KY 42103	10/03/22 - 12/01/22	\$56,149.08	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.2. 484 Golden Autumn, LLC c/o Kevin C Brooks 1010 College Street Bowling Green, KY 42101	10/03/22 - 12/08/22	\$119,365.80	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.3. John Adams, MD	10/03/22 - 12/01/22	\$18,665.90	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Dividends, Janitorial, Rent, Pretax Expenses</u>
3.4. Airgas USA, LLC	10/04/22 - 12/09/22	\$11,204.30	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.5. Allergan USA, LLC	10/17/22 - 12/5/22	\$45,100.90	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.6. Allscripts, LLC 24630 Network Place Chicago, IL 60673-1246	09/29/22 - 12/02/22	\$900,505.70	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.7. American Paper & Twine Co.	09/29/22 - 12/12/22	\$49,236.35	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.8. Anthem	09/29/22 - 12/09/22	\$27,390.66	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.9. AppSalute, Inc.	12/14/22	\$14,930.62	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.10 Avinash Aravantagi, MD	10/19/22 - 12/09/22	\$21,675.70	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Dividends, Pretax, Advance, and Medical Director Payment
3.11 Archway Physician Recruitment, LLC	10/05/22	\$11,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 AT&T	09/29/22 - 12/14/22	\$9,579.09	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.13 Atmos Energy	10/05/22 - 12/14/22	\$28,363.91	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 Bayer Healthcare	10/04/22 - 12/05/22	\$53,563.65	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.15 Beckman Coulter Inc.	09/29/22 - 12/12/22	\$46,012.19	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.16 Becton, Dickinson and Company	10/10/22 - 11/21/22	\$11,813.28	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.17 Besse Medical PO Box 978526 Dallas, TX 75397-8526	10/03/22 - 12/12/22	\$384,720.60	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.18 Bowling Green Municipal Utilities	09/29/22 - 12/14/22	\$108,373.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Utilities</u>
3.19 Bioventus LLC	10/13/22	\$15,227.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.20 Bluecotton	10/03/22 - 10/25/22	\$7,964.12	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.21 Briggs Holding Company, LLC	10/03/22 - 12/01/22	\$14,843.61	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Janitorial and Rent</u>
3.22 Cambridge Market	11/23/22 - 12/15/22	\$8,559.21	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Food</u>
3.23 Canon Financial Services, Inc. 158 Gaither Drive Mount Laurel, NJ 08054	10/03/22 - 12/01/22	\$14,353.59	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.24 Canon Medical Systems USA, Inc	10/03/22 - 12/12/22	\$114,147.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.25 Cardinal Health 414, LLC	10/10/22 - 12/05/22	\$51,967.72	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.26 Caresfield LLC	10/03/22 - 12/05/22	\$8,194.15	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Lab, Medical</u>
3.27 Carr, Riggs and Ingram	11/14/22 - 12/09/22	\$38,245.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.28 CDW Government, Inc.	10/13/22 - 12/12/22	\$35,794.67	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.29 CEPHEID	10/31/22 - 11/21/22	\$71,400.28	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.30 CGS Administrators LLC	09/29/22 - 12/8/22	\$109,626.40	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Refund to Medicare Program</u>
3.31 Charter Communications	10/10/22 - 12/08/22	\$10,961.64	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.32 Cisco Systems Capital	11/29/22	\$22,423.86	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.33 City of Bowling Green	10/03/22 - 12/13/22	\$639,159.80	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Municipality</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.34 City of Franklin	10/25/22 - 12/05/22	\$10,940.55	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Municipality
3.35 City of Glasgow	10/17/22 - 10/25/22	\$15,953.01	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Municipality
3.36 City of Russellville	10/17/22 - 11/30/22	\$7,659.64	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Municipality
3.37 Clark Hill P.L.C.	11/09/22	\$10,276.78	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other Recruiting
3.38 Classic Clean Company, LLC	10/03/22 - 12/01/22	\$10,562.37	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.39 ClearPath Mutual	10/11/22 - 12/09/22	\$19,651.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Worker's Compensation
3.40 Clinic Pharmacy	09/29/22 - 11/30/22	\$22,064.97	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.41 Coker Group Holdings, LLC	10/13/22 - 11/11/22	\$24,522.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.42 Cole & Moore, PSC 921 College St. Bowling Green, KY 42101	10/20/22 - 11/22/22	\$8,243.70	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ___
3.43 Commonwealth Health Corp.	10/03/22 - 12/01/22	\$40,476.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.44 CQ Partners	11/17/22	\$9,421.30	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Hearing Aids</u>
3.45 Credit Bureau Systems, Inc.	10/11/22 - 12/18/22	\$159,721.80	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ___
3.46 CrowdSouth, LLC	10/18/22 - 12/07/22	\$93,596.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ___
3.47 Daily News	10/25/22 - 12/08/22	\$29,361.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ___
3.48 Darob, Inc.	10/14/22 - 12/13/22	\$29,680.80	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ___

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.49 Debbie Diamond	09/29/22 - 11/23/22	\$8,904.02	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Christmas party, gift cards, notary fee, staff meals, tent rental, decorations</u>
3.50 Dell Marketing L.P.	11/10/22 - 11/23/22	\$68,433.96	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.51 DJO, LLC	10/03/22 - 12/05/22	\$40,963.33	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.52 Doctors Park Associates c/o Bale Realty LLC 205 Norris Court Glasgow, KY 42141	10/03/22 - 12/01/22	\$57,545.65	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.53 Document Imaging Systems Corp	10/25/22 - 12/06/22	\$111,620.10	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.54 Todd Drexel, MD	10/04/22 - 12/02/22	\$32,437.72	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Advance, Medical Supplies, Dividend, Medical Student</u>
3.55 Dusa Pharmaceuticals, Inc.	12/05/22	\$9,261.66	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.56 Effective Mail Marketing	10/12/22 - 12/06/22	\$30,368.31	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.57 Einformatics	12/02/22	\$12,633.99	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.58 eScreen Inc.	10/10/22 - 12/06/22	\$27,773.32	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.59 Toni Lynn Evans	10/05/22 - 12/02/22	\$9,063.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Janitorial</u>
3.60 Fidelity Security Life Ins.	09/29/22 - 11/29/22	\$27,766.02	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.61 Finance Officer Warren County Schools	10/25/22	\$72,682.28	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Municipality taxes</u>
3.62 Fisher Healthcare	10/03/22 - 12/12/22	\$842,231.35	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.63 Danielle Foster, MD	10/03/22 - 10/19/22	\$36,616.29	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Stock repurchase, dividend</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.64 Frantz Building Services, Inc. PO Box 2001 Owensboro, KY 42302	10/03/22 - 12/08/22	\$186,809.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.65 Friends of the L&N Depot, Inc. 401 Kentucky Street Bowling Green, KY 42101	10/11/22 - 12/01/22	\$20,164.03	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent
3.66 Frost Brown Todd LLC 400 W. Market St, 32nd Floor Louisville, KY 40202	11/15/22 - 12/15/22	\$64,007.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.67 GE Precision Healthcare LLC	10/03/22 - 12/09/22	\$12,561.67	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.68 Genzyme	10/31/22 - 12/05/22	\$7,802.29	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.69 Glaxosmithkline Pharmaceutical PO Box 740415 Atlanta, GA 30374-0415	10/04/22 - 12/06/22	\$318,965.96	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.70 Global Rx Management Limited	10/04/22 - 12/05/22	\$15,526.27	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.71 Green River Scrubs	10/25/22 - 11/23/22	\$22,675.68	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.72 Guerbet LLC	10/10/22 - 12/05/22	\$81,585.84	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.73 Teresa Gulley	10/28/22 - 12/14/22	\$9,222.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other __
3.74 H2 Health	10/13/22 - 12/08/22	\$241,788.10	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.75 HCA Healthcare, Inc. One Park Plaza Nashville, TN 37203	10/18/22 - 11/18/22	\$48,764.10	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.76 Henry Schein, Inc. Dept. CH 10241 Palatine, IL 60055-0241	10/03/22 - 12/12/22	\$134,420.49	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.77 Highland Couriers	10/05/22 - 12/01/22	\$35,560.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.78 Hillcrest Credit Agency	10/11/22 - 12/12/22	\$148,461.60	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.79 Hologic, Inc.	11/21/22	\$41,202.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.80 Gary and Dianne Howerton 416 E. 12th Ave. Bowling Green, KY 42101	10/03/22 - 12/01/22	\$61,610.25	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent
3.81 IAF Services, Inc.	10/11/22 - 12/12/22	\$17,379.89	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.82 ICU Medical, Inc.	09/29/22 - 12/12/22	\$23,671.74	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.83 Imaging Specialists, PLLC	10/03/22 - 12/01/22	\$110,390.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other MRI Interpretations
3.84 Impart, LLC	10/05/22 - 12/05/22	\$30,966.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.85 Innovative Concepts & Solution	10/03/22 - 12/12/22	\$21,077.04	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.86 Intellisuite Technologies, Inc.	10/12/22 - 12/05/22	\$29,120.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.87 Interstate Imaging	10/17/22 - 12/07/22	\$20,015.68	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.88 J&J Healthcare Systems, Inc. PO Box 406663 Atlanta, GA 30384-6663	11/28/22 - 12/05/22	\$43,845.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.89 Jeam EDX LLC	10/13/22 - 12/02/22	\$119,480.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other WKONA EMG Interpretations
3.90 JZC Enterprises LLC 1211 Ashley Circle Bowling Green, KY 42104	10/03/22 - 12/01/22	\$19,788.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent
3.91 Karl Storz Endoscopy-America	10/03/22 - 11/28/22	\$37,018.58	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.92 Keller Schroeder	10/11/22 - 11/29/22	\$35,208.66	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.93 Kentucky State Treasurer	10/05/22 - 12/22/22	\$20,040.08	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other State Authority
3.94 Knight's Mechanical, LLC	10/22/22 - 11/22/22	\$9,107.21	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.95 Lab Corp of America Holdings	10/25/22 - 11/11/22	\$35,546.61	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.96 Laborie Medical Tech	10/04/22 - 12/13/22	\$28,173.04	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.97 Language Line Services	10/11/22 - 12/06/22	\$9,905.14	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.98 Level 3 Communications, LLC	10/03/22 - 12/13/22	\$31,395.62	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.99 Liberty Imaging	10/05/22 - 12/01/22	\$35,438.56	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 0. Logan Medical Associates, LLC 285 Stacker Street Lewisburg, KY 42256	10/03/22 - 12/01/22	\$54,222.24	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.10 1. McKesson Medical Surgical PO Box 933027 Atlanta, GA 31193-3027	10/03/22 - 12/08/22	\$266,146.18	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 2. McKesson Specialty 15212 Collections Center Dr Chicago, IL 60693	09/29/22 - 12/22/22	\$7,615,878.22	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 3. Med Partners LLC 205 Norris Court Glasgow, KY 42141	10/03/22 - 12/13/22	\$24,914.88	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.10 4. Medical Plaza Partners, Inc.	10/04/22 - 12/06/22	\$8,507.09	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent
3.10 5. MedInformatix, Inc.	10/18/22 - 12/14/22	\$150,875.85	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 6. Medline Industries	10/25/22 - 11/21/22	\$47,415.07	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 7. Merck Sharp and Dohme Corp PO Box 5254 Carol Stream, IL 60197-5254	10/04/22 - 12/05/22	\$178,834.70	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 8. Mitra, LLC 3155 Blackjack Road Franklin, KY 42134	10/03/22 - 12/01/22	\$83,654.13	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent
3.10 9. MXR Imaging, Inc.	10/11/22	\$9,010.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 0. New Covenant Cleaners Inc.	10/18/22 - 12/01/22	\$8,056.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 1. Novaris Communications, Inc.	10/18/22 - 12/06/22	\$8,350.57	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address		Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.11 2.	Nuance Communications, Inc.	10/03/22 - 12/09/22	\$13,166.82	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 3.	NYX-RCM Partners, LLC	10/13/22 - 12/08/22	\$338,250.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 4.	Office Resources, Inc.	10/10/22 - 11/14/22	\$9,731.76	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 5.	Ohio Valley Storage Consultant	10/05/22	\$38,416.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 6.	Orchard Software	12/06/22 - 12/13/22	\$63,114.91	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 7.	Origin Healthcare Solutions, LLC	10/10/22 - 12/02/22	\$32,904.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Computer Services, Precision BI</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.11 8. Virag Pandeya, MD	10/03/22 - 12/07/22	\$33,845.36	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent <u>Mileage</u> <u>Dividend</u> <u>Inventory</u> <u>Medical Supplies</u> <u>Office Supplies</u> <u>Utilities</u> <u>Select Security</u> <u>Janitorial Supplies</u> <u>Janitorial Services</u> <u>Telephone</u> <u>Cable TV</u> <u>Building Maint</u> <u>Maint - Lawn</u> <u>Pretax</u> <u>Postage</u>
3.11 9. Paragard Direct	12/05/22	\$8,667.30	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 0. Paramount Dental	10/31/22 - 11/29/22	\$88,706.04	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 1. Partners Exchange, LLC 1240 Fairway Street Bowling Green, KY 42103	10/03/22 - 12/01/22	\$15,212.40	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other Rent
3.12 2. Pennyrile Radiology, PSC	10/04/22 - 12/09/22	\$66,568.48	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 3. Perfect Promotions	11/15/22	\$8,741.59	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.12 4. Pfizer, Inc PO Box 100539 Atlanta, GA 30384-0539	10/04/22 - 12/05/22	\$140,346.46	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 5. Phamily	11/02/22 - 12/13/22	\$25,040.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 6. Philips Healthcare	10/13/22 - 12/06/22	\$30,252.36	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 7. PNC Equipment Finance	10/28/22 - 12/12/22	\$81,553.38	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 8. Premier Health Screening, LLC	10/06/22 - 12/09/22	\$10,915.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 9. Recker Consulting d/b/a Path Forward	10/10/22 - 12/05/22	\$312,168.95	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.13 0. Roche Diagnostics Corp PO Box 71209 Charlotte, NC 28272	10/03/22 - 12/05/22	\$358,753.98	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.13 1. Sanofi Pasteur, Inc. 12458 Collections Center Dr Chicago, IL 60693	10/04/22 - 12/05/22	\$316,308.69	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.13 2. Schardein Mechanical	10/05/22 - 12/14/22	\$11,710.72	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.13 3. Select Medical Corporation	10/18/22 - 12/15/22	\$646,523.07	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.13 4. Seqirus USA Inc.	10/10/22 - 12/05/22	\$243,491.77	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Inventory</u>
3.13 5. Siemens Medical Solutions	10/12/22 - 12/09/22	\$37,618.08	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.13 6. Simpson County Tax Admin	10/25/22	\$10,568.97	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Municipality</u>
3.13 7. Southern Touch Lawn & Landscapes	10/11/22 - 12/05/22	\$7,878.46	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.13 8. Sporting Times	10/03/22 - 12/01/22	\$8,400.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.13 9. Starkey	10/17/22 - 12/06/22	\$7,923.39	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.14 0. State Volunteer Mutual Ins Co	12/09/22	\$7,865.95	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 1. Stites & Harbison, PLLC 400 W. Market St. Suite 1800 Louisville, KY 40202-3352	11/02/22 - 12/22/22	\$22,836.70	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 2. SVMIC - Risk Mgmt	10/20/22 - 11/08/22	\$16,582.05	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 3. Symetra Life Ins Co	10/11/22 - 12/09/22	\$294,036.97	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 4. TB Ventures, LLC c/o Troy Campbell 6291 Hardcastle Ave Bowling Green, KY 42103	10/03/22 - 12/01/22	\$64,331.55	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.14 5. The Vanguard Group	09/29/22 - 12/21/22	\$1,323,091.43	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 6. Trizetto Provider Solutions	10/05/22 - 12/06/22	\$21,251.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.14 7. TruCare Medical Associates, LLC PO Box 399 Smiths Grove, KY 42171	10/03/22 - 12/01/22	\$11,424.39	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.14 8. U.S. Bank Credit Card	10/04/22 - 12/13/22	\$107,689.55	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.14 9. UKG Inc.	10/05/22 - 12/19/22	\$80,444.31	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.15 0. United Healthcare	09/30/22 - 12/06/22	\$12,856.47	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Refund to Insurance Carrier</u>
3.15 1. Universal Linen Service, LLC	10/10/22 - 12/02/22	\$98,854.45	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.15 2. USI Consulting Group, Inc.	10/28/22 - 11/23/22	\$8,611.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.15 3. UV&S, Inc.	10/17/22 -12/12/22	\$11,726.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.15 4. Richard Wan, MD	10/03/22 - 12/01/22	\$14,204.73	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.15 5. Warren County Sheriff	10/28/22 - 12/13/22	\$225,624.49	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>2022 Property Taxes</u>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.15 6. WBKO	10/18/22 - 12/09/22	\$23,159.98	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.15 7. Wellcare	09/29/22 - 12/09/22	\$26,179.10	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Refund to Insurance Carrier</u>
3.15 8. Lauren Wheeler, MD	10/03/22 - 10/19/22	\$16,105.46	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Stock and Dividend</u>
3.15 9. Willow Spring Professional Park	10/03/22 - 12/01/22	\$9,350.01	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.16 0. WKO Rental, LLC	10/03/22 - 12/01/22	\$333,305.33	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Rent</u>
3.16 1. WRECC	10/04/22 - 12/13/22	\$10,281.25	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Utilities</u>
3.16 2. XBS Office Solutions	10/14/22 - 12/09/22	\$31,593.53	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__
3.16 3. ZixCorp	10/05/22	\$19,693.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.16 4. Zo Skin Health Inc.	10/27/22 - 11/21/22	\$8,933.92	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___
3.16 5. ZOHO Corp.	11/02/22 - 11/09/22	\$10,453.72	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input checked="" type="checkbox"/> Other Computer Services

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Kirk A. Fee 3 Chestnut Hill Court Bowling Green, KY 42103 2nd Vice President and Shareholder		\$667.80	Reimbursement for Professional Expenses
4.2. Cory M. Fielding 182 Stone Mill Court Alvaton, KY 42122 Director and Shareholdeer		\$4,419.21	Reimbursement for Professional Expenses
4.3. Joseph C. Gass 1207 Ironwood Drive Bowling Green, KY 42103 Shareholder and Former Director		\$1,689.07	Reimbursement for Professional Expenses
4.4. Samer R. Kalakish 1317 Scottsville Road #712 Bowling Green, KY 42103 1st Vice President and Shareholder		\$6,038.02	Reimbursement for Professional Expenses (\$3,886.01) Reimbursement for GGC Business Expenses (\$2,152.01)
4.5. Marc A. Moore 422 Mount Everest Court Bowling Green, KY 42104 Director and Shareholder		\$8,100.04	Reimbursement for Professional Expenses (\$7,923.49) Reimbursement for GGC Business Expenses (\$176.55)
4.6. Jerry P. Roy 979 Cumberland Ridge Way Bowling Green, KY 42103 President and Shareholder		\$569.16	Reimbursement for GGC Business Expenses
4.7. Sarah Roy Employee and Spouse of President		\$990.96	Reimbursement for GGC Business Expenses

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case number (if known) **22-10763**

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.8. Steve Sinclair 12424 Woodburn Allen Springs Rd Alvaton, KY 42122 CFO and Asst. Treasurer		\$6,352.40	Reimbursement for Professional Expenses
4.9. Kamal P. Singh 670 Covington Grove Blvd Bowling Green, KY 42104 Director		\$486.10	Reimbursement for Professional Expenses
4.10 Kushal P. Singh 620 Covington Grove Blvd Bowling Green, KY 42104 Shareholder and Sibling of Director		\$916.90	Reimbursement for Professional Expenses
4.11 Thomas G. Sternberg 1211 Lakemere Avenue Bowling Green, KY 42103 Director		\$3,983.04	Reimbursement for Professional Expenses (\$359.05) Reimbursement for GGC Business Expenses (\$3,623.99)
4.12 Chris Thorn 122 Bent Creek Court Bowling Green, KY 42103 CEO and Asst. Secretary		\$1,197.00	Reimbursement for Professional Expenses (\$1,184.00) Reimbursement for GGC Business Expenses (\$13.00)
4.13 William J. Travis 1246 State Street Bowling Green, KY 42101 Former Director		\$9,466.03	Reimbursement for Professional Expenses
4.14 Sean T. Willgruber 1056 Grider Pond Road Bowling Green, KY 42104 Treasurer and Shareholder		\$10,397.27	Reimbursement for Professional Expenses
4.15 Logan Medical Associates, LLC 285 Stacker Street Lewisburg, KY 42256 Landlord owned in part by director and shareholder		\$251,102.46	Lease Payments - \$216,888.96 Landlord Expense Reimbursements - \$34,213.50
4.16 Med Partners LLC 205 Norris Court Glasgow, KY 42141 Landlord owned in part by former director		\$315,740.23	Lease Payments - \$281,526.73 Landlord Expense Reimbursements - \$34,213.50
4.17 Mitra, LLC 3155 Blackjack Road Franklin, KY 42134 Landlord owned in part by officer		\$334,616.52	Lease Payments
4.18 Western Ky Orthopaedic Rental Associates c/o Christopher M. Patton, MD 165 Natchez Trace Suite 100 Bowling Green, KY 42103 Landlord owned in part by officer and shareholder		\$1,161,470.42	Lease Payments - \$985,032.48 Landlord Expense Reimbursement - \$176,437.94

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Ross v. Graves-Gilbert Clinic et al. 12-CI-01697	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Duff et al. v. Graves-Gilbert Clinic et al. 14-CI-00665	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3. L.J. v. Graves-Gilbert Clinic et al. 15-CI-00250	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4. Taylor v. Western Ky. Orthopaedic and Neurosurgical Associates, PLLC and Keith D. Morrison, MD 16-CI-01090	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5. Wosley v. Robert Shane Riley, D.O. and Western Ky. Orthopaedic and Neurosurgical Associates, PLLC 17-CI-00412	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.6.	Cole et al. v. Graves-Gilbert Clinic et al. 17-CI-00734	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.7.	Cagle, Administratrix of the Estate of Linda Sowders v. Graves-Gilbert Clinic et al. 19-CI-00419	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.8.	Kendall v. Graves-Gilbert Clinic et al. 19-CI-00667	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.9.	Nordike v. Greenview Hospital, Inc., d/b/a Greenview Regional Hospital and TriStar Greenview Regional Hospital; TriStar Health System, Inc.; and Phillip J. Singer, M.D. 19-CI-01128	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10	D.C-A v. Graves-Gilbert Clinic et al. 20-CI-01250	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11	Dubree et al. v. Graves-Gilbert Clinic et al. 22-CI-00359	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12	Coldwell et al. v. Graves-Gilbert Clinic et al. 22-CI-01204	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13	Nordike v. Dr. Tim A. Weirson; Dr. Jennifer Shuemaker; and Medical Center at Bowling Green 22-CI-01034	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.14	William v. Graves-Gilbert Clinic et al. 22-CI-01227	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15	Tweedy et al. v. Robert Shane Riley, D.O.; and Tyler Delane Miller 22-CI-01438	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16	McAdoo, Next Friend, Natural Guardian, and Mother of C.A. v. Nathan Stice, M.D. and Kathy Howard 22-CI-01437	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17	Watwood et al. v. Graves-Gilbert Clinic et al. 18-CI-01575	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.18	Simpson et al. v. Graves-Gilbert Clinic et al. 19-CI-00122	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.19	Parkinson et al. v. Graves-Gilbert Clinic et al. 1:17-CV-00185-HBB	Malpractice	USDC - Western Dist. of Ky. 241 East Main Street Bowling Green, KY 42101	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.20	Light et al. v. Graves-Gilbert Clinic et al. 18-CI-01679	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.21	Phelps et al. v. Graves-Gilbert Clinic et al. 19-CI-01217	Malpractice	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.22 Cardona v. Graves-Gilbert Clinic et al. 20-CI-01083	Employment	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 Thurman et al. v. Dr. Kamal P. Singh 19-CI-01030	Employment	Warren County Circuit Court Warren County Justice Center 1001 Center St., Suite 102 Bowling Green, KY 42101	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.24 Graves-Gilbert Clinic v. [Various Patients]	Collections		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. United Way	Cash	2022	\$10,000.00
Recipients relationship to debtor			
9.2. American Heart Association	Cash	2021	\$5,000.00
Recipients relationship to debtor			
9.3. American Red Cross	Cash	2021	\$44,000.00
Recipients relationship to debtor			
9.4. B.G. International Center	Cash	2021	\$20,000.00
Recipients relationship to debtor			

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

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	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.5.	United Way	Cash	2021	\$58,000.00
	Recipients relationship to debtor			
9.6.	Wrote, Inc.	Cash	2021	\$2,000.00
	Recipients relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Stites & Harbison, PLLC 400 W. Market St. Suite 1800 Louisville, KY 40202-3352		Pre-filing attorney fees	\$24,832.00
	Email or website address stites.com			
	Who made the payment, if not debtor?			
11.2.	Stites & Harbison, PLLC 400 W. Market St. Suite 1800 Louisville, KY 40202-3352		Retainer paid December 2022	\$60,000.00
	Email or website address stites.com			
	Who made the payment, if not debtor?			

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.3.	Kaplan Johnson Abate & Bird LLP 710 West Main Street Fourth Floor Louisville, KY 40202		Retainer paid December 2022	\$25,000.00
	Email or website address kaplanjohnsonlaw.com			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
 - diagnosing or treating injury, deformity, or disease, or
 - providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. Graves Gilbert Clinic 201 Park St Bowling Green, KY 42101	Main Location	
	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept?

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

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Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.2. Family Care Center 2724 Nashville Road Bowling Green, KY 42101	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.3. Hartland Location 1065 Ashley St #200 Bowling Green, KY 42103	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.4. Greenview Surgery Center 484 Golden Autumn Way Suite 201 Bowling Green, KY 42103	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.5. PrimeCare 990 Wilkinson Trace Bowling Green, KY 42103	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.6. Walk In Care - Bowling Green 1225 Fairway St Bowling Green, KY 42103	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.7. WKONA 165 Natchez Trace Ave Bowling Green, KY 42103	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.8. Walk In Care/Work Care - Nashville Road 5796 Nashville Road		

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
Bowling Green, KY 42101	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.9. Walk In Care/Work Care - Louisville Road 6807 Louisville Road Bowling Green, KY 42101	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.10 Walk In Care/Work Care - Peachtree Place 5575 Scottsville Road Bowling Green, KY 42102	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.11 Pediatric Associates of Bowling Green 1211 Ashley Circle Bowling Green, KY 42104	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.12 720 2nd Ave #303 Office 720 2nd Ave #303 Bowling Green, KY 42101	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.13 1402 Andrea Street Office 1402 Andrea Street Bowling Green, KY 42104	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.14 Greenview Physicians Specialty Center 1325 Andrea St. Suite 200 Bowling Green, KY 42104	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.15 Bowling Green High School 1801 Rockingham Ave. Bowling Green, KY 42104	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.16 Greenview Physicians Specialty Center 1325 Andrea St. Suite 101 Bowling Green, KY 42104	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.17 Brownsville Office 100 Park Place Suite 6 Brownsville, KY 42210	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.18 Cave City Office 400 N. Dixie Hwy Cave City, KY 42127	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.19 Graves Gilbert Clinic - Franklin 1112 S Main St Franklin, KY 42134	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.20 Memorial Drive - Franklin 119 Memorial Drive Franklin, KY 42134	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.21 Walk In Care/Work Care - Franklin 1112 S Main St Franklin, KY 42134	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i>

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.22 Glasgow Physicians Blvd 102 Physicians Blvd Glasgow, KY 42141	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.23 Glasgow Race Street 1330 N Race St Glasgow, KY 42141	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.24 Glasgow Care Clinic 405 S L Rogers Wells Blvd Glasgow, KY 42141	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.25 Lewisburg Location 285 Stacker Street Lewisburg, KY 42256	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.26 Monroe County Hospital 529 Capp Harlan Road Tompkinsville, KY 42167	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.27 Morgantown Office 101 W. Roberts St Morgantown, KY 42261	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? <i>Check all that apply:</i> <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.28 Munfordville Location 950 Main Street		

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
Munfordville, KY 42765	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.29 Ohio County Hospital Sleep Disorders Ctr 1211 Old Main Street Hartford, KY 42347	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.30 Russellville Location 1405 Nashville Street Russellville, KY 42276	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.31 Smiths Grove Office 121 College Street Smiths Grove, KY 42171	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.32 Twin Lakes Regional Medical Ctr Sleep Disorders Center 910 Wallace Avenue Leitchfield, KY 42754	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply: <input checked="" type="checkbox"/> Electronically <input type="checkbox"/> Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- No.
- Yes. State the nature of the information collected and retained.

Patient medical records

Does the debtor have a privacy policy about that information?

- No
- Yes

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?

No Go to Part 10.

Yes. Fill in below:

Name of plan **Graves-Gilbert Clinic Revised Profit Sharing Plan** Employer identification number of the plan
EIN: _____

Has the plan been terminated?

- No
- Yes

No Go to Part 10.

Yes. Fill in below:

Name of plan **Graves-Gilbert Clinic Cash Balance Plan - Physician Groups** Employer identification number of the plan
EIN: _____

Has the plan been terminated?

- No
- Yes

No Go to Part 10.

Yes. Fill in below:

Name of plan **Graves-Gilbert Clinic Cash Balance Plan - Non-Physician Employees** Employer identification number of the plan
EIN: _____

Has the plan been terminated?

- No
- Yes

No Go to Part 10.

Yes. Fill in below:

Name of plan **Graves-Gilbert Clinic Supplemental Profit Sharing Plan** Employer identification number of the plan
EIN: _____

Has the plan been terminated?

- No
- Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
US Bank 500 E. Main Ave. Bowling Green, KY 42101	201 Park Street Bowling Green, KY 42102	Back-ups of electronically stored information	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Storage Facility 95 Riverview Drive Bowling Green, KY 42101	Graves-Gilbert Clinic 201 Park Street Bowling Green, KY 42102	Paper records, furniture, and equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Describe the property	Value
Various Physicians and Officers	Debtor's clinics and business office	Miscellaneous personal office furnishings	Unknown

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No.
- Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- No.
- Yes. Provide details below.

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Agency Interest Number (AI#): 132643 121, 123, and 129 US Highway 31W Bypass Bowling Green, KY	KY Energy and Environment Cabinet Kentucky Division of Waste Management 300 Sower Blvd Frankfort, KY 40601	Site is subject to a Property Management Plan under Brownfield Redevelopment Program	

24. Has the debtor notified any governmental unit of any release of hazardous material?

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name address	Describe the nature of the business	Employer Identification number <small>Do not include Social Security number or ITIN.</small>	Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- None

Name and address	Date of service From-To
26a.1. Patricia Bunch 401 Kentucky Street Bowling Green, KY 42101	03/09/1987 - Present
26a.2. Stephanie Priddy 401 Kentucky Street Bowling Green, KY 42101	05/09/2011 - Present
26a.3. Kelley Burton 401 Kentucky Street Bowling Green, KY 42101	01/16/2018 - Present
26a.4. Laura Hogan 401 Kentucky Street Bowling Green, KY 42101	08/12/2019 - Present
26a.5. Amy Willingham 401 Kentucky Street Bowling Green, KY 42101	09/27/2021 - Present
26a.6. Ivette Arce-Flores 401 Kentucky Street Bowling Green, KY 42101	10/24/2022 - Present
26a.7. Jordan Carder 401 Kentucky Street Bowling Green, KY 42101	10/01/2021 - 09/22/2022

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Name and address		Date of service From-To
26a.8.	Amy Ford 401 Kentucky Street Bowling Green, KY 42101	09/12/2016 - 08/21/2021

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address		Date of service From-To
26b.1.	Carr, Riggs & Ingram CPAs, LLC 922 State St Suite 100 Bowling Green, KY 42101	2021-2022

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	Steve Sinclair, CFO 12424 Woodburn Allen Springs Rd Alvaton, KY 42122	
26c.2.	Patricia Bunch, Accounting Manager	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address	
26d.1.	Capital One PO Box 30285 Salt Lake City, UT 84130
26d.2.	Coker Group 2400 Lakeview Pkwy, #400 Alpharetta, GA 30009
26d.3.	Cole & Moore, PSC 921 College St. Bowling Green, KY 42101
26d.4.	Alice Duff c/o Gardner Law 5920 Timber Ridge Drive Prospect, KY 40059
26d.5.	Frost Brown Todd LLC 400 W. Market St, 32nd Floor Louisville, KY 40202
26d.6.	HCA Healthcare, Inc. One Park Plaza Nashville, TN 37203

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Name and address

26d.7. **Houchens Insurance Group**
1240 Fairway St.
Bowling Green, KY 42103

26d.8. **Kaplan Johnson Abate & Bird LLP**
710 West Main Street
Fourth Floor
Louisville, KY 40202

26d.9. **Microsoft Corporation**
One Microsoft Way
Redmond, WA 98052

26d.10. **Pinnacle Bank**

26d.11. **PNC Equipment Finance**

26d.12. **Privia Health Group**
950 N Glebe Road
Arlington, VA 22203

26d.13. **Professionals Insurance Agency, Inc.**
2904 Eastpoint Parkway
Louisville, KY 40223

26d.14. **Stites & Harbison, PLLC**
400 W. Market St.
Suite 1800
Louisville, KY 40202-3352

26d.15. **U.S. Bank Nat'l Assoc**
500 East Main Street
Bowling Green, KY 42101

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- No
- Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Jerry P. Roy	979 Cumberland Ridge Way Bowling Green, KY 42103	President and Shareholder	Class A - 1.27% Class B - 0.90%
Samer R. Kalakish	1317 Scottsville Road #712 Bowling Green, KY 42103	1st Vice President and Shareholder	Class A - 1.27% Class B - 1.00%

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Name	Address	Position and nature of any interest	% of interest, if any
Kirk A. Fee	3 Chestnut Hill Court Bowling Green, KY 42103	2nd Vice President and Shareholder	Class A - 1.27% Class B - 1.18%
Sean T. Willgruber	1056 Grider Pond Road Bowling Green, KY 42104	Treasurer and Shareholder	Class A - 1.27% Class B - 0.88%
Robert T. Wesley	3155 Blackjack Road Franklin, KY 42134	Secretary and Shareholder	Class A - 1.27% Class B - 1.49%
Cory M. Fielding	182 Stone Mill Court Alvaton, KY 42122	Director and Shareholder	Class A - 0.64% Class B - 0.94%
Marc A. Moore	422 Mount Everest Court Bowling Green, KY 42104	Director and Shareholder	Class A - 1.27% Class B - 1.42%
Kamal P. Singh	670 Covington Grove Blvd Bowling Green, KY 42104	Director and Shareholder	Class A - 1.27% Class B - 1.02%
Thomas G. Sternberg	1211 Lakemere Avenue Bowling Green, KY 42103	Director and Shareholder	Class A - 1.27% Class B - 0.75%
Chris Thorn	122 Bent Creek Court Bowling Green, KY 42103	CEO and Assistant Secretary	
Steve Sinclair	12424 Woodburn Allen Springs Rd Alvaton, KY 42122	CFO and Assistant Treasurer	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- No
- Yes. Identify below.

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

Name	Address	Position and nature of any interest	Period during which position or interest was held
William J. Travis, MD		Director	06/01/2021 - 06/30/2022

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- No
 Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Kirk Fee, M.D.	Compensation - \$1,114,396.99 Profit Sharing Plan - \$38,500.00 Dividends - \$403.20	12/29/2021 - 12/28/2022	
	Relationship to debtor 2nd Vice President			
30.2	Cory Fielding, M.D.	Compensation - \$556,523.81 Profit Sharing Plan - \$38,500.00 Dividends - \$249.90	12/29/2021 - 12/28/2022	
	Relationship to debtor Director			
30.3	Joseph Gass, M.D.	Compensation - \$610,451.68 Cash Balance Plan - \$100,000.00 Profit Sharing Plan - \$38,500.00 Dividends - \$613.20	12/29/2021 - 12/28/2022	
	Relationship to debtor Former Director			
30.4	Samer Kalakish, M.D.	Compensation - \$738,205.83 Profit Sharing Plan - \$38,500.00 Dividends - \$403.20	12/29/2021 - 12/28/2022	
	Relationship to debtor 1st Vice President			
30.5	Marc Moore, M.D.	Compensation - \$998,378.64 Cash Balance Plan - \$200,000.00 Profit Sharing Plan - \$38,500.00 Dividends - \$462.00	12/29/2021 - 12/28/2022	
	Relationship to debtor Director			
30.6	Jerry Roy, M.D.	Compensation - \$850,996.47 Profit Sharing Plan - \$38,500.00 Dividends - \$378.00	12/29/2021 - 12/28/2022	
	Relationship to debtor President			

Debtor **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case number (if known) **22-10763**

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.7	Sarah Roy	Compensation - \$88,688.34 Profit Sharing Plan - \$15,019.43	12/29/2021 - 12/28/2022	
	Relationship to debtor Employee and Spouse of President			
30.8	Steve Sinclair 12424 Woodburn Allen Springs Rd Alvaton, KY 42122	Compensation - \$241,945.29 Profit Sharing Plan - \$30,743.20	12/29/2021 - 12/28/2022	
	Relationship to debtor CFO and Asst. Treasurer			
30.9	Abbi Singh, M.D.	Compensation - \$321,295.32 Profit Sharing Plan - \$27,896.00 Dividends - \$436.20	12/29/2021 - 12/28/2022	
	Relationship to debtor Shareholder and Spouse of Director			
30.10	Kamal Singh, M.D.	Compensation - \$787,916.84 Profit Sharing Plan - \$38,500 Dividends - \$403.20	12/29/2021 - 12/28/2022	
	Relationship to debtor Director			
30.11	Kushal Singh, M.D.	Compensation - \$740,280.44 Profit Sharing Plan - \$38,500.00 Dividends - \$403.20	12/29/2021 - 12/28/2022	
	Relationship to debtor Shareholder and Sibling of Director			
30.12	Tom Sternberg, M.D.	Compensation - \$355,835.78 Profit Sharing Plan - \$37,942.00 Dividends - \$470.40	12/29/2021 - 12/28/2022	
	Relationship to debtor Director			
30.13	Chris Thorn 122 Bent Creek Court Bowling Green, KY 42103	Compensation - \$325,605.66 Profit Sharing Plan - \$38,500.00	12/29/2021 - 12/28/2022	
	Relationship to debtor CEO and Asst. Secretary			

Debtor Gilbert, Barbee, Moore & McIlvoy, P.S.C.

Case number (if known) 22-10763

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 4.	<u>William Travis, M.D.</u>	<u>Compensation - \$376,323.49 Cash Balance Plan - \$100,000.00 Profit Sharing Plan - \$38,500.00 Dividends - \$327.60</u>	<u>12/29/2021 - 12/28/2022</u>	
	<u>Relationship to debtor Former Director</u>			
30.1 5.	<u>Rob Wesley, M.D.</u>	<u>Compensation - \$1,116,496.22 Cash Balance Plan - \$50,000.00 Profit Sharing Plan - \$38,500.00 Dividends - \$386.40</u>	<u>12/29/2021 - 12/28/2022</u>	
	<u>Relationship to debtor Secretary</u>			
30.1 6.	<u>Sean Willgruber, M.D.</u>	<u>Compensation - \$865,087.00 Profit Sharing Plan - \$38,500.00 Dividends - \$378.00</u>	<u>12/29/2021 - 12/28/2022</u>	
	<u>Relationship to debtor Treasurer</u>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No
- Yes. Identify below.

<u>Name of the parent corporation</u>	<u>Employer Identification number of the parent corporation</u>
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32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
- Yes. Identify below.

<u>Name of the pension fund</u>	<u>Employer Identification number of the pension fund</u>
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Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with 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, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

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

Executed on January 20, 2023

<u>/s/ Steven K. Sinclair</u>	<u>Steven K. Sinclair</u>
Signature of individual signing on behalf of the debtor	Printed name

Position or relationship to debtor Chief Financial Officer

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
- Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Western District of Kentucky

In re Gilbert, Barbee, Moore & McIlvoy, P.S.C. Debtor(s)

Case No. 22-10763
Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

Table with 2 columns: Description of compensation and Amount. Rows include: For legal services, I have agreed to accept (\$ 385/hour); Prior to the filing of this statement I have received (\$ 25,000 (retainer)); Balance Due (\$ 385/hour).

2. The source of the compensation paid to me was:

[X] Debtor [] Other (specify):

3. The source of compensation to be paid to me is:

[X] Debtor [] Other (specify):

4. [X] I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

[] I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
d. [Other provisions as needed]

Negotiations with creditors; preparation and filing of motions and applications as needed.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtor in any associated cases or proceedings pending or initiated before state courts other than for purposes of monitoring and enforcing automatic stay, federal courts not related to the bankruptcy case, or administrative tribunals.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 20, 2023

Date

/s/ Tyler R. Yeager

Tyler R. Yeager

Signature of Attorney

Kaplan Johnson Abate & Bird LLP

710 West Main Street

Fourth Floor

Louisville, KY 40202

(502) 416-1630 Fax: (502) 540-8282

tyeager@kaplanjohnsonlaw.com

Name of law firm

**United States Bankruptcy Court
Western District of Kentucky**

In re **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Debtor(s)

Case No. **22-10763**Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
John Adams 1734 B Cassety Road Franklin, KY 42134	A	1	Voting
John Adams 1734 B Cassety Road Franklin, KY 42134	B	27	Equity
Anthony R. Arauz 301 Preakness Way Bowling Green, KY 42104	A	2	Voting
Anthony R. Arauz 301 Preakness Way Bowling Green, KY 42104	B	45	Equity
Avinash Aravantagi 838 Rivergreen Lane Bowling Green, KY 42103	A	1	Voting
Avinash Aravantagi 838 Rivergreen Lane Bowling Green, KY 42103	B	44	Equity
Pravin N. Avula 180 Tony Avenue Bowling Green, KY 42103	A	1	Voting
Pravin N. Avula 180 Tony Avenue Bowling Green, KY 42103	B	39	Equity
Ashley J. Bennett 308 Crestone Peak Bowling Green, KY 42104	A	2	Voting
Ashley J. Bennett 308 Crestone Peak Bowling Green, KY 42104	B	46	Equity
Mark E. Bigler 3035 Hunting Creek Drive Bowling Green, KY 42104	A	2	Voting

In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Mark E. Bigler 3035 Hunting Creek Drive Bowling Green, KY 42104	B	76	Equity
Jeffrey L. Bitterling 183 Claiborne Court Bowling Green, KY 42104	A	1	Voting
Jeffrey L. Bitterling 183 Claiborne Court Bowling Green, KY 42104	B	46	Equity
Andrea J. Brooks 1042 S. Park Drive Bowling Green, KY 42103	A	2	Voting
Andrea J. Brooks 1042 S. Park Drive Bowling Green, KY 42103	B	49	Equity
Beth A. Bryant 1528 Cabell Drive Bowling Green, KY 42104	A	2	Voting
Beth A. Bryant 1528 Cabell Drive Bowling Green, KY 42104	B	48	Equity
John T. Burch 306 Nash Stone Court Alvaton, KY 42122	B	48	Equity
Christopher J. Castelli 160 Walking Stick Trail Court Bowling Green, KY 42103	A	2	Voting
Christopher J. Castelli 160 Walking Stick Trail Court Bowling Green, KY 42103	B	63	Equity
Amber H. Chambers 2096 Quail Run Drive Bowling Green, KY 42104	A	2	Voting
Amber H. Chambers 2096 Quail Run Drive Bowling Green, KY 42104	B	52	Equity

List of equity security holders consists of 17 total page(s)

In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Chase A. Beliles 1412 Willow Way Bowling Green, KY 42103	A	1	Voting
Chase A. Beliles 1412 Willow Way Bowling Green, KY 42103	B	33	Equity
Ronak S. Chaudhari 2131 Belle Heaven Blvd. Bowling Green, KY 42104	A	2	Voting
Ronak S. Chaudhari 2131 Belle Heaven Blvd. Bowling Green, KY 42104	B	45	Equity
Tiffani Cherry 1106 Harbor Court Franklin, KY 42134	A	1	Voting
Tiffani Cherry 1106 Harbor Court Franklin, KY 42134	B	45	Equity
Sandeep Chhabra 1806 Bent Tree Court Bowling Green, KY 42103	A	2	Voting
Sandeep Chhabra 1806 Bent Tree Court Bowling Green, KY 42103	B	48	Equity
Shalini Chhabra 1806 Bent Tree Court Bowling Green, KY 42103	A	2	Voting
Shalini Chhabra 1806 Bent Tree Court Bowling Green, KY 42103	B	52	Equity
Wesley H. Chou 480 Wilson Road Alvaton, KY 42122	A	2	Voting
Wesley H. Chou 480 Wilson Road Alvaton, KY 42122	B	70	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
James Bosco Clements 712 S. Green Street Glasgow, KY 42141	A	1	Voting
James Bosco Clements 712 S. Green Street Glasgow, KY 42141	B	33	Equity
Christopher Cook 2450 Silver Oak Street Bowling Green, KY 42104	A	1	Voting
Christopher Cook 2450 Silver Oak Street Bowling Green, KY 42104	B	27	Equity
Todd D. Drexel 5863 Cemetery Road Bowling Green, KY 42103	A	2	Voting
Todd D. Drexel 5863 Cemetery Road Bowling Green, KY 42103	B	60	Equity
Kirk A. Fee 3 Chestnut Hill Court Bowling Green, KY 42103	A	2	Voting
Kirk A. Fee 3 Chestnut Hill Court Bowling Green, KY 42103	B	48	Equity
Cory M. Fielding 182 Stone Mill Court Alvaton, KY 42122	A	1	Voting
Cory M. Fielding 182 Stone Mill Court Alvaton, KY 42122	B	33	Equity
Asad D. Fraser 1317 Overlook Lane Bowling Green, KY 42103	A	2	Voting
Asad D. Fraser 1317 Overlook Lane Bowling Green, KY 42103	B	78	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Zahid G. Fraser 351 Briggs Hill Road Bowling Green, KY 42101	A	1	Voting
Zahid G. Fraser 351 Briggs Hill Road Bowling Green, KY 42101	B	45	Equity
Kourtney G. Gardner 220 Stone Trace Court Alvaton, KY 42103	A	1	Voting
Kourtney G. Gardner 220 Stone Trace Court Alvaton, KY 42103	B	27	Equity
Joseph C. Gass 1207 Ironwood Drive Bowling Green, KY 42103	A	2	Voting
Joseph C. Gass 1207 Ironwood Drive Bowling Green, KY 42103	B	73	Equity
Amy C. Gearlds 2150 Matlock Road Bowling Green, KY 42104	A	2	Voting
Amy C. Gearlds 2150 Matlock Road Bowling Green, KY 42104	B	45	Equity
Juliana E. Gilbert 143 Walking Stick Trail Court Bowling Green, KY 42103	A	1	Voting
Juliana E. Gilbert 143 Walking Stick Trail Court Bowling Green, KY 42103	B	38	Equity
Katherine Gilliam 127 Kelsey Circle Russellville, KY 42276	A	1	Voting
Katherine Gilliam 127 Kelsey Circle Russellville, KY 42276	B	32	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
John Gover 3011 Springwood Drive Bowling Green, KY 42104	A	2	Voting
John Gover 3011 Springwood Drive Bowling Green, KY 42104	B	46	Equity
Diana Granese 240 Bent Creek Drive Bowling Green, KY 42103	A	2	Voting
Diana Granese 240 Bent Creek Drive Bowling Green, KY 42103	B	49	Equity
Jacqueline Granese 240 Bent Creek Drive Bowling Green, KY 42103	A	1	Voting
Jacqueline Granese 240 Bent Creek Drive Bowling Green, KY 42103	B	54	Equity
Tage F. Haase 737 Huntington Bowling Green, KY 42103	A	2	Voting
Tage F. Haase 737 Huntington Bowling Green, KY 42103	B	67	Equity
J. Randall Hansbrough 730 Covington Grove Blvd Bowling Green, KY 42104	A	2	Voting
J. Randall Hansbrough 730 Covington Grove Blvd Bowling Green, KY 42104	B	83	Equity
Loubna N. Hatem 711 Cumberland Ridge Way Bowling Green, KY 42103	A	1	Voting
Loubna N. Hatem 711 Cumberland Ridge Way Bowling Green, KY 42103	B	16	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Hope H. Havener 150 Triple Crown Court Bowling Green, KY 42104	A	2	Voting
Hope H. Havener 150 Triple Crown Court Bowling Green, KY 42104	B	70	Equity
James Ralph Helstley 1704 Lester Court Bowling Green, KY 42103	A	2	Voting
James Ralph Helstley 1704 Lester Court Bowling Green, KY 42103	B	45	Equity
Ashley D. Hill 1024 Ironwood Drive Bowling Green, KY 42103	A	1	Voting
Ashley D. Hill 1024 Ironwood Drive Bowling Green, KY 42103	B	33	Equity
Eme O. Igbokwe 30 Talbott Drive Bowling Green, KY 42103	A	2	Voting
Eme O. Igbokwe 30 Talbott Drive Bowling Green, KY 42103	B	51	Equity
Samer R. Kalakish 1317 Scottsville Road #712 Bowling Green, KY 42103	A	2	Voting
Samer R. Kalakish 1317 Scottsville Road #712 Bowling Green, KY 42103	B	48	Equity
Charles S. Lin 1576 Stillwater Court Bowling Green, KY 42103	A	2	Voting
Charles S. Lin 1576 Stillwater Court Bowling Green, KY 42103	B	72	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Timothy Lonergan 795 Keystone Drive Bowling Green, KY 42013	A	1	Voting
Timothy Lonergan 795 Keystone Drive Bowling Green, KY 42013	B	27	Equity
Craig A. Losekamp 13202 Cemetery Rd Bowling Green, KY 42103	A	2	Voting
Craig A. Losekamp 13202 Cemetery Rd Bowling Green, KY 42103	B	68	Equity
Mark Lowry III 274 Timber Lane Drive Bowling Green, KY 42101	A	2	Voting
Mark Lowry III 274 Timber Lane Drive Bowling Green, KY 42101	B	69	Equity
Wilfred Lumbang 1766 Hunts Lane Bowling Green, KY 42103	A	2	Voting
Wilfred Lumbang 1766 Hunts Lane Bowling Green, KY 42103	B	46	Equity
Brian K. Macy 541 Covington Grove Court Bowling Green, KY 42104	A	2	Voting
Brian K. Macy 541 Covington Grove Court Bowling Green, KY 42104	B	53	Equity
Gregg A. Malmquist 524 Rivergreen Lane Bowling Green, KY 42103	A	2	Voting
Gregg A. Malmquist 524 Rivergreen Lane Bowling Green, KY 42103	B	48	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

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LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Sara L. Mangold 209 Cynthia Lynn Drive Bowling Green, KY 42103	A	2	Voting
Sara L. Mangold 209 Cynthia Lynn Drive Bowling Green, KY 42103	B	53	Equity
D. G. Mastronardi 1017 Mooreland Drive Bowling Green, KY 42103	A	2	Voting
D. G. Mastronardi 1017 Mooreland Drive Bowling Green, KY 42103	B	72	Equity
Marc A. Moore 422 Mount Everest Court Bowling Green, KY 42104	A	2	Voting
Marc A. Moore 422 Mount Everest Court Bowling Green, KY 42104	B	55	Equity
Keith D. Morrison 62 Saxon Lane Bowling Green, KY 42103	A	2	Voting
Keith D. Morrison 62 Saxon Lane Bowling Green, KY 42103	B	48	Equity
David C. Napier 703 Neal Howell Road Bowling Green, KY 42014	A	2	Voting
David C. Napier 703 Neal Howell Road Bowling Green, KY 42014	B	54	Equity
Ashley A. Norris 800 Elmo Road Glasgow, KY 42141	A	1	Voting
Ashley A. Norris 800 Elmo Road Glasgow, KY 42141	B	45	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Virag Pandeya 1180 Raider Hollow Road Munfordville, KY 42765	A	1	Voting
Virag Pandeya 1180 Raider Hollow Road Munfordville, KY 42765	B	40	Equity
Neha A. Pansuria 1140 Drakes Ridge Lane Bowling Green, KY 42103	A	2	Voting
Neha A. Pansuria 1140 Drakes Ridge Lane Bowling Green, KY 42103	B	54	Equity
James R. Parkerson 1016 Cumberland Ridge Way Bowling Green, KY 42103	A	1	Voting
James R. Parkerson 1016 Cumberland Ridge Way Bowling Green, KY 42103	B	39	Equity
Christopher M. Patton 1083 Rivergreen Lane Bowling Green, KY 42103	A	2	Voting
Christopher M. Patton 1083 Rivergreen Lane Bowling Green, KY 42103	B	48	Equity
Pippa Pinckley-Stewart 1150 Grider Pond Bowling Green, KY 42104	A	2	Voting
Pippa Pinckley-Stewart 1150 Grider Pond Bowling Green, KY 42104	B	150	Equity
Jeffrey D. Purvis 177 Farmer Lane Bowling Green, KY 42104	A	2	Voting
Jeffrey D. Purvis 177 Farmer Lane Bowling Green, KY 42104	B	48	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Rahil Rafeedheen 1611 Bent Tree Avenue Bowling Green, KY 42103	A	1	Voting
Rahil Rafeedheen 1611 Bent Tree Avenue Bowling Green, KY 42103	B	16	Equity
Donald F. Rauh 731 Newberry Street Bowling Green, KY 42103	A	2	Voting
Donald F. Rauh 731 Newberry Street Bowling Green, KY 42103	B	188	Equity
Karuna Reddy 1036 Rivergreen Lane Bowling Green, KY 42103	A	1	Voting
Karuna Reddy 1036 Rivergreen Lane Bowling Green, KY 42103	B	45	Equity
Sherryl B. Reed 2606 Lost Cove Court Bowling Green, KY 42104	A	2	Voting
Sherryl B. Reed 2606 Lost Cove Court Bowling Green, KY 42104	B	104	Equity
David B. Richards 8 Chestnut Hill Court Bowling Green, KY 42103	A	2	Voting
David B. Richards 8 Chestnut Hill Court Bowling Green, KY 42103	B	46	Equity
Robert Shane Riley 221 Village Way Bowling Green, KY 42104	A	2	Voting
Robert Shane Riley 221 Village Way Bowling Green, KY 42104	B	46	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Jerry P. Roy 979 Cumberland Ridge Way Bowling Green, KY 42103	A	2	Voting
Jerry P. Roy 979 Cumberland Ridge Way Bowling Green, KY 42103	B	45	Equity
John A. Ruth, Jr. 2055 Jackson Bridge Road Bowling Green, KY 42101	A	1	Voting
John A. Ruth, Jr. 2055 Jackson Bridge Road Bowling Green, KY 42101	B	45	Equity
Matthew E. Rutter 715 Newman Way Bowling Green, KY 42101	A	2	Voting
Matthew E. Rutter 715 Newman Way Bowling Green, KY 42101	B	54	Equity
Roger Scott Sandelin 261 Aaron Road Bowling Green, KY 42101	A	1	Voting
Roger Scott Sandelin 261 Aaron Road Bowling Green, KY 42101	B	22	Equity
Vidya Seshadri 988 Rivergreen Lane Bowling Green, KY 42103	A	2	Voting
Vidya Seshadri 988 Rivergreen Lane Bowling Green, KY 42103	B	51	Equity
Nirav A. Sheth 284 Lakeside Way Bowling Green, KY 42103	A	2	Voting
Nirav A. Sheth 284 Lakeside Way Bowling Green, KY 42103	B	53	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Phillip J. Singer 1799 Iron Bridge Road Bowling Green, KY 42103	A	2	Voting
Phillip J. Singer 1799 Iron Bridge Road Bowling Green, KY 42103	B	48	Equity
Abhilasha M. Singh 670 Covington Grove Blvd Bowling Green, KY 42104	A	2	Voting
Abhilasha M. Singh 670 Covington Grove Blvd Bowling Green, KY 42104	B	52	Equity
Kamal P. Singh 670 Covington Grove Blvd Bowling Green, KY 42104	A	2	Voting
Kamal P. Singh 670 Covington Grove Blvd Bowling Green, KY 42104	B	48	Equity
Kushal P. Singh 620 Covington Grove Blvd Bowling Green, KY 42104	A	2	Voting
Kushal P. Singh 620 Covington Grove Blvd Bowling Green, KY 42104	B	48	Equity
J. Christopher Smith 4035 Glen Lily Road Bowling Green, KY 42101	A	1	Voting
J. Christopher Smith 4035 Glen Lily Road Bowling Green, KY 42101	B	45	Equity
Pamela A. Smith 3447 Browning Road Rockfield, KY 42274	A	1	Voting
Pamela A. Smith 3447 Browning Road Rockfield, KY 42274	B	38	Equity

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In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Thomas G. Sternberg 1211 Lakemere Avenue Bowling Green, KY 42103	A	2	Voting
Thomas G. Sternberg 1211 Lakemere Avenue Bowling Green, KY 42103	B	56	Equity
Nathan D. Stice 729 Cumberland Ridge Way Bowling Green, KY 42103	A	2	Voting
Nathan D. Stice 729 Cumberland Ridge Way Bowling Green, KY 42103	B	50	Equity
Faith F. Sun 886 Rivergreen Lane Bowling Green, KY 42103	A	1	Voting
Faith F. Sun 886 Rivergreen Lane Bowling Green, KY 42103	B	45	Equity
William J. Travis 1246 State Street Bowling Green, KY 42101	B	39	Equity
Charles Andy Turner 876 Jim Jolly Road Glasgow, KY 42141	A	1	Voting
Charles Andy Turner 876 Jim Jolly Road Glasgow, KY 42141	B	27	Equity
Leslie K. Tutt 1525 Drakes Ridge Lane Bowling Green, KY 42103	A	2	Voting
Leslie K. Tutt 1525 Drakes Ridge Lane Bowling Green, KY 42103	B	45	Equity
Shannon W. Watkins 1012 Montclair Court Bowling Green, KY 42103	A	2	Voting

List of equity security holders consists of 17 total page(s)

In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Shannon W. Watkins 1012 Montclair Court Bowling Green, KY 42103	B	52	Equity
Jennifer S. Wentworth 1423 Rivergreen Lane Bowling Green, KY 42104	A	2	Voting
Jennifer S. Wentworth 1423 Rivergreen Lane Bowling Green, KY 42104	B	76	Equity
Rance R. Wentworth 1423 Rivergreen Lane Bowling Green, KY 42103	A	2	Voting
Rance R. Wentworth 1423 Rivergreen Lane Bowling Green, KY 42103	B	76	Equity
Robert T. Wesley 3155 Blackjack Road Franklin, KY 42134	A	2	Voting
Robert T. Wesley 3155 Blackjack Road Franklin, KY 42134	B	46	Equity
Lindsey K. Whiteman Brooks 355 Winston Court Bowling Green, KY 42104	A	2	Voting
Lindsey K. Whiteman Brooks 355 Winston Court Bowling Green, KY 42104	B	46	Equity
Timothy A. Wierson 68 Fawn Drive Scottsville, KY 42164	A	2	Voting
Timothy A. Wierson 68 Fawn Drive Scottsville, KY 42164	B	77	Equity
Sean T. Willgruber 1056 Grider Pond Road Bowling Green, KY 42104	A	2	Voting

List of equity security holders consists of 17 total page(s)

In re: **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

Case No. **22-10763**

Debtor(s)

LIST OF EQUITY SECURITY HOLDERS
(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Sean T. Willgruber 1056 Grider Pond Road Bowling Green, KY 42104	B	45	Equity
Roger Todd Williams 1274 Drakes Ridge Lane Bowling Green, KY 42103	A	1	Voting
Roger Todd Williams 1274 Drakes Ridge Lane Bowling Green, KY 42103	B	33	Equity
Jeffrey L. Wilson 277 Country Club Estates Glasgow, KY 42141	A	2	Voting
Jeffrey L. Wilson 277 Country Club Estates Glasgow, KY 42141	B	46	Equity
Michael J. Zachek 1417 Overlook Court Bowling Green, KY 42103	A	2	Voting
Michael J. Zachek 1417 Overlook Court Bowling Green, KY 42103	B	198	Equity
Jianhua Zhu 1811 Ashwood Court Bowling Green, KY 42103	A	2	Voting
Jianhua Zhu 1811 Ashwood Court Bowling Green, KY 42103	B	71	Equity

In re: Gilbert, Barbee, Moore & McIlvoy, P.S.C.

Debtor(s)

Case No. 22-10763

LIST OF EQUITY SECURITY HOLDERS

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Chief Financial Officer** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date January 20, 2023

Signature /s/ Steven K. Sinclair
Steven K. Sinclair

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Western District of Kentucky**

In re Gilbert, Barbee, Moore & McIlvoy, P.S.C. Debtor(s) Case No. 22-10763
Chapter 11

VERIFICATION OF CREDITOR MATRIX

I, the Chief Financial Officer of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: January 20, 2023

/s/ Steven K. Sinclair
Steven K. Sinclair/Chief Financial Officer
Signer/Title

1065 Holdings, LLC
c/o Suzanne Cottrell
1065 Ashley Street
Suite 100
Bowling Green, KY 42103

484 Golden Autumn, LLC
c/o Kevin C Brooks
1010 College Street
Bowling Green, KY 42101

484 Golden Autumn, LLC
350 Scotty's Way
Bowling Green, KY 42101

A-M SYSTEMS
PO BOX 850
CARLSBORG, WA 98324

AAA SYSTEMS
1101 SHIVE LANE
BOWLING GREEN, KY 42103-8032

AARP UHC Medicare Complete HMO
PO Box 30974
Salt Lake City, UT 84130

AARP/United Healthcare Payor 36273
PO Box 740819
Atlanta, GA 30374-0819

ABCO COURIER
PO BOX 1112
BOWLING GREEN, KY 42102-1112

ACS DIAGNOSTICS, INC
1 HUGHES
IRVINE, CA 92618

John Adams II, MD
119 Memorial Drive
Franklin, KY 42134

Aetna Better Health of Kentucky (Mcaid)
PO Box 982969
El Paso, TX 79998-9269

Aetna CC Payor 60054
PO Box 981106
El Paso, TX 79998-1106

Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106

Aetna Payor 60054
PO Box 14079
Lexington, KY 40512-4079

Aetna Senior Supplemental Ins
PO Box 14770
Lexington, KY 40512

AIRGAS USA, LLC
PO BOX 532609
ATLANTA, GA 30353-2609

Alcon Laboratories, Inc.
6201 S. Freeway
Fort Worth, TX 76134

ALCON VISION, LLC
DALLAS JPMC BANK/LOCKBOX 735843
P O BOX 735843
DALLAS, TX 75373-5843

Yakelin Alfaro
c/o Brian E. Clare
600 W. Main St., Suite 300
Louisville, KY 40202

ALK- ABELLO, INC.
7806 SOLUTION CENTER
CHICAGO, IL 60677-7806

All Savers
PO Box 31375
Salt Lake City, UT 84131-0375

Allen County Treasurer
PO Box 193
Scottsville, KY 42164

Allergan USA, Inc.
12975 COLLECTIONS CENTER DRIVE
CHICAGO, IL 60693-0129

Alliance Coal
PO Box 211577
Eagan, MN 55121

Allied Benefit Systems Inc
PO Box 2417
Chicago, IL 60690-2417

Allied Benefit Systems Inc
PO Box 909786
Chicago, IL 60690-9786

Allied Universal
1920 Goldsmith Lane
Louisville, KY 40218

Allscripts, LLC
24630 NETWORK PLACE
CHICAGO, IL 60673-1246

Allstate
PO Box 2874
Clinton, IA 52733

ALSCO
3101 CHARLOTTE AVE
NASHVILLE, TN 37209

ALTERA DIGITAL HEALTH, INC.
PO BOX #735183
CHICAGO, IL 60673-5183

American Financial Security Life
PO Box 14833
Lexington, KY 40512-4833

AMERICAN PAPER & TWINE CO.
P O BOX 90348
Nashville, TN 37209

American Proficiency Institute
Department 9526
PO Box 30516
LANSING, MI 48909-8016

Anthem
PO Box 105187
Atlanta, GA 30348-5187

Anthem Blue Medicare Access
Po Box 105187
Atlanta, GA 30348-5187

Anthem Ky Medicaid
PO Box 61010
Virginia Beach, VA 23466-1010

AppSalute, Inc.
2210 Goldsmith Lane, Suite 225
LOUISVILLE, KY 40218

ARTS OF SOUTHERN KENTUCKY
PO BOX 748
BOWLING GREEN, KY 42102

AS Carriers, Inc.
216 Century St
Ste 100
Bowling Green, KY 42101-7577

ASD Specialty Healthcare, LLC
d/b/a Besse Medical
2801 Horace Shepard Drive
Dothan, AL 36303

Aspirant
500 N. Hurstbourne Pkwy
Suite 100
Louisville, KY 40222

ASR Health Benefits CC
PO Box 6392
Grand Rapids, MI 49516-6392

AT & T BellSouth
4119 Broadway 8TH Floor
San Antonio, TX 78209

Atlantic Coast Life
PO Box 27248
Salt Lake City, UT 84127-0248

Aultworks Occ Med
4650 Hills and Dales Road
Canton, OH 44708

Auto Zone
660 HWY 31 Bypass
Bowling Green, KY 42103

AVANTI
PO BOX 825337
PHILADELPHIA, PA 19182

Avesis Vision Claims Dept
P O Box 38300
Phoenix, AZ 85069-8300

Avotec, Inc.
609 NW Buck Hendry Way
Stuart, FL 34994

PRAVIN AVULA, MD
PO BOX 399
SMITHS GROVE, KY 42171

B & B CLEANING COMPANY, INC.
4681 RUSSELLVILLE RD
BOWLING GREEN, KY 42101

Bankers Fidelity
PO Box 105185
Atlanta, GA 30348-5185

Bankers Life
PO Box 1902
Carmel, IN 46082

Bankers Life and Casualty
PO Box 1935
Carmel, IN 46082-1935

BARREN RIVER UPHOLSTERY INC.
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BECKMAN COULTER INC.
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Benefit Administrative Systems, LLC
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BLUE RIDGE X-RAY
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Blue Shield of Tenn Payor ZBKY40
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BOYD COMPANY
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BRIGGS HOLDING COMPANY, LLC
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Briggs Holding Company, LLC
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c/o TAG Realty LLC
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c/o Greenview Regional Hospital
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Bowling Green, KY 42104

Greenview Hospital, Inc.
c/o TriStar Greenview Regional Hospital
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Bowling Green, KY 42104

Greenwood Nursing & Rehab Center
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PHILIPS HEALTHCARE
PO BOX 100355
Atlanta, GA 30384-0355

PHILIPS RS NORTH AMERICA LLC
P O BOX 405740
ATLANTA, GA 30384-5740

Plum Tree Educational Services
436 Plum Springs Rd
Bowling Green, KY 42101

Pohl, Kiser & Aubrey PSC
11901 Brinley Ave
Louisville, KY 40243

PRECISION DYNAMICS CORP (PDC)
PO BOX 71549
CHICAGO, IL 60694-1995

Precision Strip Inc
86 South Ohio Street
Minster, OH 45865

Premier Access Inc
PO Box 1468
Arlington, TX 76004-1468

Priority Healthcare Dist.
DBA CuraScript Dist
P.O. Box 978510
DALLAS, TX 75397-8510

PYE-BARKER FIRE SAFETY
PO BOX 735358
DALLAS, TX 75373-5358

Quest Diagnostics
1201 S Collegeville Rd CV 3035
Collegeville, PA 19426

QUEST DIAGNOSTICS
PO BOX 740709
Atlanta, GA 30374-0709

R&R CONTROLS
72 R&R WAY, SUITE B
BROWNSVILLE, KY 42210

RECKER CONSULTING (PATHFORWARD)
PO BOX 715554
CINCINNATI, OH 45271-5554

REVENUE CYCLE CODING STRATEGIES LLC
PO BOX 676583
DALLAS, TX 75267-6583

Amber Riley, APRN
221 Village Way
Bowling Green, KY 42103

Riley-White, Incorporated
c/o Donald G. Riley
440 S. Winter St.
Russellville, KY 42276

ROCHE DIAGNOSTICS CORP. PRODUCT
Mail Code 5508
PO Box 71209
CHARLOTTE, NC 28272-1209

ROCHE DIAGNOSTICS CORP. SERVICE
Mail Code 5508
PO Box 71209
CHARLOTTE, NC 28272-1209

Linda Ross
c/o The Simpson Firm
908 State Street, 2nd Floor
PO Box 3480
Bowling Green, KY 42102

Rural Carrier Benefit Plan CC (Quest)
PO Box 14079
Lexington, KY 40512-4079

Safeco Insurance
PO Box 5014
Scranton, PA 18505

Sanofi Pasteur, Inc.
12458 Collections Center Dr
Chicago, IL 60693

Schardein Mechanical
1810 Outer Loop
LOUISVILLE, KY 40219

Louis Carl Schneider
Thomas Law Offices
9418 Norton Commons Blvd Suite 200
Prospect, KY 40059

ScImage, Inc.
4916 El Camino Real
STE 200
Los Altos, CA 94022

Sedgwick
PO Box 14661
Lexington, KY 40512

Sedgwick
PO Box 14490
Lexington, KY 40512

Sedgwick Claims
PO Box 14516
Lexington, KY 40512

Kathy Seigler, Psy.D.
236 Beech Bend Rd
Bowling Green, KY 42101

SELECT MEDICAL CORPORATION
ATTN: AUTUMN BUTZ
225 GRANDVIEW AVE
Camp Hill, PA 17011

SHELDON'S LOOK SHARP DRY CLEANERS
830 FAIRVIEW AVE
BOWLING GREEN, KY 42101

SIEMENS MEDICAL SOLUTIONS
USA INC.DEPT CH 14195
PALATINE, IL 60055-4195

SIGNATURE SIGNS
1736 US 31-W BY-PASS
SUITE 3
Bowling Green, KY 42101

Silac Health
PO Box 11642
Winston Salem, NC 27116

SMILE MAKERS
P.O. BOX 2543
Spartanburg, SC 29304-9824

SOLE SUPPORTS, INC.
PO BOX 400
Bon Aqua, TN 37025-0400

SOUTHERN TOUCH LAWN & LANDSCAPES
PO BOX 50431
Bowling Green, KY 42102

VALERIE SPENCE
4210 CEMETERY RD
SCOTTSVILLE, KY 42164

SPHERE
PO BOX 208308
DALLAS, TX 75320-8308

STARKEY
PO BOX 856915
MINNEAPOLIS, MN 55485-6915

State Farm
PO Box 106170
Atlanta, GA 30348-6170

State Farm Medicare Supplement
PO Box 339403
Greeley, CO 80633-9403

STATE VOLUNTEER MUTUAL INS CO
MSC 30036
PO BOX 415000
NASHVILLE, TN 37241-5000

STATLAB
P.O. BOX 678056
DALLAS, TX 75267-8056

Sterling National
PO Box 11547
Winston-Salem, NC 27116

STEWART RICHEY CONSTRUCTION, INC
2137 GLEN LILY ROAD
BOWLING GREEN, KY 42101

Stupp Bridge Company
445 Century St
Bowling Green, KY 42101

Sumitomo Electric Wiring Systems
1018 Ashley Street
Bowling Green, KY 42102

Jeffrey Taylor
c/o Timothy L. Stevenson
PO Box 51248
Bowling Green, KY 42102

TB Ventures, LLC
6868 Buddy Miller Dr
Alvaton, KY 42122-9610

TB Ventures, LLC
c/o Troy Campbell
6291 Hardcastle Ave
Bowling Green, KY 42103

Teleflex Medical Incorporated
P O BOX 936729
ATLANTA, GA 31193-6729

THE EDMONSON VOICE
PO BOX 94
BROWNSVILLE, KY 42210

THE HILSINGER CO.
dba HILCO
P O BOX 643792
PITTSBURGH, PA 15264-3792

The Murphy Elevator Co. Inc.
128 East Main Street
LOUISVILLE, KY 40202

TMC Transportation
PO Box 1774
Des Moines, IA 50306

TMR
PO Box 1548
MANGO, FL 33550-9902

Tokio Marine
PO Box 483
Jersey City, NJ 07303-9805

Total Fitness Connection, LLC
c/o Robert Dukes
2235 Russellville Road
Bowling Green, KY 42101

Transamerica Life Ins Co
PO Box 310
Grapevine, TX 76099-0310

Triage 4 Pediatrics
P.O. Box 261923
PLANO, TX 75026

Tricare East Humana
PO Box 7981
Madison, WI 53707-7981

Tricare For Life
PO BOX 7890
Madison, WI 53708-7890

TROCAR SUPPLIES
126 NULF DRIVE
COLUMBIANA, OH 44408

TruCare Medical Associates, LLC
PO Box 399
Smiths Grove, KY 42171

Billy & Patricia Tweedy
1551 Lawler Road
Munfordville, KY 42765

U.S. BANK CREDIT CARD
P.O. BOX 6343
FARGO, ND 58125-6343

U.S. Bank Nat'l Assoc
500 East Main Street
Bowling Green, KY 42101

UHC Community Plan (Medicaid)
PO Box 5270
Kingston, NY 12402-5270

UKG INC.
P O BOX 930953
ATLANTA, GA 31193-0953

UMR Payor 39026
PO Box 30541
Salt Lake City, UT 84130-0541

UMR (UHC)
P O Box 145804
Cincinnati, OH 45250-5804

UMWA Health and Retirement Funds
PO Box 99002
Lubbock, TX 79490-9002

United American
PO Box 8080
McKinney, TX 75070-8080

United Healthcare
PO Box 31350
Salt Lake City, UT 84131-0350

United Healthcare Payor 64159
PO Box 740810
Atlanta, GA 30374-0810

United Healthcare Payor 87726
PO Box 30557
Salt Lake City, UT 84130-0557

United Healthcare Payor 87726
PO Box 740800
Atlanta, GA 30374-0800

United Healthcare Payor 87726
PO Box 740809
Atlanta, GA 30374-0809

United Healthcare/Mcare Solutions
PO Box 31362
Salt Lake City, UT 84131-0362

UNITED PARCEL SERVICE
LOCKBOX 577
CAROL STREAM, IL 60132-0577

United World
3316 Farnam Street
Omaha, NE 68175-0001

UnitedHealth Shared Services Pyr 39026
PO Box 30783
Salt Lake City, UT 84130-0783

UNIVERSAL LINEN SERVICE, LLC
1807 COMMERCE RD.
LOUISVILLE, KY 40208

US Marshall Service
601 W Broadway Room 162
Louisville, KY 40202

USAA Insurance
PO Box 5000
Daphne, AL 36526

USAA Life Insurance
PO Box 12750
Pensacola, FL 32591-2750

UV&S
PO BOX 1723
HUTCHINSON, KS 67504-1723

VACCN Optum UHC
PO Box 202117
Florence, SC 29502-2117

Vanderbilt University Medical Center
Office of Legal Affairs
2525 West End Ave., Suite 700
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Nashville, TN 37203

Vanderbilt University Medical Center
Real Estate Office
3319 West End Ave., Suite 200
Attn: Liz Dishman
Nashville, TN 37203-1050

Victig
14441 S Center Point Way
Bluffdale, UT 84065

Richard Wan, MD
PO Box 129
Morgantown, KY 42261

Warren County Occupational License
429 East Tenth Street
Suite 200
Bowling Green, KY 42101

Warren County Public Schools
Net Profit Return
PO Box 9001256
Louisville, KY 40290-1256

Waystar Inc.
1311 Solutions Center
Chicago, IL 60677-1311

WBKO
PO BOX 14200
TALLAHASSEE, FL 32317-4200

Wellcare Medicare
PO Box 31224
Tampa, FL 33631-3224

WellCare of Kentucky MCO
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Tampa, FL 33631-3224

Wellfleet
PO Box 15369
Springfield, MA 01115-5369

Western Ky Orthopaedic Rental Associates
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Suite 100
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Bowling Green, KY 42102

Wilson E.N.T., P.S.C.
277 Country Club Estates
Glasgow, KY 42141

WNKY
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BOWLING GREEN, KY 42102

Roger Woosley
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Mammoth Cave, KY 42259

Workforce Essentials Inc
523 Madison St, Ste A
Clarksville, TN 37040-3619

Workforce QA Accts Payable
1430 S Main St
Salt Lake City, UT 84115-5338

XBS OFFICE SOLUTIONS
790 N Dixie Ave
Ste 500
ELIZABETHTOWN, KY 42701

Joel Zimmerman
1009 S. Fourth Street
Louisville, KY 40203

ZO SKIN HEALTH INC
PO BOX 743031
LOS ANGELES, CA 90074-3031

Zurich
PO Box 968023
Schaumburg, IL 60196

**United States Bankruptcy Court
Western District of Kentucky**

In re **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**
Debtor(s)

Case No. **22-10763**
Chapter **11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Gilbert, Barbee, Moore & McIlvoy, P.S.C.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s) equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

January 20, 2023

Date

/s/ Tyler R. Yeager

Tyler R. Yeager 92722

Signature of Attorney or Litigant

Counsel for **Gilbert, Barbee, Moore & McIlvoy, P.S.C.**

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