B4 (Official Form 4) (12/07)

United States Bankruptcy Court Northern District of Oklahoma

In re	Craig County Hospital Authority			15-10277
		Debtor(s)	Chapter	9

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete	Name, telephone number and complete	Nature of claim (trade	Indicate if claim is	Amount of claim
mailing address including zip	mailing address, including zip code, of	debt, bank loan,	contingent,	[if secured, also
code	employee, agent, or department of creditor	government contract,	unliquidated,	state value of
	familiar with claim who may be contacted	etc.)	disputed, or subject to setoff	security]
AMERICAN RED CROSS:	AMERICAN RED CROSS:	Product or		20,551.22
P.O. BOX 730040	P.O. BOX 730040	Services		
DALLAS, TX 75373-0040	DALLAS, TX 75373-0040			
ARTHREX	ARTHREX	Product or		29,889.12
PO BOX 403511	PO BOX 403511	Services		
ATLANTA, GA 30384-3511	ATLANTA, GA 30384-3511			
BASIC MRI MEDICAL SY	BASIC MRI MEDICAL SY	Product or		20,606.00
1410 RACHAEL LANE	1410 RACHAEL LANE	Services		
WATERLOO, IL 62298	WATERLOO, IL 62298			
BEN E. KEITH CO.	BEN E. KEITH CO.	Product or		13,684.42
P.O. BOX 8170	P.O. BOX 8170	Services		
FORT WORTH, TX 76101	FORT WORTH, TX 76101			
BRACCO DIAGNOSTICS I	BRACCO DIAGNOSTICS I	Product or		20,204.88
259 PROSPECT PLAINS RD	259 PROSPECT PLAINS RD	Services		
BUILDING H	BUILDING H			
CHARLOTTE, NC 28290-2411	CHARLOTTE, NC 28290-2411			
EIDE BAILLY, LLP	EIDE BAILLY, LLP	Product or		11,881.00
1601 N.W. EXPRESSWAY	1601 N.W. EXPRESSWAY	Services		
SUITE 1900	SUITE 1900			
OKLAHOMA CITY, OK 73118	OKLAHOMA CITY, OK 73118			
LABORATORY SUPPLY CO	LABORATORY SUPPLY CO	Product or		31,610.37
P.O. BOX 9289	P.O. BOX 9289	Services		
DALLAS, TX 75267	DALLAS, TX 75267			
LOGAN & LOWRY, LLP	LOGAN & LOWRY, LLP	Product or		18,971.41
P.O. BOX 558	P.O. BOX 558	Services		
VINITA, OK 74301	VINITA, OK 74301			
MCINTOSH SERVICES, I	MCINTOSH SERVICES, I	Product or		273,617.93
PO BOX 472208	PO BOX 472208	Services		
TULSA, OK 74147-2208	TULSA, OK 74147-2208			
MEDHOST OF TENNESSEE	MEDHOST OF TENNESSEE	Product or		73,691.06
2739 MOMENTON PLACE	2739 MOMENTON PLACE	Services		
CHICAGO, IL 60689-5327	CHICAGO, IL 60689-5327			
NEO ORTHOPEDICS & RE	NEO ORTHOPEDICS & RE	Product or		174,226.06
1505 E STEVE OWENS BLVD	1505 E STEVE OWENS BLVD	Services		
MIAMI, OK 74355-0168	MIAMI, OK 74355-0168			

B4 (Offic	ial Form 4) (12/07) - Cont.			
In re	Craig County Hospital Authority	Case No.	15-10277	
	Debtor(s)			

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
OLYMPUS FINANCIAL SE P.O. BOX 200183 PITTSBURGH, PA 15251-0183	OLYMPUS FINANCIAL SE P.O. BOX 200183 PITTSBURGH, PA 15251-0183	Product or Services		14,794.35
OWENS & MINOR 425160 PO BOX 841420 DALLAS, TX 75284-1420	OWENS & MINOR 425160 PO BOX 841420 DALLAS, TX 75284-1420	Product or Services		25,727.76
REGIONAL MEDICAL LAB ATTN: BUSINESS OFFICE 1923 SOUTH UTICA TULSA, OK 74145	REGIONAL MEDICAL LAB ATTN: BUSINESS OFFICE 1923 SOUTH UTICA TULSA, OK 74145	Product or Services		87,765.25
RESPIRONICS P.O. BOX 640817 ATLANTA, GA 30384-5740	RESPIRONICS P.O. BOX 640817 ATLANTA, GA 30384-5740	Product or Services		15,066.93
SAINT FRANCIS HOSPIT SLEEP DISORDERS 6600 S. YALE AVE., SUTIE TULSA, OK 74136	SAINT FRANCIS HOSPIT SLEEP DISORDERS 6600 S. YALE AVE., SUTIE TULSA, OK 74136	Product or Services		15,150.00
TAG CONSULTING 3541 CHAIN BRIDGE ROAD, SUITE 106 FAIRFAX, VA 22030	TAG CONSULTING 3541 CHAIN BRIDGE ROAD, SUITE 106 FAIRFAX, VA 22030	Product or Services		13,043.87
TOSHIBA AMERICA Medical POB 91605 CHICAGO, IL 60693	TOSHIBA AMERICA Medical POB 91605 CHICAGO, IL 60693	Product or Services		25,893.21
U.S. FOODSERVICE, IN P.O. BO 14698 DALLAS, TX 75397-3118	U.S. FOODSERVICE, IN P.O. BO 14698 DALLAS, TX 75397-3118	Product or Services		12,154.13
WERFEN USA, LLC PO BOX 347934 PITTSBURG, PA 15251-4934	WERFEN USA, LLC PO BOX 347934 PITTSBURG, PA 15251-4934 DECLARATION UNDER DENI	Product or Services		29,571.00

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the CEO of the County Hospital Trust named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date	March 2, 2015	Signature	/s/ Herb Crum
			Herb Crum
			CEO

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