

United States Bankruptcy Court Southern District of Indiana

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)

Chapter 11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$0.00		
B - Personal Property	YES	5	\$14,327,739.05		
C - Property Claimed as Exempt	NO	N/A			
D - Creditors Holding Secured Claims	YES	1		\$122,172,103.33	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	5		\$1,500.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	79		\$14,213,322.57	
G - Executory Contracts Unexpired Leases	YES	8			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	NO	N/A			\$0.00
J - Current Expenditures of Individual Debtor(s)	NO	N/A			\$0.00
TOTAL		100	\$14,327,739.05	\$136,386,925.90	

B 6B (Official Form 6B)(12/07)

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply 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 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H U S B A N D W I F E J O I N T O R C O M M U N I T Y P R O P E R T Y	CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash		\$1,680.00

B 6B (Official Form 6B)(12/07)

In re Monroe Hospital, LLC
 Debtor

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 (If known)

SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY PROPERTY	CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		J.P. Morgan Chase Bank 100 S. College Avenue Bloomington, IN 47404 Last Four Digits of Account Number 8670 J.P. Morgan Chase Bank 100 S. College Avenue Bloomington, IN 47404 Last Four Digits of Account Number 9502 J.P. Morgan Chase Bank 100 S. College Avenue Bloomington, IN 47404 Last Four Digits of Account Number 7766 J.P. Morgan Chase Bank 100 S. College Avenue Bloomington, IN 47404 Last Four Digits of Account Number 7774 Old National Bank 4191 W. Third Street Bloomington, IN 47404 Last Four Digits of Account Number 0959 Old National Bank 4191 W. Third Street Bloomington, IN 47404 Last Four Digits of Account Number 0970 Old National Bank 4191 W. Third Street Bloomington, IN 47404 Last Four Digits of Account Number 8548 Old National Bank 4191 W. Third Street Bloomington, IN 47404 Last Four Digits of Account Number 8559 US Bank P.O. Box 13267 Belfast, ME 04915-4023 Last Four Digits of Account Number 8608		\$19,820.49 \$0.00 \$31,853.56 \$17,532.97 \$607,701.15 \$0.00 \$0.00 \$0.00 \$0.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Deposit with Duke Energy P.O. Box 1327 Charlotte, NC 28201-1327		\$48,110.00
4. Household goods and furnishings, including audio, video, and computer equipment.		Furniture		\$131,874.78
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Art		\$1,643.94
6. Wearing apparel.	X			

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SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY PROPERTY	CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		Monroe Hospital Management, LLC		\$.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		Accounts Receivable - Gross		\$12,649,325.03
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Pending Lawsuit Monroe Hospital v. Chaudhry, et al Marion Superior Court Case No. 49D05-1108-PL-032008		Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.		Trademark and Logo		Unknown

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In re Monroe Hospital, LLC
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 (If known)

SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY PROPERTY	CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
23. Licenses, franchises, and other general intangibles. Give particulars.		College of American Pathologists License Joint Commission Accredittation on Healthcare Organizations Certificate Indiana Hospital Association Membership Indiana State Department of Health Hospital License U.S. Nuclear Regulation Certification Debtor was recently grandfathered in to a new federal law that no longer allows physician-owned hospitals. (Less than 42% of hospitals in United States are physician owned)		Unknown Unknown Unknown Unknown Unknown
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.		Medical Records and Demographics		Unknown
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2012 Scion XB 4x8 Utility Trailer Lawn Mowers Golf Cart		\$11,000.00 \$500.00 Unknown Unknown
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Computer and Office Equipment		\$355,104.14
29. Machinery, fixtures, equipment, and supplies used in business.		Various Medical Equipment and Fixtures Backup Generator		\$360,206.99 Unknown
30. Inventory.		Medical Inventory including medicine, bandages etc.(As of 7/31/14)		\$91,386.00
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			

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(If known)

SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY PROPERTY	CURRENT VALUE OF DEBTORS INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
35. Other personal property of any kind not already listed. Itemize.	X			
0 continuation sheets attached			Total ->	\$14,327,739.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, 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 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H — Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED NATURE OF LIEN AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. General Electric Capital Corp. PO Box 414, W-490 Milwaukee, WI 53201			Equipment Purchase Value: Unknown				\$419,205.03	Unknown
ACCOUNT NO. MPT Development Services, Inc. 1000 Urban Center Dr. Suite 501 Birmingham, AL 35242			02/28/2007 Loan Agreement Value: Unknown				\$68,372,173.33	Unknown
ACCOUNT NO. MPT of Bloomington, LLC 1000 Urban Center Dr. Ste. 1 Birmingham, AL 35242			03/07/2007 Real Property Lease Value: Unknown				\$53,380,724.97	Unknown
Subtotal ->							\$122,172,103.33	\$0.00
Grand Total ->							\$122,172,103.33	\$0.00

B 6E (Official Form 6E)(4/13)

In re Monroe Hospital, LLC
DebtorCase No. 14-07417(JMC)
(If known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

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In re Monroe Hospital, LLC
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Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2016, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3 continuation sheets attached

B 6E (Official Form 6E)(4/13)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Wages, salaries, and commissions
(Continuation Sheet)

Wages, salaries, and commissions

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. Pre-Petition Employee Wage Claims Pre-petition employee wage claims. These claims were paid by the Debtor in their entirety pursuant to the Employee Wage and Benefits Motion entered by the Bankruptcy Court on August 12, 2014 [Docket No. 23].			WAGES, SALARIES, AND COMMISSIONS				\$0.00	\$0.00	\$0.00
Subtotal -> (Totals of this page)							\$0.00	\$0.00	

B 6E (Official Form 6E)(4/13)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Contributions to employee benefit plans
(Continuation Sheet)

Contributions to employee benefit plans

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. Pre-Petition Employee Benefits Claims Pre-petition employee benefits claims. These claims were paid by the Debtor in their entirety pursuant to the Employee Wage Motion and Benefits entered by the Bankruptcy Court on August 12, 2014			CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS				\$0.00	\$0.00	\$0.00
Subtotal -> (Totals of this page)							\$0.00	\$0.00	

B 6E (Official Form 6E)(4/13)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Taxes and Certain Other Debts Owed to Governmental Units
(Continuation Sheet)

Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. Indian Department of Revenue PO Box 595 Indianapolis, IN 46206-0595			TAXES AND CERTAIN OTHER DEBTS OWED TO GOVERNMENTAL UNITS				\$1,500.00	\$0.00	\$0.00
Subtotal ->								\$0.00	\$0.00
(Totals of this page)									
Total ->							\$1,500.00		
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)									
Total ->								\$0.00	\$0.00
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)									

0 continuation sheets attached

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, 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 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04805 360 SERVICES Lindsay 1040 EAST NEW YORK STREET INDIANAPOLIS, IN 46202			ACCOUNTS PAYABLE				\$842.00
ACCOUNT NO. 02513 A BETTER WAY MOVING & STORAGE Accts Rec. PO BOX 601 CLEAR CREEK, IN 47426			ACCOUNTS PAYABLE				\$1,660.00
ACCOUNT NO. 00047 A&C Fireprotection, Inc. 965 Highlander Plainfield, IN 46168			ACCOUNTS PAYABLE				\$1,700.00
ACCOUNT NO. 00010 A&E REPRODUCTIONS INC Accts Rec. 820 WEST 17TH STREET, SUITE 8 BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$32.74
Subtotal ->							\$4,234.74

78 continuation sheets attached

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00173 A.M. SURGICAL INC Accts Rec. 290 EAST MAIN STREET SUITE 200 SMITHTOWN, NY 11787			ACCOUNTS PAYABLE				\$7,020.00
ACCOUNT NO. 02123 ABBOTT LABORATORIES INC Accts Rec. PO BOX 92679 CHICAGO, IL 60675			ACCOUNTS PAYABLE				\$371.51
ACCOUNT NO. 00011 ABBOTT POINT OF CARE Accts Rec. PO BOX 92679 CHICAGO, IL 60675			ACCOUNTS PAYABLE				\$4,998.84
ACCOUNT NO. 01341 ABS MED INC Accts Rec. 8482 SOLUTION CENTER CHICAGO, IL 606778004			ACCOUNTS PAYABLE				\$596.55
ACCOUNT NO. 00104 ACCLARENT INC. Accts Rec. 16888 COLLECTION CENTER DRIVE CHICAGO, IL 606930168			ACCOUNTS PAYABLE				\$2,923.73
ACCOUNT NO. 00178 ACELL INC Cindy Fisher PO BOX 347766 PITTSBURGH, PA 152514766			ACCOUNTS PAYABLE				\$32,357.25
Subtotal ->							\$48,267.88

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04269 ADP, INC Accts Rec. PO BOX 842875 BOSTON, MA 22842875			ACCOUNTS PAYABLE				\$12,003.06
ACCOUNT NO. 30820 ADVANCED MEDICAL DESIGNS Accts Rec. 1241 ATLANTA INDUSTRIAL DR MARIETTA, GA 30066			ACCOUNTS PAYABLE				\$136.32
ACCOUNT NO. 30180 AESCULAP Accts Rec. PO BOX 512451 PHILADELPHIA, PA 191752451			ACCOUNTS PAYABLE				\$3,966.99
ACCOUNT NO. 04157 AETNA Accts Rec. 1425 UNION MEETING ROAD MAIL STOP U23S BLUE BELL, PA 19422			ACCOUNTS PAYABLE				\$88.63
ACCOUNT NO. 03325 AETNA STUDENT HEALTH Accts Rec. P.O. BOX 15708 BOSTON, MA 22150014			ACCOUNTS PAYABLE				\$258.00
ACCOUNT NO. 00024 ALCON LABORATORIES Accts Rec. PO BOX 677775 DALLAS, TX 752677775			ACCOUNTS PAYABLE				\$5,565.00
Subtotal ->							\$22,018.00

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30235 ALERE NORTH AMERICA, INC Accts Rec. PO BOX 846153 BOSTON, MA 22846153			ACCOUNTS PAYABLE				\$1,852.87
ACCOUNT NO. 02515 ALL PHASE ELECTRIC Accts Rec. PO BOX 450 LIMA, OH 45802			ACCOUNTS PAYABLE				\$648.05
ACCOUNT NO. 00116 ALLIANCE X-RAY Accts Rec. P.O. BOX 41957 FREDERICKSBURG, VA 22404			ACCOUNTS PAYABLE				\$199.20
ACCOUNT NO. 00137 ALLIED HEALTHCARE PRODUCTS INC Peggy PO BOX 790379 SAINT LOUIS, MO 63179			ACCOUNTS PAYABLE				\$203.62
ACCOUNT NO. 00013 ALPHA IMAGING Accts Rec. PO BOX 637528 CINCINNATI, OH 452637528			ACCOUNTS PAYABLE				\$31,275.00
ACCOUNT NO. 00031 AMBLER SURGICAL Accts Rec. 404 GORDON DRIVE EXTON, PA 19341			ACCOUNTS PAYABLE				\$1,115.00
Subtotal ->							\$35,293.74

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00050 AMERICAN HEART ASSOCIATION Accts Rec. 6100 WEST 96TH STREET, SUITE 200 INDIANPOLIS, IN 46278			ACCOUNTS PAYABLE				\$2,500.00
ACCOUNT NO. 01441 AMERICAN RED CROSS Accts Rec. PO BOX 73013 CHICAGO, IL 606737013			ACCOUNTS PAYABLE				\$1,608.00
ACCOUNT NO. 02934 AMERIPATH INDIANAPOLIS Accts Rec. 13179 COLLECTION CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$2,232.00
ACCOUNT NO. 30200 AMS SALES CORPORATION Accts Rec. P.O. BOX 7247-6586 PHILADELPHIA, PA 191706586			ACCOUNTS PAYABLE				\$34,625.20
ACCOUNT NO. 30020 ANGIOTECH MEDICAL DEVICES Accts Rec. 3600 S.W. 47TH AVE. GAINSVILLE, FL 32608			ACCOUNTS PAYABLE				\$12.73
ACCOUNT NO. 01049 ANTHEM Accts Rec. CENTRAL REGION - CCOA LOCKBOX PO BOX 73651 CLEVELAND, OH 441931177			ACCOUNTS PAYABLE				\$718.91
Subtotal ->							\$41,696.84

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 02846 ANTHEM BCBS IN INDIVIDUAL Accts Rec. PO BOX 105674 ATLANTA, GA 303485674			ACCOUNTS PAYABLE				\$109.90
ACCOUNT NO. 03920 ANTHEM INSURANCE COMPANIES, IN Accts Rec. FILE 51052 IN CCOA MAIL STOP CACC 01-020D LOS ANGELES, CA 98074			ACCOUNTS PAYABLE				\$286.29
ACCOUNT NO. 30165 ANTHONY PRODUCTS, INC Accts Rec. 7740 RECORDS ST INDIANAPOLIS, IN 46226			ACCOUNTS PAYABLE				\$146.59
ACCOUNT NO. 30355 APPLETON MEDICAL SERVICES, LLC Accts Rec. PO BOX 955 SAINT CHARLES, MO 633020955			ACCOUNTS PAYABLE				\$786.76
ACCOUNT NO. 30160 APPLIED MEDICAL Accts Rec. PO BOX 1120 NEW YORK, NY 100081120			ACCOUNTS PAYABLE				\$773.61
ACCOUNT NO. 00174 ARGON MEDICAL Accts Rec. 5151 Headquarters Drive #201 Plano, TX 75024			ACCOUNTS PAYABLE				\$1,745.18
Subtotal ->							\$3,848.33

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30230 ARTHREX INC Accts Rec. PO BOX 403511 ATLANTA, GA 303843511			ACCOUNTS PAYABLE				\$26,477.69
ACCOUNT NO. 00176 ARTHROCARE MEDICAL CORP Accts Rec. PO BOX 844161 DALLAS, TX 752844161			ACCOUNTS PAYABLE				\$1,391.00
ACCOUNT NO. 01881 ARTISTIC MEDIA PARTNERS INC Accts Rec. WHCC-FM PO BOX 7797 BLOOMINGTON, IN 47407			ACCOUNTS PAYABLE				\$2,440.00
ACCOUNT NO. 03975 ASSOCIATES OF INTEGRATIVE HLTH Accts Rec. 341 S. LINCOLN ST. #4 BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$480.00
ACCOUNT NO. 01078 ASSURED HEALTHCARE LLC Charlie Deines 7922 E EDGEWOOD AVE INDIANAPOLIS, IN 46239			ACCOUNTS PAYABLE				\$58,585.09
ACCOUNT NO. 01114 AT&T Accts Rec. PO BOX 5080 CAROL STREAM, IL 2472			ACCOUNTS PAYABLE				\$2,468.00
Subtotal ->							\$91,841.78

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 02174 AURORA WORLD, INC Accts Rec. ACCOUNTING DEPT 8820 MERCURY LANE PICO RIVERA, CA 40742			ACCOUNTS PAYABLE				\$315.22
ACCOUNT NO. 03411 AVANTRA FREEDOM Accts Rec. PO BOX 7154 LONDON, KY 61150419			ACCOUNTS PAYABLE				\$1,436.43
ACCOUNT NO. 02693 Avatar International LLn Dept. 106005 PO Box Hartford, CT 06115-0419			ACCOUNTS PAYABLE				\$10,374.79
ACCOUNT NO. 01115 AVAYA Accts Rec. PO BOX 5332 NEW YORK, NY 100875332			ACCOUNTS PAYABLE				\$3,997.27
ACCOUNT NO. 05122 BABBS, MARK 7725 S MT ZION RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$30.00
ACCOUNT NO. 00164 BACTERIN INTERNATIONAL, INC Accts Rec. DEPT CH 16872 PALATINE, IL 600556872			ACCOUNTS PAYABLE				\$336.41
Subtotal ->							\$16,490.12

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00077 BADGE BUDDIES Accts Rec. 8405 NW 53RD SUITE B-203 DORAL, FL 33166			ACCOUNTS PAYABLE				\$151.94
ACCOUNT NO. 01371 BAILEY NURSING SERVICES INC Accts Rec. 6150 GENEVIEVE LN BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$2,511.38
ACCOUNT NO. 04247 BALDWIN, VICTORIA 1750 N RANGE RD E102 BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 00157 BARD MEDICAL DIVISION Accts Rec. 730 CENTRAL AVENUE MURRAY HILL, NJ 7974			ACCOUNTS PAYABLE				\$58.02
ACCOUNT NO. 30320 BARD PERIPHERAL VASCULAR Accts Rec. PO BOX 75767 CHARLOTTE, NC 28275			ACCOUNTS PAYABLE				\$1,249.20
ACCOUNT NO. 05124 BARNES, JEREMY 1541 W EDINBURGH BEND BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$10.00
Subtotal ->							\$3,995.54

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05129 BARTON, WILLIAM 1646 FISH CREEK RD POLAND, IN 47868			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05130 BASTAWROS, MAY 408 S MITCHELL ST BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$45.00
ACCOUNT NO. 05132 BATTISTA, CHRISTINE 8281 S STONE RIDGE BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 30275 BAUSCH & LOMB SURGICAL DIV Accts Rec. 4395 COLLECTION CENTER DR CHICAGO, IL 606930043			ACCOUNTS PAYABLE				\$48,963.67
ACCOUNT NO. 00791 BAXTER HEALTHCARE CORPORATION Kenneth Kemp PO BOX 70564 CHICAGO, IL 60673			ACCOUNTS PAYABLE				\$15,289.38
ACCOUNT NO. 05131 BAXTER, KARRIE 401 N INDIANA BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$35.00
Subtotal ->							\$64,363.05

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03888 BCBS GM/ANSI Accts Rec. P.O. BOX 37010 LOUISVILLE, KY 402337010			ACCOUNTS PAYABLE				\$240.22
ACCOUNT NO. 00182 BEATTY MARKETING & SALES LLC Accts Rec. 17371 NE 67TH CT SUITE A-12 REDMON, WA 98052			ACCOUNTS PAYABLE				\$715.00
ACCOUNT NO. 05133 BEBEAU, DORIS 1112 BUCKINGHAM E BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$5.00
ACCOUNT NO. 05101 BECKLEY, AMANDA 301 N FRANKLIN ST APT 4 BRAZIL, IN 47834			ACCOUNTS PAYABLE				\$40.00
ACCOUNT NO. 00960 Beckman Coulter, Inc. Chaska Campus 1000 Lake Hazeltine Dr. Chaska, MN 55318			ACCOUNTS PAYABLE				\$1,827.99
ACCOUNT NO. 05007 BEDC Accts Rec. 400 WEST 7TH STREET SUITE 101 BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$1,050.00
Subtotal ->							\$3,878.21

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05134 BELCHER, THOMAS 4961 E INVERNESS WOODS RD BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$40.00
ACCOUNT NO. 05116 BENNETT, FERN 3302 KINGLEY DR BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 05127 BENNETT, FREDERIC 3845 SUNVALLEY DR SPENCER, IN 47460			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05113 BENNETT, MILDRED 14899 S ST RD 59 JASONVILLE, IN 47438			ACCOUNTS PAYABLE				\$5.00
ACCOUNT NO. 05128 BENSON, DALE 4774 N SHADOWWOOD DR BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 04803 BERRY Accts Rec. PO BOX 790334 ST LOUIS, MO 631790334			ACCOUNTS PAYABLE				\$546.99
Subtotal ->							\$651.99

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 02239 BESSE MEDICAL SUPPLY Angela Newhouse 1576 SOLUTIONS CENTER CHICAGO, IL 606771005			ACCOUNTS PAYABLE				\$6,873.49
ACCOUNT NO. 00087 BFW INC Accts Rec. 2307 RIVER ROAD STE 103 LOUISVILLE, KY 40206			ACCOUNTS PAYABLE				\$754.83
ACCOUNT NO. 00053 BG MEDICAL Accts Rec. P.O. BOX 1861 BARRINGTON, IL 60011			ACCOUNTS PAYABLE				\$350.00
ACCOUNT NO. 04001 BIO-MED BSC Accts Rec. PO Box 39259 INDIANAPOLIS, IN 46239			ACCOUNTS PAYABLE				\$4,323.50
ACCOUNT NO. 30655 BIO-RAD LABORATORIES INC Accts Rec. CLINICAL DIAGNOSTICS GROUP P O BOX 849740 LOS ANGELES, CA 900849740			ACCOUNTS PAYABLE				\$22,970.65
ACCOUNT NO. 30555 BIOMEDICAL ENTERPRISES, INC Accts Rec. DEPT 2297 PO BOX 122297 DALLAS, TX 753122297			ACCOUNTS PAYABLE				\$1,242.34
Subtotal ->							\$36,514.81

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30455 BIOMET BIOLOGICS Stephanie Fonderoli 75 REMITTANCE DR SUITE 3283 CHICAGO, IL 606753283			ACCOUNTS PAYABLE				\$26,516.29
ACCOUNT NO. 30185 BIOMET SPORTS MEDICINE Stephanie Fonderoli 75 REMITTANCE DR SUITE 3283 CHICAGO, IL 606753283			ACCOUNTS PAYABLE				\$174,236.52
ACCOUNT NO. 04965 BIOVENTUS LLC Accts Rec. PO BOX 204316 DALLAS, TX 753204316			ACCOUNTS PAYABLE				\$3,432.00
ACCOUNT NO. 04427 BLACK, STEVEN 3511 S ROXBURY COURT BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$60.00
ACCOUNT NO. 02628 BLOOMINGTON ANESTHESIOLOGISTS Dr. Chad Johnson P.O. BOX 2658 BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$728,844.77
ACCOUNT NO. 04027 BLOOMINGTON ENT, P.C. Dr. Jesse Phillips 1791 W. 3RD STREET BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$18,600.00
Subtotal ->							\$951,689.58

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Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 02384 Bloomington Health Services 3209 W. Fullerton Pike Bloomington, IN 47403			ACCOUNTS PAYABLE				\$33,750.00
ACCOUNT NO. 05206 BLOOMINGTON LETTER SHOP Accts Rec. 5717 SOUTH ROGERS STREET BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$696.04
ACCOUNT NO. 04111 BLOOMINGTON SLEEP SERVICES Accts Rec. 1791 W 3RD STREET BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$293,180.00
ACCOUNT NO. 01165 BLOOMINGTON VIDEO & DATA Accts Rec. PO BOX 366 BLOOMINGTON, IN 47402			ACCOUNTS PAYABLE				\$2,140.00
ACCOUNT NO. 03347 BLUE CROSS BLUE SHIELD Accts Rec. PO BOX 37010 LOUISVILLE, KY 40233			ACCOUNTS PAYABLE				\$296.31
ACCOUNT NO. 03661 BLUE CROSS BLUE SHIELD OF NC Accts Rec. FINANCIAL RECOVERY PO BOX 30048 DURHAM, NC 277023048			ACCOUNTS PAYABLE				\$5,806.02
Subtotal ->							\$335,868.37

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00825 BOSTON SCIENTIFIC CORP Stephen Monachello PO BOX 951653 DALLAS, TX 753951653			ACCOUNTS PAYABLE				\$4,742.56
ACCOUNT NO. 00191 BOSTWICK LABORATORIES INC. Veronique 100 CHARLES LINBURGH BLVD UNIONDALE, NY 11553			ACCOUNTS PAYABLE				\$50.00
ACCOUNT NO. 05138 BOYD, SANDRA 47 HANCOCK SCHOOL RD SPENCER, IN 47460			ACCOUNTS PAYABLE				\$205.00
ACCOUNT NO. 30250 BRACCO DIAGNOSTICS INC Kirk Slaughter PO BOX 532411 CHARLOTTE, NC 282902411			ACCOUNTS PAYABLE				\$16,977.33
ACCOUNT NO. 31060 BREG Accts Rec. PO BOX 849991 DALLAS, TX 75284			ACCOUNTS PAYABLE				\$200.63
ACCOUNT NO. 04787 BRIAN J LOGUE, MD PC 2907 MCINTIRE DRIVE BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$54,900.00
Subtotal ->							\$77,075.52

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04560 BRUMIT, MATTHEW 207 VARSITY LN BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 00126 BRYTON CORPORATION Trisha Wiersum 4011 CHAMPIONSHIP DR INDIANAPOLIS, IN 46268			ACCOUNTS PAYABLE				\$473.00
ACCOUNT NO. 01118 BUILDING TRUST INC Accts Rec. 216 E COLLEGE ST DICKSON, TN 37055			ACCOUNTS PAYABLE				\$1,200.00
ACCOUNT NO. 03098 Bynum Fanyo & Associates, Inc. 528 North Walnut St. Bloomington, IN 47404			ACCOUNTS PAYABLE				\$1,659.06
ACCOUNT NO. 02908 C & S INC Accts Rec. PO BOX 337 1402 W 11TH ST BLOOMINGTON, IN 47402			ACCOUNTS PAYABLE				\$25.57
ACCOUNT NO. 04296 CAIN, CLYDE 2239 35TH ST BEDFORD, IN 47421			ACCOUNTS PAYABLE				\$20.00
Subtotal ->							\$3,392.63

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05197 CALLIS, JONI 1299 E COBBLEFIELD CT BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05177 CALLAHAN, DOUGLAS 5988 CRITTER LN FREEDOM, IN 47431			ACCOUNTS PAYABLE				\$39.00
ACCOUNT NO. 05179 CAMPBELL, CHARLES 7190 W ISON RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$22.59
ACCOUNT NO. 05178 CAPPS, MICHAEL PO BOX 5243 BLOOMINGTON, IN 47407			ACCOUNTS PAYABLE				\$30.00
ACCOUNT NO. 04997 CARDINAL HEALTH 110, INC. Accts Rec. 15898 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$6,393.25
ACCOUNT NO. 00115 CARDINAL HEALTH MEDICAL PRODUCTS Shariese Horton MEDICAL PRODUCTS AND SERVICES PO BOX 70539 CHICAGO, IL 606730539			ACCOUNTS PAYABLE				\$113,279.34
Subtotal ->							\$119,779.18

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03714 CARDINAL HEALTH NUCLEAR PHARM Accts Rec. NUCLEAR PHARAMCY SERVICES PO BOX 70609 CHICAGO, IL 606730609			ACCOUNTS PAYABLE				\$746.21
ACCOUNT NO. 00790 CARDINAL HEALTH PHARMACEUTICAL Danielle Bishop 3740 COLLECTIONS CENTER DR CHICAGO, IL 606930037			ACCOUNTS PAYABLE				\$49,824.98
ACCOUNT NO. 00793 Cardinal Health108, SPD 14268 Collections Center Dr. Chicago, IL 60693			ACCOUNTS PAYABLE				\$65.10
ACCOUNT NO. 03391 CAREFUSION SOLUTIONS, LLC Accts Rec. PYXIS PRODUCTS 25082 NETWORK PLACE CHICAGO, IL 606731250			ACCOUNTS PAYABLE				\$7,742.52
ACCOUNT NO. 04040 CARESTREAM HEALTH INC Accts Rec. DEPT CH 19286 PALATINE, IL 600559286			ACCOUNTS PAYABLE				\$3,443.14
ACCOUNT NO. 05180 CARR, LILLIAN 38 E VINENNSE ST LINTON, IN 47441			ACCOUNTS PAYABLE				\$50.00
Subtotal ->							\$61,871.95

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In re Monroe Hospital, LLC
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(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01246 CARSTENS Accts Rec. PO BOX 99110 CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$218.52
ACCOUNT NO. 05182 CASASSA, CHRISTY 923 S FOREST AVE BRAZIL, IN 47834			ACCOUNTS PAYABLE				\$50.00
ACCOUNT NO. 05181 CATURANO, CHRISTINE 722 SHERWOOD HILLS DR BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05173 CAVE, DIANE 1640 E CHERRY LN BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 03292 CENTRAL REGION CCOA LOCKBOX Accts Rec. PO BOX 73651 CLEVELAND, OH 44193			ACCOUNTS PAYABLE				\$69.52
ACCOUNT NO. 01153 CENTURION MEDICAL PRODUCTS Accts Rec. PO BOX 170 HOWELL, MI 48844			ACCOUNTS PAYABLE				\$299.86
Subtotal ->							\$682.90

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00830 CHANNING BETE Accts Rec. PO BOX 3538 SOUTH DEERFIELD, MA 13733538			ACCOUNTS PAYABLE				\$1,000.58
ACCOUNT NO. 05172 CHAPARRO, ANGEL 145 N FRANKLIN BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$35.00
ACCOUNT NO. 05175 CHAPMAN, CHERYL 1457 E 150 S WASHINGTON, IN 47501			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 05174 CHASTEEN, GARLAND PO BOX 111 SMITHVILLE, IN 47458			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05176 CHEESEMAN-TEDERS, MELISSA 4248 S WILLIAM WAY BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 3880 CHEK MED SYSTEMS, INC Accts Rec. 200 GRANDVIEW AVE CAMP HILL, PA 170111706			ACCOUNTS PAYABLE				\$496.00
Subtotal ->							\$1,596.58

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04676 CHESTNUTWOOD, MARK 306 FOXRIDGE DR SPRINGVILLE, IN 47462			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05187 CHILDERS, SONIA 448 EVERS MAN DR JASPER, IN 47546			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 01459 CINTAS CORPORATION Accts Rec. PO BOX 740855 CINCINNATI, OH 452055496			ACCOUNTS PAYABLE				\$69.90
ACCOUNT NO. 04257 CINTAS DOCUMENT MANAGEMENT Accts Rec. INDIANAPOLIS (G89) STORAGE &IMAGING 2850 S LYNHURST DR INDIANAPOLIS, IN 46241			ACCOUNTS PAYABLE				\$1,575.70
ACCOUNT NO. 135 City of Bloomington 600 East Miller Dr. Bloomington, IN 47408			ACCOUNTS PAYABLE				\$4,445.06
ACCOUNT NO. 03804 CLAIMAID Lori 8141 ZIONSVILLE ROAD INDIANAPOLIS, IN 46268			ACCOUNTS PAYABLE				\$14,619.00
Subtotal ->							\$20,749.66

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05184 CLARK, MARY 4613 STATE RD 45 NASHVILLE, IN 47448			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05185 CLEARY, RICHARD 3162 S CUFFERS DR BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05186 CLIFF, BERNARD 1059 E MILLER RD BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 05188 CLIFFORD, REBECCA 12535 W ST RD 54 LINTON, IN 47441			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05189 CLOUSE, KELLY 2205 TRAY RD WASHINGTON, IN 47501			ACCOUNTS PAYABLE				\$80.00
ACCOUNT NO. 05190 CLUVER, CLAU 405 N INDIANA AVE BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$40.00
Subtotal ->							\$200.00

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05191 COATS, ERIN 1331 S ADAMS ST BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05193 COBB, ROGENIA 916 SPRINGVILLE JUDAH RD SPRINGVILLE, IN 47462			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 00970 COCA-COLA REFRESHMENTS Accts Rec. BLOOMINGTON SALES CENTER 2329 PAYSPPHERE CIRCLE CHICAGO, IL 606742329			ACCOUNTS PAYABLE				\$3,602.57
ACCOUNT NO. 05192 COCKERHAM, REX 1425 LAWRENCEPORT MAIN MITCHELL, IN 47446			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 00145 COLLEGE OF AMER PATHOLOGISTS Accts Rec. P O BOX 71698 CHICAGO, IL 606941698			ACCOUNTS PAYABLE				\$4,054.00
ACCOUNT NO. 01867 COMCAST CABLE Accts Rec. PO BOX 3005 SOUTHEASTERN, PA 193983005			ACCOUNTS PAYABLE				\$1,372.77
Subtotal ->							\$9,089.34

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01337 CONMED CORPORATION Accts Rec. CHURCH STREET STATION PO BOX 6814 NEW YORK, NY 102496814			ACCOUNTS PAYABLE				\$563.57
ACCOUNT NO. 01119 CONMED LINVATEC Accts Rec. PO BOX 301231 DALLAS, TX 753031231			ACCOUNTS PAYABLE				\$11,400.21
ACCOUNT NO. 00850 COOK MEDICAL INC Accts Rec. 22988 NETWORK PL CHICAGO, IL 606731229			ACCOUNTS PAYABLE				\$36,399.61
ACCOUNT NO. 05067 COOK, CHERYL 5161 HANKS CROSSING BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 01299 COOPER SURGICAL Accts Rec. PO BOX 712280 CINCINNATI, OH 452712280			ACCOUNTS PAYABLE				\$1,488.27
ACCOUNT NO. 05155 CORBIN, DEBRA 460 2ND ST SW LINTON, IN 47441			ACCOUNTS PAYABLE				\$5.00
Subtotal ->							\$49,871.66

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05154 CORBIN, JAMES 3485 E MOFFETT LN BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$40.00
ACCOUNT NO. 05156 COX, BETTY 290 POPCORN RD SPRINGVILLE, IN 47462			ACCOUNTS PAYABLE				\$13.00
ACCOUNT NO. 05139 COY, TERRY 625 S PARK RIDGE BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$55.00
ACCOUNT NO. 05019 CPI Accts Rec. 10850 W PARK PLACE, SUITE 600 MILWAUKEE, WI 53224			ACCOUNTS PAYABLE				\$2,250.00
ACCOUNT NO. 01084 CPSI Accts Rec. PO BOX 850309 6600 WALL ST MOBILE, AL 366850309			ACCOUNTS PAYABLE				\$116,029.64
ACCOUNT NO. 05013 CRH Medical PO Box 809178 Chicago, IL 60680-9178			ACCOUNTS PAYABLE				\$2,659.80
Subtotal ->							\$121,047.44

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05159 CRITES, JENNIFER 3848 W WOODMERE WAY BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05157 CROSBY, NICHOLE 2702 E HEMLOCK CIR BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05158 CROSBY, TODD 2702 E HEMLOCK CIR BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 03563 CROSTOWN CLEANERS 1813 EAST 10TH STREET BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$134.61
ACCOUNT NO. 05161 CROUCH, RICHARD 5010 W ST RD 46 BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05160 CUPA, CHERI 1588 S IRON MT RD BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$15.00
Subtotal ->							\$229.61

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00144 CYGNUS MEDICAL Accts Rec. 965 WEST MAIN STREET BRANFORD, CT 6405			ACCOUNTS PAYABLE				\$79.00
ACCOUNT NO. 30495 D&D MEDICAL, INC Accts Rec. 715 PARK DR GOODLETTSVILLE, TN 37072			ACCOUNTS PAYABLE				\$136.39
ACCOUNT NO. 05162 DARLING, MELANIE 2259 DUNN PLACE FREEDOM, IN 47431			ACCOUNTS PAYABLE				\$392.69
ACCOUNT NO. 01000 DATEX OHMEDA Accts Rec. PO BOX 641936 PITTSBURGH, PA 152641936			ACCOUNTS PAYABLE				\$4.16
ACCOUNT NO. 05095 DAVIESS COMMUNITY HOSPITAL Accts Rec. PO BOX 760 WASHINGTON, IN 47501			ACCOUNTS PAYABLE				\$700.00
ACCOUNT NO. 05163 DAVIS, SUMMER 601 W ALLEN BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$5.88
Subtotal ->							\$1,318.12

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In re Monroe Hospital, LLC
DebtorCase No. 14-07417(JMC)
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05164 DEATON, KAREN 1314 25TH ST BEDFORD, IN 47421			ACCOUNTS PAYABLE				\$60.00
ACCOUNT NO. 05165 DECKARD, BRETT 2006 N SHARKEY RD BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$26.50
ACCOUNT NO. 05166 DECKARD, JOYCE 9260 W ELWREN RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$55.00
ACCOUNT NO. 05167 DECKARD, PENNI 1840 S PECAN LANE BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05168 DECKARD, STEPHANIE JO 1019 E MILLER DR BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. Deepak Chaudhry, Ashok Dhingra, Larry Ratts c/o Pence Hensel LLC 135 N. Pennsylvania St. Suite 1600 Indianapolis, IN 46204			LITIGATION		X	X	Unknown
Subtotal ->							\$181.50

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04599 DEFORD, MARY 4111 VERNAL PIKE LOT #112 BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 03913 DELK MCNALLY LLP Accts Rec. 421 S WALNUT SUITE 200 MUNCIE, IN 47305			ACCOUNTS PAYABLE				\$7,312.50
ACCOUNT NO. 05153 DEMARS, BRUCE 2708 BRIGS BEND BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05169 DEMOSS, SARAH 13634 E EDWARDS RD SOLSBERRY, IN 47459			ACCOUNTS PAYABLE				\$30.00
ACCOUNT NO. 05171 DEMOSS, WENDY 8400 W EVANS RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$90.00
ACCOUNT NO. 05170 DEPIERRE, EDNA 3760 E BLUEBIRD LANE BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$15.00
Subtotal ->							\$7,477.50

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 02783 DIRECTV Accts Rec. PO BOX 60036 LOS ANGELES, CA 900600036			ACCOUNTS PAYABLE				\$330.35
ACCOUNT NO. 04713 DODSON GROUP COMMUNICATIONS Accts Rec. PO BOX 40990 INDIANAPOLIS, IN 462400900			ACCOUNTS PAYABLE				\$1,207.37
ACCOUNT NO. 05200 DOGAN, MARTHA 4314 PAYNETOWN RD BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$209.00
ACCOUNT NO. 05183 DOUDA, TASHA 5250 W NOVA DR BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 03462 DRA COMPANY Accts Rec. 3257 WEST LIBERTY AVENUE PITTSBURGH, PA 15216			ACCOUNTS PAYABLE				\$49,500.00
ACCOUNT NO. 04305 DUKE ENERGY Accts Rec. PO BOX 1326 CHARLOTTE, NC 28201			ACCOUNTS PAYABLE				\$36,562.83
Subtotal ->							\$87,834.55

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00205 DUKE ENERGY Accts Rec. PO BOX 1327 CHARLOTTE, NC 28201			ACCOUNTS PAYABLE				\$2,311.14
ACCOUNT NO. 04912 DUVALL, LOUIS 3210 LEONARD SPRINGS RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$2,260.00
ACCOUNT NO. 00640 ENGRAVING & STAMP CENTER Accts Rec. 218 N MADISON ST BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$135.68
ACCOUNT NO. 02973 EUDALY INVESTMENTS, LLC Accts Rec. 351 LANDMARK AVE BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$6,170.65
ACCOUNT NO. 30375 EVERYWHERE SIGNS Accts Rec. 2630 N WALNUT ST BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$905.20
ACCOUNT NO. 02643 EXTERIOR FINISHIES, INC Accts Rec. PO BOX 6045 BLOOMINGTON, IN 47407			ACCOUNTS PAYABLE				\$16,125.00
Subtotal ->							\$27,907.67

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In re Monroe Hospital, LLC
DebtorCase No. 14-07417(JMC)
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05111 FASTENAL COMPANY Accts Rec. PO BOX 1286 WINONA, MN 559871286			ACCOUNTS PAYABLE				\$267.16
ACCOUNT NO. 05103 FASTSIGNS Accts Rec. 2511 W. 3RD ST. SUITE B BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$91.42
ACCOUNT NO. 02956 FDA-MQSA PROGRAM Accts Rec. PO BOX 70953 CHARLOTTE, NC 282720953			ACCOUNTS PAYABLE				\$2,242.81
ACCOUNT NO. 00215 FEDEX Accts Rec. PO BOX 94515 PALANTINE, IL 600944515			ACCOUNTS PAYABLE				\$369.33
ACCOUNT NO. 05203 FIELDS, JASON 2346 N 1175 W LINTON, IN 47441			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 01086 FINE PRINT Accts Rec. PO BOX 1401 BLOOMINGTON, IN 474021401			ACCOUNTS PAYABLE				\$1,038.04
Subtotal ->							\$4,023.76

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00225 FIRST HEALTH CARE GROUP Accts Rec. 100 N CURRY PIKE BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$78.00
ACCOUNT NO. 01148 FISHER SCIENTIFIC CO, LLC Accts Rec. ATTN: 004923 13551 COLLECTION CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$224.06
ACCOUNT NO. 04995 FLETCHER, WILLIAM Accts Rec. 3952 S KENNEDY DRIVE BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$69.44
ACCOUNT NO. 04785 FOOT AND ANKLE CENTER Dr. Parmenter 2920 MCINTIRE DRIVE, SUITE 100 BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$4,474.54
ACCOUNT NO. 05209 FOUGEROUSSE, MICHAEL 632 N 475 WEST SWITZCITY, IN 47465			ACCOUNTS PAYABLE				\$102.51
ACCOUNT NO. 05198 FRANCISCO, SONDRRA 4195 W FORREST PARK BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$5.34
Subtotal ->							\$4,953.89

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01599 GABOR TOLNAY MD, PC Accts Rec. 319 PINETREE LN RICHMOND, IN 47374			ACCOUNTS PAYABLE				\$11,400.00
ACCOUNT NO. 03077 GE CAPITAL - RICOH USA PROGRAM Jeanne PO BOX 740541 ATLANTA, GA 303740541			ACCOUNTS PAYABLE				\$1,872.32
ACCOUNT NO. 01353 GE HEALTHCARE Accts Rec. PO BOX 96483 CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$419,205.03
ACCOUNT NO. 00255 GETINGE USA INC Accts Rec. 1265 SOLUTIONS CENTER CHICAGO, IL 606771002			ACCOUNTS PAYABLE				\$14,205.14
ACCOUNT NO. 05201 GILSTRAP, JACKIE 8234 E LAUGHLIN RD DUGGER, IN 47848			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 01088 GOOLDY & SONS INC Accts Rec. 926 W 17TH ST BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$4,798.30
Subtotal ->							\$451,500.79

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30195 Gramedica 16137 Leone Dr. Macomb, MI 48082			ACCOUNTS PAYABLE				\$2,203.48
ACCOUNT NO. 05008 GRANDVIEW PHARMACY Accts Rec. 2230 NORTH PARK ROAD CONNERSVILLE, IN 47331			ACCOUNTS PAYABLE				\$2,863.76
ACCOUNT NO. 00106 GRAPHIC CONTROLS Accts Rec. P O BOX 1271 BUFFALO, NY 142401271			ACCOUNTS PAYABLE				\$37.43
ACCOUNT NO. 00720 GREATER BMGTN CHAMBER COMMERCE Accts Rec. PO BOX 1302 BLOOMINGTON, IN 474021302			ACCOUNTS PAYABLE				\$1,100.00
ACCOUNT NO. 04786 GREENE COUNTY GEN HOSP, LLC April Settles FOOT AND ANKLE LEASE PAYMENT 2127 E STATE HIGHWAY 54 LINTON, IN 47441			ACCOUNTS PAYABLE				\$26,318.45
ACCOUNT NO. 03984 GREENE COUNTY TREASURER Accts Rec. 1 E MAIN STREET ROOM #130 BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$58.20
Subtotal ->							\$32,581.32

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05020 GRIMSLEY, STEPHEN 422 EAST 11TH ST. APT 16 BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$156.25
ACCOUNT NO. 03931 GROGAN GRAFFAM, P.C. Accts Rec. FOUR GATEWAY CENTER 12TH FLOOR PITTSBURGH, PA 152221224			ACCOUNTS PAYABLE				\$523.50
ACCOUNT NO. 05109 GROOMER, DONNA 1339 N ST RD 43 BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05144 HAMBLEN, LEEANN 875 W CRAIG AVE BRAZIL, IN 47834			ACCOUNTS PAYABLE				\$190.37
ACCOUNT NO. 05205 HAMILTON, MARCIA 3527 S ROGERS ST BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 04964 HC1.COM Accts Rec. 6100 W. 96TH ST SUITE 115 INDIANAPOLIS, IN 46278			ACCOUNTS PAYABLE				\$1,444.50
Subtotal ->							\$2,354.62

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00880 HEALTH CARE LOGISTICS Accts Rec. PO BOX 400 CIRCLEVILLE, OH 431130400			ACCOUNTS PAYABLE				\$575.27
ACCOUNT NO. 04137 HEALTH LINC Accts Rec. ATTN: CANDICE CRANDALL 714 S. ROGERS ST BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$300.00
ACCOUNT NO. 05051 HEALTHFIRST Accts Rec. DEPT CH 14330 PALATINE, IL 600554330			ACCOUNTS PAYABLE				\$381.43
ACCOUNT NO. 01228 HEALTHMARK INDUSTRIES Accts Rec. 3080 MOMENTUM PLACE CHICAGO, IL 606895330			ACCOUNTS PAYABLE				\$472.21
ACCOUNT NO. 02427 HEALTHPORT TECHNOLOGIES, LLC Accts Rec. PO BOX 409669 ATLANTA, GA 30384			ACCOUNTS PAYABLE				\$204.24
ACCOUNT NO. 02891 HEART AND VASCULAR CLINIC Accts Rec. 3512 Q ST BEDFORD, IN 47421			ACCOUNTS PAYABLE				\$31,250.01
Subtotal ->							\$33,183.16

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01090 HENRY SCHEIN Accts Rec. DEPT CH 10241 PALANTINE, IL 600550241			ACCOUNTS PAYABLE				\$9,270.79
ACCOUNT NO. 01469 HERALD TIMES (SUBSCRIPTION) Accts Rec. 1900 S WALNUT ST PO BOX 909 BLOOMINGTON, IN 474020909			ACCOUNTS PAYABLE				\$4,172.47
ACCOUNT NO. 02535 HFI MECHANICAL CONTRACTORS Accts Rec. 2010 VERNAL PIKE BLOOMINGTON, IN 474021998			ACCOUNTS PAYABLE				\$4,702.35
ACCOUNT NO. 04810 HIBU INC. Accts Rec. PO BOX 3162 CEDAR RAPIDS, IA 524063162			ACCOUNTS PAYABLE				\$1,037.78
ACCOUNT NO. 30815 HICOM INC Accts Rec. PO BOX 218 LYONS, IN 47443			ACCOUNTS PAYABLE				\$1,549.25
ACCOUNT NO. 04880 HINCKLEY SPRINGS Accts Rec. P O BOX 660579 DALLAS, TX 752660579			ACCOUNTS PAYABLE				\$349.01
Subtotal ->							\$21,081.65

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 02144 HOLIDAY WORLD Accts Rec. PO BOX 179 SANTA CLAUS, IN 47579			ACCOUNTS PAYABLE				\$2,289.00
ACCOUNT NO. 00945 HOLOGIC, INC Accts Rec. 24506 NEWTWORK PLACE CHICAGO, IL 606731245			ACCOUNTS PAYABLE				\$10,038.28
ACCOUNT NO. 04117 HOSPIRA WORLDWIDE INC Accts Rec. 75 REMITTANCE DRIVE STE 6136 CHICAGO, IL 606756136			ACCOUNTS PAYABLE				\$608.72
ACCOUNT NO. 05125 HOWELL, RICHARD 301 CRIST ST LOT 5 WORTHINGTON, IN 47471			ACCOUNTS PAYABLE				\$10.00
ACCOUNT NO. 00295 ICE MILLER LLP Accts Rec. 27230 NETWORK PLACE CHICAGO, IL 606731272			ACCOUNTS PAYABLE				\$13,677.62
ACCOUNT NO. 01229 INDIANA BLOOD CENTER Accts Rec. 3848 SOLUTIONS CENTER CHICAGO, IL 606773008			ACCOUNTS PAYABLE				\$24,796.00
Subtotal ->							\$51,419.62

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01373 INDIANA DEPARTMENT OF REVENUE Accts Rec. PO BOX 7218 INDIANAPOLIS, IN 462077218			ACCOUNTS PAYABLE				\$1,065.21
ACCOUNT NO. 01265 INDIANA FILTER SUPPLY Accts Rec. 5850 KOPETSKY DR SUITE F INDIANAPOLIS, IN 46217			ACCOUNTS PAYABLE				\$1,917.24
ACCOUNT NO. 02213 INDIANA HOSPITAL ASSOCIATION Accts Rec. ONE AMERICAN SQUARE SUITE 1900 INDIANAPOLIS, IN 46282			ACCOUNTS PAYABLE				\$345,617.62
ACCOUNT NO. 01369 INDIANA POISON CENTER Accts Rec. METHODIST HOSPITAL I-65 AT 21ST STREET INDIANAPOLIS, IN 462061367			ACCOUNTS PAYABLE				\$795.00
ACCOUNT NO. 04307 INDIANA UNIVERSITY HEALTH BLOO Accts Rec. PO BOX 1149 BLOOMINGTON, IN 47402			ACCOUNTS PAYABLE				\$37,718.86
ACCOUNT NO. 3030 INNOMED Accts Rec. PO BOX 116888 ATLANTA, GA 303686888			ACCOUNTS PAYABLE				\$989.14
Subtotal ->							\$388,103.07

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03768 INSCCU-ASFE Accts Rec. PO BOX 6271 INDIANAPOLIS, IN 462066271			ACCOUNTS PAYABLE				\$385.00
ACCOUNT NO. 3035 INTEGRA LIFESCIENCES CORP Mary Jacobs PO BOX 404129 ATLANTA, GA 303844129			ACCOUNTS PAYABLE				\$4,479.80
ACCOUNT NO. 02424 INTERIORS BY NANCY, INC Accts Rec. 604 STATE RD 135 SOUTH NASHVILLE, IN 47448			ACCOUNTS PAYABLE				\$4,632.29
ACCOUNT NO. 30249 INTERSTATE BATTERY SYSTEM Accts Rec. 3301 WEST JONATHAN DRIVE BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$98.62
ACCOUNT NO. 00340 J & S LOCKSMITH Accts Rec. 508 W 17TH ST BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$1,073.52
ACCOUNT NO. 05152 JACKSON, HAROLD 315 LOOKOUT LANE BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$30.00
Subtotal ->							\$10,699.23

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05143 JACKSON, RYAN Accts Rec. 220 CHURCH LANE BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$15.65
ACCOUNT NO. 05151 JACOBS, JAY Accts Rec. 5105 E EARL YOUNG RD BLOOMINGTON, IN 47408			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05150 JACOBS, RUSSELL Accts Rec. 6700 W MAY RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 00835 JOHNSON & JOHNSON CODMAN Accts Rec. J & J HEALTH CARE SYSTEMS INC 5972 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$747.61
ACCOUNT NO. 00355 JOHNSON & JOHNSON HEALTHCARE Accts Rec. 5972 COLLECTIONS CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$16,854.89
ACCOUNT NO. 30500 JOHNSON&JOHNSON ASP Accts Rec. J & J HEALTH CARE SYSTEMS INC 5972 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$4,766.58
Subtotal ->							\$22,424.73

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3020 JOHNSON&JOHNSON DEPUY MITEK Accts Rec. J&J HCS 5972 COLLECTIONS CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$3,924.00
ACCOUNT NO. 01363 JOHNSON&JOHNSON DEPUY ORTHO Accts Rec. 5972 COLLECTIONS CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$845.00
ACCOUNT NO. 05149 JOHNSON, BRETT 3132 N KINGSLEY DR BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05146 JOHNSON, MARY 245 N FRANKLIN ST ORLEANS, IN 47452			ACCOUNTS PAYABLE				\$25.00
ACCOUNT NO. 05121 JONES, CHRISTINA 1206 STEVENS LN MITCHELL, IN 47446			ACCOUNTS PAYABLE				\$15.00
ACCOUNT NO. 05119 JONES, CYNTHIA 2207 S ROCKPORT RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$15.00
Subtotal ->							\$4,844.00

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05120 JONES, KRYSTAL Accts Rec. 621 W CLOVER TERRACE BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 05117 JONES, LINDA 6580 ST RD 39 MARTINSVILLE, IN 46151			ACCOUNTS PAYABLE				\$70.00
ACCOUNT NO. 03063 JONES, SANDRA PO BOX 60 SHOALS, IN 47581			ACCOUNTS PAYABLE				\$22.00
ACCOUNT NO. 04134 JR PROMOTIONS Accts Rec. PO BOX 508 COLUMBUS, IN 47202			ACCOUNTS PAYABLE				\$1,650.00
ACCOUNT NO. 05118 JUKES, TYRA Accts Rec. 4318 RACCOON RD FREEDOM, IN 47431			ACCOUNTS PAYABLE				\$30.00
ACCOUNT NO. 04334 KALARI, RAMESH Dr. Kalari 2520 Q ST BEDFORD, IN 47421			ACCOUNTS PAYABLE				\$4,800.00
Subtotal ->							\$6,592.00

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01217 KARL STORZ ENDOSCOPY-AMERICAN Accts Rec. FILE NO 53514 LOS ANGELES, CA 900743514			ACCOUNTS PAYABLE				\$229.72
ACCOUNT NO. 3120 KERMA MEDICAL PRODUCTS, INC. Accts Rec. 215 SUBURBAN DR SUFFOLK, VA 234342519			ACCOUNTS PAYABLE				\$269.82
ACCOUNT NO. 05098 KEY SURGICAL Accts Rec. 8101 WALLACE ROAD EDEN PRAIRIE, MN 55344			ACCOUNTS PAYABLE				\$288.00
ACCOUNT NO. 05207 KNOX COUNTY EMS Accts Rec. 906 NORTH 10TH STREET VINCENNES, IN 47591			ACCOUNTS PAYABLE				\$479.20
ACCOUNT NO. 01004 KONICA MINOLTA MEDICAL IMAGING Accts Rec. 411 NEWARK POMPTON TURNPIKE WAYNE, NJ 7470			ACCOUNTS PAYABLE				\$1,827.00
ACCOUNT NO. 2961 KRAMES STAYWELL, LLC. Accts Rec. PO BOX 90477 CHICAGO, IL 606960477			ACCOUNTS PAYABLE				\$229.15
Subtotal ->							\$3,322.89

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01094 KSM BUSINESS SERVICES, INC Accts Rec. PO BOX 7096-DEPT #235 INDIANAPOLIS, IN 462067096			ACCOUNTS PAYABLE				\$61,974.38
ACCOUNT NO. 01643 LABCORP OF AMERICA HOLDINGS Accts Rec. PO BOX 12140 BURLINGTON, NC 272162140			ACCOUNTS PAYABLE				\$23,723.18
ACCOUNT NO. 00280 LAMAR ADVERTISING CO Adrian Adams PO BOX 96030 BATON ROUGE, LA 70896			ACCOUNTS PAYABLE				\$681.00
ACCOUNT NO. 02658 LANDMARK SIGN COMPANY Laura Lewis 104 S FRANKLIN RD BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$650.00
ACCOUNT NO. 02471 LASALLE SYSTEMS LEASING INC c/o MB FINANCIAL BANK NA-149 611 N. River Rd., 6th Floor Leasing ROSEMONT, IL 60018			ACCOUNTS PAYABLE				\$3,505.32
ACCOUNT NO. 30990 LEMAITRE VASCULAR Accts Rec. PO BOX 533177 CHARLOTTE, NC 282903177			ACCOUNTS PAYABLE				\$1,165.00
Subtotal ->							\$91,698.88

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01093 LEWIS TESTING SERVICES INC Accts Rec. PO BOX 39109 INDIANAPOLIS, IN 46239			ACCOUNTS PAYABLE				\$160.00
ACCOUNT NO. 01125 LIFE INSTRUMENTS CORP Accts Rec. 14 WOOD RD BRAINTREE, MA 2184			ACCOUNTS PAYABLE				\$765.00
ACCOUNT NO. 30875 LIFENET HEALTH Accts Rec. PO BOX 79636 BALTIMORE, MD 212790636			ACCOUNTS PAYABLE				\$4,132.50
ACCOUNT NO. 00395 LINDE GAS NORTH AMERICA LLC Accts Rec. 24963 NETWORK PL CHICAGO, IL 606731249			ACCOUNTS PAYABLE				\$8,774.67
ACCOUNT NO. 03304 LINTON-STOCKTON Accts Rec. CHAMBER OF COMMERCE PO BOX 208 LINTON, IN 47441			ACCOUNTS PAYABLE				\$125.00
ACCOUNT NO. 00121 LSI SOLUTIONS Accts Rec. PO BOX 2058099 DALLAS, TX 753205099			ACCOUNTS PAYABLE				\$971.89
Subtotal ->							\$14,929.06

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In re Monroe Hospital, LLC
DebtorCase No. 14-07417(JMC)
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3045 MAINE STANDARDS COMPANY LLC Accts Rec. 765 ROOSEVELT TRAIL SUITE 9A WINDHAM, ME 4062			ACCOUNTS PAYABLE				\$830.81
ACCOUNT NO. 01001 MALLINCKRODT INC/COVIDIEN Accts Rec. PO BOX 73192 CHICAGO, IL 606737192			ACCOUNTS PAYABLE				\$70.70
ACCOUNT NO. 02702 MANAGED HEALTH SERVICES Accts Rec. 1099 N MERIDIAN ST SUITE 400 INDIANAPOLIS, IN 462041041			ACCOUNTS PAYABLE				\$460.04
ACCOUNT NO. 02640 MAQUET MEDICAL SYSTEMS USA Accts Rec. 3615 SOLUTIONS CENTER CHICAGO, IL 606772005			ACCOUNTS PAYABLE				\$1,228.00
ACCOUNT NO. 30170 MAR-MED CO Accts Rec. ACCOUNTS RECEIVABLE P. O. BOX 6486 GRAND RAPIDS, MI 49516			ACCOUNTS PAYABLE				\$63.15
ACCOUNT NO. 01040 MARKETLAB, INC Accts Rec. DEPT 77386 PO BOX 77000 DETROIT, MI 482770386			ACCOUNTS PAYABLE				\$91.53
Subtotal ->							\$2,744.23

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00059 MARSTON TECHNICAL SERVICE INC Accts Rec. 11576 GOLDCOAST DRIVE CINCINNATI, OH 45249			ACCOUNTS PAYABLE				\$1,088.00
ACCOUNT NO. 30605 MAST BIOSURGERY Accts Rec. 6749 TOP GUN STREET SUITE 108 SAN DIEGO, CA 92121			ACCOUNTS PAYABLE				\$2,357.93
ACCOUNT NO. 05202 MCINTOSH, ALYSIA Accts Rec. 119 N SEMINARY ST BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 31065 MCKESSON HEALTH SOLUTIONS Accts Rec. 22423 NETWORK PLACE CHICAGO, IL 606731224			ACCOUNTS PAYABLE				\$4,882.16
ACCOUNT NO. 30475 MCMASTER-CARR SUPPLY CO Accts Rec. PO BOX 7690 CHICAGO, IL 606807690			ACCOUNTS PAYABLE				\$74.10
ACCOUNT NO. 30825 MCN HEALTHCARE Accts Rec. 1777 S HARRISON ST SUITE 405 DENVER, CO 80210			ACCOUNTS PAYABLE				\$229.99
Subtotal ->							\$8,652.18

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Meaningful Use Fund Center for Medicare & Medicaid Services (CMS) Attn: Peter Figliozzi 585 Stewart Ave. Suite 416 Garden City, NY 11530			ACCOUNTS PAYABLE			X	Unknown
ACCOUNT NO. 02036 MED ASSETS Accts Rec. PO BOX 405652 ATLANTA, GA 303845652			ACCOUNTS PAYABLE				\$6,210.00
ACCOUNT NO. 30610 MEDCOMP Accts Rec. 1499 DELP DR HARLEYSVILLE, PA 19438			ACCOUNTS PAYABLE				\$869.52
ACCOUNT NO. 00194 MEDICAL INNOVATIONS INC. Accts Rec. 6252 INLET WATCH DR. SOUTHPORT, NC 28461			ACCOUNTS PAYABLE				\$1,086.81
ACCOUNT NO. 01039 MEDICAL PHYSICS CONSULTANTS Accts Rec. 214 EAST HURON ST ANN ARBOR, MI 48104			ACCOUNTS PAYABLE				\$3,750.00
ACCOUNT NO. 01031 MEDIVATORS Accts Rec. N.W. 9841 PO BOX 1450 MINNEAPOLIS, MN 55485			ACCOUNTS PAYABLE				\$1,390.80
Subtotal ->							\$13,307.13

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3100 MEDLINE INDUSTRIES INC Jeanette Tarr DEPT CH 14400 PALATINE, IL 600554400			ACCOUNTS PAYABLE				\$7,191.13
ACCOUNT NO. 00034 MEDSERVICE REPAIR INC Accts Rec. 1234 ALLANSON RD MUNDELEIN, IL 60060			ACCOUNTS PAYABLE				\$807.38
ACCOUNT NO. 00036 MEGADYNE Accts Rec. 11506 S STATE STREET DRAPER, UT 84020			ACCOUNTS PAYABLE				\$2,788.94
ACCOUNT NO. 01193 MERIT MEDICAL SYSTEMS INC Accts Rec. ATTN: SHERY A/R 1600 W MERIT PARKWAY SOUTH JORDAN, UT 84095			ACCOUNTS PAYABLE				\$481.50
ACCOUNT NO. 00084 MERZ AESTHETICS INC Accts Rec. DEPT 2073 DENVER, CO 80291			ACCOUNTS PAYABLE				\$2,509.00
ACCOUNT NO. 30065 MICROLINE SURGICAL INC. Accts Rec. 50 DUNHAM ROAD SUITE 1500 BEVERLY, MA 1915			ACCOUNTS PAYABLE				\$4,635.35
Subtotal ->							\$18,413.30

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03253 MIDWEST COLOR PRINTING Accts Rec. 2511 W. 3RD ST., SUITE B BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$1,581.61
ACCOUNT NO. 00745 MIDWEST MEDICAL EQUIPMENT Accts Rec. 447 TIMBERLEA TRAIL DAYTON, OH 45429			ACCOUNTS PAYABLE				\$462.40
ACCOUNT NO. 04919 MIDWEST MEDICAL GAS SERVICE Accts Rec. 332 MICHIGAN AVE STE 1032 #M108 CHICAGO, IL 606044434			ACCOUNTS PAYABLE				\$1,658.85
ACCOUNT NO. 00185 MINDRAY DS USA, INC Accts Rec. 24312 NETWORK PLACE CHICAGO, IL 606731243			ACCOUNTS PAYABLE				\$2,361.98
ACCOUNT NO. 30100 MIZUHO OSI Accts Rec. PO BOX 1468 UNION CITY, CA 945871468			ACCOUNTS PAYABLE				\$527.58
ACCOUNT NO. 00127 MMS - A MEDICAL COMPANY SUPPLY Accts Rec. PO BOX 955588 ST. LOUIS, MO 631955588			ACCOUNTS PAYABLE				\$353.34
Subtotal ->							\$6,945.76

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30790 MOBILE INSTRUMENT SERV & REP Accts Rec. 333 WATER AVE BELLEFONTAINE, OH 433111777			ACCOUNTS PAYABLE				\$2,054.40
ACCOUNT NO. 02581 MONROE COUNTY SOLID WASTE MGMT Accts Rec. 3400 SOUTH WALNUT ST BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$62.94
ACCOUNT NO. 00470 MONROE COUNTY TREASURER Accts Rec. CATHERINE SMITH 100 W KIRKWOOD AVE BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$140,793.95
ACCOUNT NO. 00475 MONROE COUNTY YMCA PO BOX 2598 BLOOMINGTON, IN 47402			ACCOUNTS PAYABLE				\$846.00
ACCOUNT NO. 03715 MONROE HOSPITAL MEDICAL STAFF 4011 S MONROE MEDICAL PARK BLVD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$1,400.00
ACCOUNT NO. 02687 MONROE MEDICAL ARTS, LLC Brian Stancombe PO BOX 6354 BLOOMINGTON, IN 47407			ACCOUNTS PAYABLE				\$5,287.20
Subtotal ->							\$150,444.49

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05136 MOORE, BETH 4962 N WHITERIVER DR BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$25.05
ACCOUNT NO. 01795 MORRISONS TV & APPLIANCE Accts Rec. P O BOX 2537 BLOOMINGTON, IN 474022537			ACCOUNTS PAYABLE				\$170.63
ACCOUNT NO. 05126 MULLEN, ROBERT Accts Rec. 934 MACARTHUR ST JASPER, IN 47546			ACCOUNTS PAYABLE				\$9.00
ACCOUNT NO. 30830 MUSCULOSKELETAL TRANSPLANT 125 MAY STREET EDISON, NJ 8837			ACCOUNTS PAYABLE				\$15,247.58
ACCOUNT NO. 02856 MYERS, MICHELLE Accts Rec. 1544 W EDINBURGH BEND BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$30.00
ACCOUNT NO. 02585 NANCY K CATANELLA, RMC Accts Rec. 5439 SAN FLORENTINE AVE LAS VEGAS, NV 89141			ACCOUNTS PAYABLE				\$233.35
Subtotal ->							\$15,715.61

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01026 NATURE'S WAY INC Accts Rec. PO BOX 6896 7330 N WAYPORT RD BLOOMINGTON, IN 47407			ACCOUNTS PAYABLE				\$1,347.60
ACCOUNT NO. 00057 NEUROTHERM Accts Rec. 30 UPTON DRIVE SUITE 2 WILMINGTON, MA 1887			ACCOUNTS PAYABLE				\$390.24
ACCOUNT NO. 02044 NEW DIMENSIONS Pat O'Connor YOUR HATS DESIRE, INC PO BOX 434/145 E SENECA ST MANLIUS, NY 13104			ACCOUNTS PAYABLE				\$237.66
ACCOUNT NO. 00780 NEWKIRK COMMUNICATIONS Accts Rec. 201 HILLSIDE DR ENGLISH, IN 47118			ACCOUNTS PAYABLE				\$400.00
ACCOUNT NO. 05096 NORTHERN INDIANA EMERGENCY PHY Joely Pearn PO BOX 674579 DETROIT, MI 482674579			ACCOUNTS PAYABLE				\$16,267.00
ACCOUNT NO. 31070 NOVAMED INC Joely Pearn 8136 N LAWNSDALE AVE SKOKIE, IL 60076			ACCOUNTS PAYABLE				\$68.00
Subtotal ->							\$18,710.50

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03380 NUANCE COMMUNICATIONS Accts Rec. PO BOX 2561 CAROL STREAM, IL 601322561			ACCOUNTS PAYABLE				\$65,752.32
ACCOUNT NO. 00900 OLYMPUS AMERICA Accts Rec. P O BOX 200194 PITTSBURGH, PA 152510194			ACCOUNTS PAYABLE				\$31,734.00
ACCOUNT NO. 3000 OLYMPUS AMERICA INC Accts Rec. PO BOX 200194 PITTSBURGH, PA 152510194			ACCOUNTS PAYABLE				\$1,821.59
ACCOUNT NO. 03588 OLYMPUS FINANCIAL SERVICES Accts Rec. PO BOX 200183 PITTSBURGH, PA 152510183			ACCOUNTS PAYABLE				\$320.41
ACCOUNT NO. 03354 ONKAR Properties 669 1 E Manor Dr. Terre Haute, IN 47802			ACCOUNTS PAYABLE				\$457.52
ACCOUNT NO. 01032 OPTI MEDICAL SYSTEMS INC Accts Rec. PO BOX 932005 ATLANTA, GA 311932005			ACCOUNTS PAYABLE				\$487.20
Subtotal ->							\$100,573.04

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03840 OPTUM 360 Accts Rec. PO BOX 34960 SEATTLE, WA 981241960			ACCOUNTS PAYABLE				\$10,855.65
ACCOUNT NO. 30215 ORTHOFIX Accts Rec. PO BOX 849806 DALLAS, TX 752849806			ACCOUNTS PAYABLE				\$1,901.05
ACCOUNT NO. 00044 OSTEOTECH Accts Rec. 4642 COLLECTION CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$2,108.15
ACCOUNT NO. 05208 Palm Harbor Medical, Inc. 3015 Ridge Line Blvd. Tarpon Springs, FL 34688			ACCOUNTS PAYABLE				\$2,379.40
ACCOUNT NO. 03377 PARAGARD DIRECT Accts Rec. 12601 COLLECTION CENTER DRIVE CHICAGO, IL 606930126			ACCOUNTS PAYABLE				\$1,196.00
ACCOUNT NO. 04925 PDC 27770 N. Entertainment Dr. Ste. 200 Valencia, AR 91355			ACCOUNTS PAYABLE				\$1,467.36
Subtotal ->							\$19,907.61

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03754 PELSTAR Accts Rec. 11800 SOUTH AUSTIN - UNIT B ALSIP, IL 60803			ACCOUNTS PAYABLE				\$300.00
ACCOUNT NO. 00510 Pharmacy 1 Express 730 West Second St. Bloomington, IN 47403			ACCOUNTS PAYABLE				\$234.80
ACCOUNT NO. 05084 PHARMASOURCE HEALTHCARE, INC Accts Rec. PO BOX 632849 CINCINNATI, OH 452632849			ACCOUNTS PAYABLE				\$71,175.79
ACCOUNT NO. 00792 PHARMEDIUM SERVICES, LLC Accts Rec. 39797 TREASURY CENTER CHICAGO, IL 606943900			ACCOUNTS PAYABLE				\$828.40
ACCOUNT NO. 02224 PHILIPS HEALTHCARE Accts Rec. PO BOX 100355 ATLANTA, GA 303843355			ACCOUNTS PAYABLE				\$71,070.00
ACCOUNT NO. 31041 PHILIPS HEALTHCARE-ELECTRONICS Bobbie PO BOX 100356 ATLANTA, GA 30384			ACCOUNTS PAYABLE				\$21,018.00
Subtotal ->							\$164,626.99

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 31040 PHILIPS MEDICAL SYSTEMS Accts Rec. PO BOX 100355 ATLANTA, GA 303840355			ACCOUNTS PAYABLE				\$1,016.50
ACCOUNT NO. 03144 PHYSICIANS MUTUAL LIFE Accts Rec. PO BOX 2018 OMAHA, NE 681032018			ACCOUNTS PAYABLE				\$1,068.00
ACCOUNT NO. 04044 PIAZZA PRODUCE Accts Rec. P.O. BOX 68931 INDIANAPOLIS, IN 462680931			ACCOUNTS PAYABLE				\$2,133.69
ACCOUNT NO. 02345 PITNEY BOWES -GLOBAL FINANCIAL Carolyn Boyle PO BOX 371887 PITTSBURGH, PA 152507887			ACCOUNTS PAYABLE				\$963.00
ACCOUNT NO. 00515 Pitney Bowes Purchase Power PO Box 371874 Pittsburgh, PA 15250			ACCOUNTS PAYABLE				\$823,080.00
ACCOUNT NO. 02547 PITNEY BOWES, INC Accts Rec. PO BOX 371887 PITTSBURGH, PA 152507896			ACCOUNTS PAYABLE				\$2,395.12
Subtotal ->							\$830,656.31

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30975 PLYMATE Accts Rec. 819 ELSTON DR SHELBYVILLE, IN 46176			ACCOUNTS PAYABLE				\$1,136.40
ACCOUNT NO. 02375 PREMIER HEALTHCARE, LLC David Wolfe PO BOX 550 BLOOMINGTON, IN 47402			ACCOUNTS PAYABLE			X	\$3,131,520.75
ACCOUNT NO. 00014 PRESCOTT'S INC. Accts Rec. 18940 EMIGRANT TRAIL EAST MONUMENT, CO 80132			ACCOUNTS PAYABLE				\$580.00
ACCOUNT NO. 02587 PROFESSIONAL OFFICE SERVICES Accts Rec. PO BOX 450 WATERLOO, IA 50704			ACCOUNTS PAYABLE				\$37.30
ACCOUNT NO. 30995 PROGRESSIVE MEDICAL Accts Rec. PO BOX 771410 ST. LOUIS, MO 631772410			ACCOUNTS PAYABLE				\$7,660.13
ACCOUNT NO. 02555 PROMETHEUS LABORATORIES INC Accts Rec. PO BOX 7738 SAN FRANCISCO, IN 94120			ACCOUNTS PAYABLE				\$5,834.50
Subtotal ->							\$3,146,769.08

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04971 Quintech, Inc. 610 S. Wake Village Rd. Wake Village, TX 75501			ACCOUNTS PAYABLE				\$1,634.02
ACCOUNT NO. 03783 RADIATION DETECTION COMPANY Accts Rec. 3527 SNEAD DRIVE GEORGETOWN, TX 78626			ACCOUNTS PAYABLE				\$823.00
ACCOUNT NO. 04800 RADIATION SERVICES OF INDIANA Accts Rec. 422 PARK 800 DR GREENWOOD, IN 46143			ACCOUNTS PAYABLE				\$2,822.45
ACCOUNT NO. 04989 RECORD-INDIANA, INC. Accts Rec. PO BOX 188 WHITELAND, IN 461840188			ACCOUNTS PAYABLE				\$192.50
ACCOUNT NO. 04148 RECOVERY CONSULTING INC Accts Rec. 120 E MARKET ST STE 1101 INDIANAPOLIS, IN 46204			ACCOUNTS PAYABLE				\$239.66
ACCOUNT NO. 03646 REGAL ELITE, INC 4333-B TULLER RD. DUBLIN, OH 43017			ACCOUNTS PAYABLE				\$40.75
Subtotal ->							\$5,752.38

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In re Monroe Hospital, LLC
DebtorCase No. 14-07417(JMC)
(If known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00275 REPUBLIC SERVICES #694 Accts Rec. PO BOX 9001099 LOUISVILLE, KY 402901099			ACCOUNTS PAYABLE				\$1,504.31
ACCOUNT NO. 05114 REVENUE COLLECT Accts Rec. 1150 LANCASTER BLVD #210 MECHANICSBURG, PA 17055			ACCOUNTS PAYABLE				\$3,342.24
ACCOUNT NO. 02433 RICHEY, ROBERT 9551 S HARBOUR POINTE DR BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$11,000.00
ACCOUNT NO. 03656 RICOH USA, INC Accts Rec. PO BOX 802815 CHICAGO, IL 606802815			ACCOUNTS PAYABLE				\$8,857.59
ACCOUNT NO. 00129 ROBBINS INSTRUMENTS Accts Rec. PO BOX 441 2 NORTH PASSAIC AVENUE CHATHAM, NJ 7928			ACCOUNTS PAYABLE				\$384.16
ACCOUNT NO. 04759 ROBERTS, TAMMY Accts Rec. 134 THE WOODS BEDFORD, IN 47421			ACCOUNTS PAYABLE				\$80.00
Subtotal ->							\$25,168.30

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3110 ROCHE Accts Rec. MAIL CODE 5508 PO BOX 105046 ATLANTA, GA 303485046			ACCOUNTS PAYABLE				\$206.98
ACCOUNT NO. 05006 RURAL METRO OF INDIANA LP Accts Rec. PO BOX 11179 BELFAST, MN 49154002			ACCOUNTS PAYABLE				\$2,474.28
ACCOUNT NO. 01314 SAGAMORE HEALTH NETWORK INC Accts Rec. PO BOX 716025 CINCINNATI, OH 452716025			ACCOUNTS PAYABLE				\$16,310.10
ACCOUNT NO. 00797 SANOFI PASTEUR GROUP Accts Rec. 12458 COLLECTIONS CENTER DR CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$7,594.38
ACCOUNT NO. 04023 SARE ROAD LLC Accts Rec. 1815 S. WALNUT STREET BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$3,779.25
ACCOUNT NO. 05140 SCHAUPP, ROLAND Accts Rec. 1191 THORNRIDGE WAY SPENCER, IN 47460			ACCOUNTS PAYABLE				\$74.50
Subtotal ->							\$30,439.49

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05141 SCHAUPP, SANDRA Accts Rec. 1191 THORNBRIDGE WAY SPENCER, IN 47460			ACCOUNTS PAYABLE				\$50.37
ACCOUNT NO. 05196 SCHNEIDER, WILLIAM Accts Rec. 5036 W SEPTEMBER DR BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$26.58
ACCOUNT NO. 05059 SECAP FINANCE Accts Rec. PO BOX 405371 ATLANTA, GA 303845371			ACCOUNTS PAYABLE				\$1,638.03
ACCOUNT NO. 04174 Seven Up Snapple 5430 W. 81st. St. Indianapolis, IN 46268			ACCOUNTS PAYABLE				\$381.47
ACCOUNT NO. 00118 SHARN ANESTHESIA Accts Rec. 3204 MOMENTUM PLACE CHICAGO, IL 606731214			ACCOUNTS PAYABLE				\$402.68
ACCOUNT NO. 30450 SIEMENS HEALTHCARE DIAGNOSTICS Accts Rec. PO BOX 121102 DALLAS, TX 606895332			ACCOUNTS PAYABLE				\$5,176.94
Subtotal ->							\$7,676.07

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3771 SIGVARIS INC Accts Rec. PO BOX 890807 CHARLOTTE, NC 753121102			ACCOUNTS PAYABLE				\$1,809.50
ACCOUNT NO. 01102 SIMS CABINET COMPANY INC Accts Rec. 431 N HOLMES AVE PO BOX 22385 INDIANAPOLIS, IN 600550320			ACCOUNTS PAYABLE				\$2,354.00
ACCOUNT NO. 3065 SMITH & NEPHEW ENDOSCOPY Accts Rec. PO BOX 60333 CHARLOTTE, NC 46222			ACCOUNTS PAYABLE				\$2,965.89
ACCOUNT NO. 30030 SMITH & NEPHEW INC Accts Rec. PO BOX 785921 PHILADELPHIA, PA 282600333			ACCOUNTS PAYABLE				\$5,318.01
ACCOUNT NO. 00097 SMITH & NEPHEW INC WOUND MANAG Accts Rec. 75 REMITTANCE DRIVE #6493 CHICAGO, IL 19178			ACCOUNTS PAYABLE				\$1,444.50
ACCOUNT NO. 03877 SMITH, CYNTHIA Accts Rec. 5961 HEAD ROAD BORDEN, IN 606756493			ACCOUNTS PAYABLE				\$109.46
Subtotal ->							\$14,001.36

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00580 SMITHVILLE COMMUNICATIONS, INC Accts Rec. PO BOX 6455 INDIANAPOLIS, IN 47106			ACCOUNTS PAYABLE				\$5,345.28
ACCOUNT NO. 00910 SOURCE ONE HEALTHCARE Accts Rec. PO BOX 8004 MENTOR, OH 440618004			ACCOUNTS PAYABLE				\$2,612.99
ACCOUNT NO. 00091 SOURCEMARK Accts Rec. 100 WINNERS CIRCLE SUITE 250 BRENTWOOD, TN 37027			ACCOUNTS PAYABLE				\$1,161.25
ACCOUNT NO. 02920 SOUTH CENTRAL IN INTERPRETING Accts Rec. 2640 EASTBROOK PLAZA COLUMBUS, IN 47201			ACCOUNTS PAYABLE				\$295.57
ACCOUNT NO. 03919 SOUTHERN INDIANA RADIOLOGICAL Accts Rec. P.O. BOX 4366 BLOOMINGTON, IN 47402			ACCOUNTS PAYABLE				\$4,928.50
ACCOUNT NO. 30751 SOUTHERN INDIANA SURGERY CENTE Accts Rec. 2800 REX GROSSMAN BLVD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$500.00
Subtotal ->							\$14,843.59

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00798 SPECTRA CORP Accts Rec. 8131 LBJ FREEWAY SUITE 360 DALLAS, TX 75251			ACCOUNTS PAYABLE				\$19.80
ACCOUNT NO. 04754 ST VINCENT MEDICAL GROUP, INC Accts Rec. 10330 N MERIDIAN ST, SUITE 410 INDIANAPOLIS, IN 46260			ACCOUNTS PAYABLE				\$170,000.00
ACCOUNT NO. 00007 STAAR SURGICAL COMPANY Accts Rec. PO BOX 515160 LOS ANGELES, CA 900515160			ACCOUNTS PAYABLE				\$10.64
ACCOUNT NO. 05142 STAHLY, TED Accts Rec. 4130 LOSTMANS LANE BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$30.00
ACCOUNT NO. 05204 STANLEY, CINDY Accts Rec. 1622 S BIRCH LANE BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$5.00
ACCOUNT NO. 01030 STANSIFER RADIO COMPANY INC Accts Rec. 1805 S WALNUT ST BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$30.72
Subtotal ->							\$170,096.16

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00160 STAPLES ADVANTAGE Accts Rec. DEPT DET PO BOX 83689 CHICAGO, IL 441947012			ACCOUNTS PAYABLE				\$4,568.06
ACCOUNT NO. 01443 STATE CLEANING SOLUTIONS Accts Rec. PO BOX 77012 CLEVELAND, OH 606731264			ACCOUNTS PAYABLE				\$10.70
ACCOUNT NO. 02101 STERICYCLE COMMUNICATION Joanna 26432 NETWORK PLACE CHICAGO, IL 601976575			ACCOUNTS PAYABLE				\$651.40
ACCOUNT NO. 01303 STERICYCLE INC Accts Rec. P.O. BOX 6575 CAROL STREAM, IL 55449			ACCOUNTS PAYABLE				\$12,298.55
ACCOUNT NO. 04809 STERICYCLE SPECIALTY WASTE SOL Accts Rec. 2850 100TH COURT NE BLAINE, MN 606733308			ACCOUNTS PAYABLE				\$735.63
ACCOUNT NO. 02998 STRYKER ENDOSCOPY Accts Rec. C/O STRYKER SALES CORP PO BOX 93276 CHICAGO, IL 606730119			ACCOUNTS PAYABLE				\$4,814.09
Subtotal ->							\$23,078.43

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00940 STRYKER INSTRUMENTS Accts Rec. PO BOX 70119 CHICAGO, IL 49002			ACCOUNTS PAYABLE				\$26,235.81
ACCOUNT NO. 00079 STRYKER MEDICAL Cynthia Janicke 3800 E. CENTRE AVE PORTAGE, MI 606733213			ACCOUNTS PAYABLE				\$510.00
ACCOUNT NO. 30175 STRYKER ORTHOPAEDICS Robin Broderick BOX 93213 CHICAGO, IL 850389387			ACCOUNTS PAYABLE				\$66,317.35
ACCOUNT NO. 00086 STRYKER SUSTAINABILITY SOLUTIO Accts Rec. PO BOX 29387 PHOENIX, AZ 191823444			ACCOUNTS PAYABLE				\$11,601.50
ACCOUNT NO. 01863 SURGICAL SPECIALTIES Accts Rec. P. O. BOX 823444 PHILADELPHIA, PA 212759159			ACCOUNTS PAYABLE				\$5,814.50
ACCOUNT NO. 00147 SYMMETRY SURGICAL PO BOX 759159 BALTIMORE, MD 60613			ACCOUNTS PAYABLE				\$836.76
Subtotal ->							\$111,315.92

B 6F (Official Form 6F)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3920 SYNAPSE MEDICAL, LLC Accts Rec. 743 W. BITTERSWEET PLACE CHICAGO, IL 191710662			ACCOUNTS PAYABLE				\$510.00
ACCOUNT NO. 00800 SYNTHES Accts Rec. PO BOX 8538-662 PHILADELPHIA, PA 191710662			ACCOUNTS PAYABLE				\$11,819.34
ACCOUNT NO. 01105 SYSCO FOOD SERVICES Lloyd Holleman PO BOX 7137 INDIANAPOLIS, IN 462067137			ACCOUNTS PAYABLE				\$23,036.28
ACCOUNT NO. 30010 SYSMEX AMERICA INC Accts Rec. 39923 TREASURY CENTER CHICAGO, IL 606949900			ACCOUNTS PAYABLE				\$11,094.84
ACCOUNT NO. 01025 TABCO BUSINESS FORMS INC Accts Rec. PO BOX 3400 TERRE HAUTE, IN 47403			ACCOUNTS PAYABLE				\$104.43
ACCOUNT NO. 00184 TEI MEDICAL 1000 WINTER STREET SUITE 4900 WALTHAM, MA 2451			ACCOUNTS PAYABLE				\$11,152.00
Subtotal ->							\$57,716.89

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00008 TELERENT LEASING CORP Accts Rec. P O BOX 890063 CHARLOTTE, NC 282890063			ACCOUNTS PAYABLE				\$78.57
ACCOUNT NO. 03083 TERMINIX Accts Rec. PO BOX 742592 CINCINNATI, OH 452742592			ACCOUNTS PAYABLE				\$1,292.24
ACCOUNT NO. 30715 TERUMO MEDICAL CORP Accts Rec. PO BOX 281285 ATLANTA, GA 303841285			ACCOUNTS PAYABLE				\$454.64
ACCOUNT NO. 00995 THD AMERICA INC 8920 BRITTANY WAY TAMPA, FL 33619			ACCOUNTS PAYABLE				\$6,989.53
ACCOUNT NO. 01769 THERACOM, A CAREMARK COMPANY Accts Rec. PAYMENT CENTER PO BOX 640105 CINCINNATI, OH 452640105			ACCOUNTS PAYABLE				\$5,245.30
ACCOUNT NO. 01083 THOMAS, ROB Accts Rec. 612 SOUTH EASTSIDE DR. BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$2,160.00
Subtotal ->							\$16,220.28

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01106 TIM GARL/EMHG LLC Accts Rec. 4890 S STATE RD 446 BLOOMINGTON, IN 47401			ACCOUNTS PAYABLE				\$2,877.50
ACCOUNT NO. 2873 TORNIER Accts Rec. PO BOX 4631 HOUSTON, TX 772104631			ACCOUNTS PAYABLE				\$14,541.48
ACCOUNT NO. 03147 TRANE SERVICE GROUP Accts Rec. PO BOX 98167 CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$788.40
ACCOUNT NO. 03256 TRANE US, INC Accts Rec. PO BOX 98167 CHICAGO, IL 60693			ACCOUNTS PAYABLE				\$4,656.50
ACCOUNT NO. 00920 TRI ANIM HEALTH SERVICE INC Accts Rec. 25197 NETWORK PLACE CHICAGO, IL 606731251			ACCOUNTS PAYABLE				\$1,380.73
ACCOUNT NO. 01481 TRI3 ENTERPRISES Accts Rec. dba WABASH MEDICAL COMPANY INC 7750 ZIONSVILLE RD SUITE 850 INDIANAPOLIS, IN 46268			ACCOUNTS PAYABLE				\$2,915.00
Subtotal ->							\$27,159.61

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 30935 TRIMED Accts Rec. PO BOX 55189 VALENCIA, CA 913850189			ACCOUNTS PAYABLE				\$26,818.00
ACCOUNT NO. 03118 TRUVEN HEALTH ANALYTICS, INC Accts Rec. P O BOX 95334 CHICAGO, IL 606945334			ACCOUNTS PAYABLE				\$4,364.26
ACCOUNT NO. TSG Resources Schumacher Settlement 200 Corporate Blvd. #201 Lafayette, LA 70508			LITIGATION				\$360,000.00
ACCOUNT NO. 00043 TYPENEX MEDICAL LLC Accts Rec. 303 E WACKER DRIVE SUITE 1200 CHICAGO, IL 60601			ACCOUNTS PAYABLE				\$840.00
ACCOUNT NO. 00168 UHS SURGICAL SERVICES Accts Rec. 12-3114 PO BOX 86 MINNEAPOLIS, MN 554863114			ACCOUNTS PAYABLE				\$945.20
ACCOUNT NO. 30445 ULINE Accts Rec. ATTN: ACCOUNTS RECEIVABLE PO BOX 88741 CHICAGO, IL 606801741			ACCOUNTS PAYABLE				\$371.60
Subtotal ->							\$393,339.06

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In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04080 UNIFIRST Accts Rec. 4201 INDUSTRIAL BLVD INDIANAPOLIS, IN 46254			ACCOUNTS PAYABLE				\$437.84
ACCOUNT NO. 01509 UNITED HOSPITAL SERVICES Accts Rec. DEPT 78756 PO BOX 78000 DETROIT, MI 482780756			ACCOUNTS PAYABLE				\$27,620.94
ACCOUNT NO. 00685 UNIVERSAL FINANCIAL SVCS LP William Mondt 210 S 5TH ST SUITE 105 SAINT CHARLES, IL 60174			ACCOUNTS PAYABLE			X	\$1,337,326.67
ACCOUNT NO. 00690 UNIVERSAL HOSPITAL SERVICES Stuart Davidson SDS 12-0940 PO BOX 86 MINNEAPOLIS, MN 554860940			ACCOUNTS PAYABLE				\$131,036.64
ACCOUNT NO. 00925 US ENDOSCOPY Accts Rec. Lockbox 771652 1652 Solution Center CHICAGO, IL 606771006			ACCOUNTS PAYABLE				\$1,311.13
ACCOUNT NO. 01903 USA MOBILITY WIRELESS, INC Accts Rec. PO BOX 660324 DALLAS, TX 752660324			ACCOUNTS PAYABLE				\$170.76
Subtotal ->							\$1,497,903.98

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In re Monroe Hospital, LLC
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Case No. 14-07417(JMC)
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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00163 VASCULAR SOLUTIONS INC Accts Rec. P.O. BOX 1178 MAPLE GROVE, MN 55369			ACCOUNTS PAYABLE				\$741.78
ACCOUNT NO. 00695 VECTREN ENERGY DELIVERY Accts Rec. PO BOX 6248 INDIANAPOLIS, IN 46206			ACCOUNTS PAYABLE				\$67.11
ACCOUNT NO. 02305 VERIZON WIRELESS Accts Rec. PO BOX 25505 LEHIGH VALLEY, PA 18002			ACCOUNTS PAYABLE				\$1,501.19
ACCOUNT NO. 01535 VIBRA ACUTE CARE LLC Mike Thomas 4550 LENA DR SUITE 225 MECHANICSBURG, PA 17055			ACCOUNTS PAYABLE				\$3,861,450.23
ACCOUNT NO. 30155 VILEX INC Accts Rec. 111 MOFFITT ST MCMINNVILLE, TN 37110			ACCOUNTS PAYABLE				\$1,319.25
ACCOUNT NO. 3080 VOLCANO CORPORATION Accts Rec. DEPT LA 22059 PASADENA, CA 911852059			ACCOUNTS PAYABLE				\$738.67
Subtotal ->							\$3,865,818.23

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 05137 WATSON, ERIC 469 E MAIN ST BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$20.00
ACCOUNT NO. 04686 WEAVER, DAVID 7725 E WASHBOARD RD SOLSBERRY, IN 47459			ACCOUNTS PAYABLE				\$5.32
ACCOUNT NO. 00136 WERFEN USA LLC Accts Rec. PO BOX 347934 PITTSBURGH, PA 152514934			ACCOUNTS PAYABLE				\$1,264.80
ACCOUNT NO. 00161 WEST COAST MEDICAL RESOURCES I Accts Rec. PO BOX 839 CLEARWATER, FL 33757			ACCOUNTS PAYABLE				\$4,650.00
ACCOUNT NO. 05199 WILLEY, SHARRIE P.O. BOX 654 CRANE, IN 47522			ACCOUNTS PAYABLE				\$21.25
ACCOUNT NO. 05147 WILLIAMS, CAROL 311 WILSON DR BLOOMFIELD, IN 47424			ACCOUNTS PAYABLE				\$15.00
Subtotal ->							\$5,976.37

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 04596 WISCONSIN PHYSICIANS SERVICES Accts Rec. PO BOX 8811 MARION, IL 62959			ACCOUNTS PAYABLE				\$55.21
ACCOUNT NO. 01213 WL GORE & ASSOCIATES INC Accts Rec. PO BOX 751331 CHARLOTTE, NC 28275			ACCOUNTS PAYABLE				\$8,451.93
ACCOUNT NO. 03110 WOLTERS KLUWER LAW & BUSINESS Accts Rec. 4829 INNOVATION WAY CHICAGO, IL 606820048			ACCOUNTS PAYABLE				\$536.07
ACCOUNT NO. 04708 WOODS ELECTRICAL CONTR. INC Accts Rec. 4180 N STARNES RD BLOOMINGTON, IN 47404			ACCOUNTS PAYABLE				\$1,361.29
ACCOUNT NO. 02668 WORKFLOW Mike Freed 875 WESTPOINT PARKWAY, SUITE 510 WESTLAKE, OH 44145			ACCOUNTS PAYABLE				\$8,286.03
ACCOUNT NO. 01609 YELLOW CAB CO INC Kelly McNeely 217 W 6TH ST BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$981.80
Subtotal ->							\$19,672.33

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In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER <i>(See instructions Above)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 00755 YOUNG ENVIRONMENTAL SOLUTIONS Accts Rec. 1500 W BLOOMFIELD RD BLOOMINGTON, IN 47403			ACCOUNTS PAYABLE				\$920.00
ACCOUNT NO. 01288 YP Accts Rec. PO BOX 5081 CAROL STREAM, IL 601975081			ACCOUNTS PAYABLE				\$14,138.43
ACCOUNT NO. 03833 ZENETRA CORPORATION 10214 CHESTNUT PLAZA DRIVE #201 FORT WAYNE, IN 46814			ACCOUNTS PAYABLE				\$1,100.00
ACCOUNT NO. 3085 Zimmer PO Box 708 Warswaa, IN 46581-0708			ACCOUNTS PAYABLE				\$2,743.00
ACCOUNT NO. 00193 ZIMMER KNEE CREATIONS Accts Rec. 14235 COLLECTIONS CENTER DR CHICAGO, IL 60673			ACCOUNTS PAYABLE				\$15,935.00
ACCOUNT NO. 00192 Zipline Medical, Inc. 747 Camden Ave. Suite A Campbell, CA 95008			ACCOUNTS PAYABLE				\$170.00
Subtotal ->							\$35,006.43
Total ->							\$14,213,322.57

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
AETNA Accts Rec. 1425 UNION MEETING ROAD MAIL STOP U23S BLUE BELL, PA 19422	Insurance Payer Contracts
ANTHEM BCBS IN INDIVIDUAL Accts Rec. PO BOX 105674 ATLANTA, GA 303485674	Insurance Payer Contracts
ATHENAHEALTH, INC Accts Rec. ATTN: FINANCE 311 ARSENAL ST WATERTOWN, MA 90660	Software Contract
Aslinia, Florence 2001 S Ramsey Dr. Bloomington, IN 47401	Physician Contract
BLOOMINGTON ANESTHESIOLOGISTS Dr. Chad Johnson P.O. BOX 2658 BLOOMINGTON, IN 47401	Medical Service Contract
CAREFUSION SOLUTIONS, LLC Accts Rec. PYXIS PRODUCTS 25082 NETWORK PLACE CHICAGO, IL 606731250 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assignment and rejection under 11 U.S. C. §365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Medical Equipment Lease Lessor
CINTAS DOCUMENT MANAGEMENT Accts Rec. INDIANAPOLIS (G89) STORAGE &IMAGING 2850 S LYNHURST DR INDIANAPOLIS, IN 46241	Service Contract
COOK MEDICAL INC Accts Rec. 22988 NETWORK PL CHICAGO, IL 606731229	Insurance Payer Contracts

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(Continuation Sheet)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WEATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
CPSI Accts Rec. PO BOX 850309 6600 WALL ST MOBILE, AL 366850309 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Software Contract
Don Hoerl 5655 Broadmoor Bluffs Dr. Colorado Springs, OH 80906	Medical Cost Report Contract
Douthitt, Cindy 6780 S SR 59 Sandborn, IN 47578	NP Contract
EUDALY INVESTMENTS, LLC Accts Rec. 351 LANDMARK AVE BLOOMINGTON, IN 47403	Monroe Provider Network - Landmark Office Lease Attn: Gary Eudaly 417 - 421 Landmark Avenue Bloomington IN 47403 Lessor Non-residential Real Property
Freeland, John 2587 E Clarkway Dr Bloomington, IN 47401	CRNA Contract
GABOR TOLNAY MD, PC Accts Rec. 319 PINETREE LN RICHMOND, IN 47374	Pathologists Contract
GE-Ricoh PO Box 740541 Atlanta, GA The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Copy Machine Lease Lessor
Greathouse, Elvia 3312 E Mulberry, Drive Bloomington, IN 47401	Physician Contract
Greene County Hospital 2127 State Highway 51 Linton, IN 47441	Linton Practice Lease Lessor Non-residential Real Property

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
 (Continuation Sheet)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WEATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Greene County Hospital 2127 State Highway 51 Linton, IN 47441	Staff Lease for Dr. Parmenter at Linton Office
HERALD TIMES (SUBSCRIPTION) Accts Rec. 1900 S WALNUT ST PO BOX 909 BLOOMINGTON, IN 474020909	Advertsing Contract
Heartland Payment Systems 90 Nassau St. Princeton, NJ 08540 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Equipment Lease
Hinkley Springs PO box 660579 Dallas , TX 75266-0579	Service Contract
Humana, Inc. PO Box 14601 Lexington, KY 40512	Insurance Payer Contracts
KALARI, RAMESH Dr. Kalari 2520 Q ST BEDFORD, IN 47421	On Call Contract
Koorsen 2719 N. Arlington Ave. Indianapolis, IN 46218	Service Contract
LAMAR ADVERTISING CO Adrian Adams PO BOX 96030 BATON ROUGE, LA 70896	Billboard Lease Lessor
LANDMARK SIGN COMPANY Laura Lewis 104 S FRANKLIN RD BLOOMINGTON, IN 47404	Landmark Sign Lease Lessor

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(Continuation Sheet)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WEATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
LASALLE SYSTEMS LEASING INC c/o MB FINANCIAL BANK NA-149 611 N. River Rd., 6th Floor Leasing ROSEMONT, IL 60018 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Equipment Lease
MEDICARE Accts Rec. PO BOX 6026 INDIANAPOLIS, IN 462066026	Medicare Provider Agreement
MINDRAY DS USA, INC Accts Rec. 24312 NETWORK PLACE CHICAGO, IL 606731243	Telemetry Contract Lessor
MONROE MEDICAL ARTS, LLC Brian Stancombe PO BOX 6354 BLOOMINGTON, IN 47407	Sleep Lab Lease Agreement Lessor Non-residential Real Property
MONROE MEDICAL ARTS, LLC Brian Stancombe PO BOX 6354 BLOOMINGTON, IN 47407	Monroe Provider Network - Schmalz Lessor
MPT of Bloomington, LLC 1000 Urban Center Drive, Suite 501 Attn: Michael G. Stewart Birmingham , AL 35242	MPT Lease Agreement Lessor Non-residential Real Property
Medicaid	Medicaid Provider Agreement
Metcalf, Gary 3400 S Sare Rd, Apt 918 Bloomington, IN 47401	Physician Contract
Monroe Medical Arts, LLC PO Box 6354 Bloomington, IN 47407	Administrative Office Lease Lessor Non-residential Real Property
Musa, Nuha 3312 Olcott Blvd Bloomington, IN 47401	Physician Contract
NORTHERN INDIANA EMERGENCY PHY Joely Pearn PO BOX 674579 DETROIT, MI 482674579	Emergency Physicians Contract Lessor

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
 (Continuation Sheet)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WEATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
NUANCE COMMUNICATIONS Accts Rec. PO BOX 2561 CAROL STREAM, IL 601322561	Service Contract Lessor
OLYMPUS AMERICA INC Accts Rec. PO BOX 200194 PITTSBURGH, PA 152510194	Equipment Purchase
ONKAR Properties 669 1 E Manor Dr. Terre Haute, IN 47802	Monroe Provider Network - Bloomfield Office Lessor Non-residential Real Property
PHARMASOURCE HEALTHCARE, INC Accts Rec. PO BOX 632849 CINCINNATI, OH 452632849	Pharmacy Management (Ended August 31, 2014) Lessor
Parmenter, Matthew 2030 Exeter Lane Bloomington, IN 47408	Physician Contract
Phillipp PACS PO Box 100355 Atlanta, GA 30384	Maintenance Agreement Lessor
Rusche, William 3316 Mulberry Drive Bloomington, IN 47401	Physician Contract
SARE ROAD LLC Accts Rec. 1815 S. WALNUT STREET BLOOMINGTON, IN 47401	Monroe Provider Network - Sare Road Sare Road LLC Lease Rubicon Leasing Agency 1815 S. Walnut St. Bloomington IN 47401 Lessor Non-residential Real Property
SECAP FINANCE Accts Rec. PO BOX 405371 ATLANTA, GA 303845371 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Postage Machine Lease Lessor

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(Continuation Sheet)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WEATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
SIEMENS HEALTHCARE DIAGNOSTICS Accts Rec. PO BOX 121102 DALLAS, TX 606895332 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Lab Equipment Lessor
SIHO PO Box 1787 Columbus , IN 47202	Insurance Payer Contracts
SIMPLEX GRINNELL Accts Rec. DEPT CH 10320 PALANTINE, IL 282890807	Nurse Call
SOUTHERN INDIANA RADIOLOGICAL Accts Rec. P.O. BOX 4366 BLOOMINGTON, IN 47402	X-Ray Reads Contract
STERICYCLE SPECIALTY WASTE SOL Accts Rec. 2850 100TH COURT NE BLAINE, MN 606733308	Service Contract
Schmalz, William 3547 Saddlebrook, Lane Bloomington, IN 47401	Physician Contract
Sharp, Thomas 2920 Ramble Rd W Bloomington, IN 47408	Physician Contract
Southern Indiana Surgery Center 2800 Rex Grossman Blvd. Bloomington, IN 47403	Storage Space Lease Lessor Non-residential Real Property
Spence, Willaim PO Box 5654 Bloomington, IN 47407	Physician Contract
Steinke, Karl 4601 S Cordova Pl. Bloomington, IN 47401	Physician Contract
Swango, Linda 10753 W 200 N Linton, IN 47441	NP Contract

In re Monroe Hospital, LLC
 Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
 (Continuation Sheet)

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WEATHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
TERMINIX Accts Rec. PO BOX 742592 CINCINNATI, OH 452742592	Service Contract
TRICARE NORTH REGION Accts Rec. PO BOX 870141 SURFSIDE BEACH, SC 295879741	Insurance Payer Contracts
UNITED HEALTHCARE Accts Rec. PO BOX 740800 ATLANTA, GA 30374	Insurance Payer Contracts
UNITED HOSPITAL SERVICES Accts Rec. DEPT 78756 PO BOX 78000 DETROIT, MI 482780756	Linen Contract Lessor
UNIVERSAL FINANCIAL SVCS LP William Mondl 210 S 5TH ST SUITE 105 SAINT CHARLES, IL 60174 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Medical Equipment Lease Lessor
UNIVERSAL HOSPITAL SERVICES Stuart Davidson SDS 12-0940 PO BOX 86 MINNEAPOLIS, MN 554860940 The Debtor has listed this agreement as if it is a "true lease" subject to assumption, assumption and assignment or rejection under 11 U.S. C. Â§365. However, the Debtor does not admit that any agreement listed herein is a "true lease" and the Debtor reserves all rights to allege that it has in actuality purchase the relevant property from the counterparty to this agreement subject to a disguised financing arrangement.	Equipment Lease
Van Kooten, Mary 721 S Ballantine Rd Bloomington, IN 47401-5021	Physician Contract
Veeder, Wendy 2133 E. Melville Circle Bloomington, IN 47401	PA Contract
Woodard, Theresa 5725 S. Beverly Dr. Bloomington, IN 47401	NP Contract

B 6H (Official Form 6H)(12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
 (If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, 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 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
R. Daniel Grossman and Maureen A. Grossman 2552 S. Smith Road, Bloomington, IN 47401	Universal Financial Services 210 S. 5th Street, Suite 105 St. Charles, IL 60174

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re Monroe Hospital, LLC
Debtor

Case No. 14-07417(JMC)
(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

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

I, Joseph Roche, the President and Chief Executive Officer of the LLC named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 102 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: 09/05/2014

Signature: /s/ Joseph Roche

President and Chief Executive Officer

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