## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ALABAMA **EASTERN DIVISION**

In re	ATTALLA H	EALTH (	CARE,	INC.	Case No.	
	a Corpor	ration			Chapter 1	11
				Debtor(s)	•	

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

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

Name of Creditor and Complete Mailing Address Including Zip Code  1 Self, Maples & Copeland, PC 1601 2nd Avenue East Oneonta AL 35121	Name, Telephone Number and Complete Mailing Address, Including Zip Code, of Employee, Agent, or Department of Creditor Familiar with Claim Who May Be Contacted Phone: Self, Maples & Copeland, PC 1601 2nd Avenue East Oneonta AL 35121	Nature of Claim (Trade Debt, Bank Loan, Government Contract, etc.)  Accounting Services		Amount of Claim (If Secured Also State Value of Security)  \$ 7,000.00
2 Rural Metro Ambulance P.O. Box 562449 Charllotte NC 28290	Phone: Rural Metro Ambulance P.O. Box 562449 Charllotte NC 28290	business obligatio	n	\$ 2,500.00
3 Ivans Suite 150 Tampa FL 33609	Phone: Ivans 5405 Cypress Center Drive Suite 150 Tampa FL 33609	business obligatio	n	\$ 500.00
4 Nextel P. O. Box 8077 London KY 40742	Phone: Nextel P. O. Box 8077 London KY 40742	Telephone service \$		\$ 200.00
5 Travelers Indemnity Co Suite 401 East Hartford CT 06128	Phone: Travelers Indemnity Co 77 Hartland Street Suite 401 East Hartford CT 06128	insurance premium \$ 150.		\$ 150.00

Debtor(s)

## LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Name of Creditor and Complete	Name, Telephone Number and	Nature of Claim	Indicate if Clain	Amount of Claim	
Mailing Address Including	Complete Mailing Address,	(Trade Debt,	is Contingent,	(If Secured Also	
Zip Code	Including Zip Code, of Employee,	Bank Loan, Unliquidated		State Value of	
	Agent, or Department of Creditor	Government	Disputed, or	Security)	
	Familiar with Claim	Contract, etc.)	Subject to		
	Who May Be Contacted		Setoff		
6	Phone:	Business Priv	ilege Tax	\$ 100.00	
State of Alabama	State of Alabama				
	Business Privilege Tax				
P.O. Box 327320	P.O. Box 327320				
Montgomery AL 36132-7320	Montgomery AL 36132-7320		İ		
7	Phone:	Overdraft		\$ 50.00	
Cadence Bank	Cadence Bank				
17 North 20th Street	17 North 20th Street			}	
Birmingham AL 35203	Birmingham AL 35203				
8	Phone:	Nursing Home	1	\$ 0.00	
Judy Alford, etc.	Judy Alford, etc.	Malpractice c	laim		
	c/o J. Robert Potter	_			
600 University Park Pl,	600 University Park Pl,				
Birmingham AL 35209-6774	Birmingham AL 35209-6774				

## DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION

I Ted Cook		President	of the	Corporation	named				
as debtor in this case, declare under penalty of perjury that I have read the foregoing List of Creditors Holding Twenty Largest Unsecured Claims and that they are true and correct to the best of my knowledge, information and belief.									
Date: 4/26/2013	Signature	/s/ Ted Cook							
	Name:	Ted Cook							
	Title:	President							