

Fill in this information to identify the case:

Debtor name Irene Stacy Community Mental Health Center
 United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA
 Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Nextier Bank P.O. Box 1233 Butler, PA 16003						\$117,008.25
Highmark Blue Shield PO Box 382146 Pittsburgh, PA 15250						\$101,334.41
Cerner Corporation 2800 Rockcreek Parkway Kansas City, MO 64117						\$30,522.66
W.K. Thomas & Associates 100 Independence Lane Butler, PA 16001						\$29,200.00
West Penn Power 800 Cabin Hill Drive Greensburg, PA 15606		Utilities				\$27,949.18
Maher Duessel - Pittsburgh 503 Martindale Street Suite 600 Pittsburgh, PA 15212						\$25,120.00
PeopleSystems P.O. Box 4816 Syracuse, NY 13221						\$24,340.00
Nextier Bank P.O. Box 1232 Butler, PA 16003		Visa Credit Card Operating Expenses				\$24,197.00

Debtor Irene Stacy Community Mental Health Center
Name

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Open Minds 163 York Street Gettysburg, PA 17325						\$18,734.18
Cardmember Service PO Box 790408 Saint Louis, MO 63179						\$18,629.01
Alliance for Non-Profit Resources 212-214 South Main Street Suite 1023 Butler, PA 16001						\$16,980.79
Vector Security PO Box 89462 Cleveland, OH 44101						\$16,921.40
UPMC Benefit Management 600 Grant Street, 12th Floor Attn: Amy Bollinger - UST 01 12 02 Pittsburgh, PA 15219						\$16,743.27
County of Butler P.O. Box 1208 Butler, PA 16003						\$12,115.00
Midnight Sun Computing, LLC 5136 Butler Street Pittsburgh, PA 15201						\$8,000.00
Walmart 200 Moraine Point Plaza Butler, PA 16001						\$7,560.55
Armstrong PO Box 37749 Philadelphia, PA 19101						\$7,406.85
Canon Financial Services, Inc. PO Box 5008 Mount Laurel, NJ 08054						\$5,165.46

Debtor Irene Stacy Community Mental Health Center
Name

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Consolidated Communications P.O. Box 747100 Pittsburgh, PA 15274						\$4,985.67
UPMC PO Box 223270 Pittsburgh, PA 15251						\$4,350.00