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UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF WASHINGTON

<p>In re:</p> <p>ASTRIA HEALTH, <i>et al.</i>,</p> <p>Debtors and Debtors in Possession.¹</p>	<p>Chapter 11 Lead Case No. 19-01189-11 Jointly Administered</p> <p>NOTICE OF CONTINUED DISCLOSURE STATEMENT HEARING</p> <p><u>CONTINUED HEARING:</u> Date/Time: September 24, 2020/11:00 am (PT) Location: Telephonic Telephone Conference: (877) 402-9757 Access Code: 7036041</p>
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¹ The Debtors, along with their case numbers, are as follows: Astria Health (19-01189-11), Glacier Canyon, LLC (19-01193-11), Kitchen and Bath Furnishings, LLC (19-01194-11), Oxbow Summit, LLC (19-01195-11), SHC Holdco, LLC (19-01196-11), SHC Medical Center - Toppenish (19-01190-11), SHC Medical Center - Yakima (19-01192-11), Sunnyside Community Hospital Association (19-01191-11), Sunnyside Community Hospital Home Medical Supply, LLC (19-01197-11), Sunnyside Home Health (19-01198-11), Sunnyside Professional Services, LLC (19-01199-11), Yakima Home Care Holdings, LLC (19-01201-11), and Yakima HMA Home Health, LLC (19-01200-11).



1 **PLEASE TAKE NOTICE** that the hearing on the *Joint Motion for an Order*
2 *Approving: (I) Proposed Disclosure Statement; (II) Solicitation and Voting*
3 *Procedures; (III) Notice and Objection Procedures for Confirmation of Joint Plan of*
4 *Reorganization; and (IV) Granting Related Relief* [Docket No. 1473], the *Joint*
5 *Chapter 11 Plan of Reorganization of Astria Health and Its Debtor Affiliates* [Docket
6 No. 1471] and related disclosure statement [Docket No. 1472], has been continued
7 from September 2, 2020, at 10:00 a.m. to **September 24, 2020, at 11:00 a.m.**, before
8 the Honorable Whitman L. Holt, United States Bankruptcy Judge. **The hearing will**
9 **take place by telephone at (877) 402-9757; Access Code 7036041.**

10 Dated: September 1, 2020

DENTONS US LLP

11 By: /s/ Samuel R. Maizel

12 Samuel R. Maizel
13 Sam J. Alberts
14 Geoffrey M. Miller

Counsel to the *Debtors and Debtors In*
Possession

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21 **NOTICE OF CONTINUED
DISCLOSURE STATEMENT
HEARING**

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