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Proposed Attorneys for the Chapter 11 Debtors and Debtors In Possession

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF WASHINGTON**

<p>In re:</p> <p>ASTRIA HEALTH, et al.,</p> <p>Debtors and Debtors in Possession.¹</p>	<p>Chapter 11 Lead Case No. 19-01189-11 Jointly Administered</p> <p>GENERAL GLOBAL NOTES AND STATEMENT OF LIMITATIONS, METHODOLOGY AND DISCLAIMERS REGARDING THE DEBTORS' SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS</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).

GLOBAL NOTES

112627699V-6



I.

**GENERAL GLOBAL NOTES AND STATEMENT OF LIMITATIONS,
METHODOLOGY AND DISCLAIMERS REGARDING THE DEBTORS'
SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF
FINANCIAL AFFAIRS**

On May 6, 2019 (the "Petition Date"), Astria Health, a Washington nonprofit public benefit corporation ("Astria"), and the above-referenced affiliated debtors and debtors in possession (the "Debtors") in these chapter 11 cases (the "Chapter 11 Cases"), filed a voluntary petition under chapter 11 of title 11 of the United States Code (the "Bankruptcy Code").² The Debtors continue to operate their businesses and manage their properties as debtors and debtors in possession, pursuant to §§ 1107(a) and 1108. The Chapter 11 Cases are being jointly administered under lead case number 19-01189-11 in the United States Bankruptcy Court for the Eastern District of Washington (the "Bankruptcy Court").

The Schedules of Assets and Liabilities (the "Schedules") and the Statements of Financial Affairs (the "SOFAs") filed by the Debtors in the Bankruptcy Court were prepared pursuant to § 521 and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules") by the Debtors' management, with the assistance of their advisors and professionals, with unaudited information available as of the Petition Date. The Schedules and SOFAs do not purport to represent

² All references to "sections" or "§" herein are to sections of the United States Bankruptcy Code, 11 U.S.C. §§ 101-1532.

1 financial statements prepared in accordance with generally accepted accounting
2 principles in the United States (“GAAP”), and they are not intended to be fully
3 reconciled to the Debtors’ financial statements.

4 The Schedules and SOFAs have been signed by an authorized representative
5 of each of the Debtors. In reviewing and signing the Schedules and SOFAs, these
6 representatives relied upon the efforts, statements and representations of the
7 Debtors’ personnel and their advisors and professionals. These authorized
8 representatives have not (and could not have) personally verified the accuracy of
9 each such statement and representation, including, for example, statements and
10 representations concerning amounts owed to creditors and their addresses.

11 These General Global Notes and Statement of Limitations, Methodology and
12 Disclaimer Regarding Debtors’ Schedules of Assets and Liabilities and Statement of
13 Financial Affairs (the “General Notes”) are incorporated by reference in, and
14 comprise an integral part of, each of the Debtors’ Schedules and SOFAs, and should
15 be referred to and reviewed in connection with any review of the Schedules and
16 SOFAs.

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II.

GENERAL NOTES

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3 1. **Reservation of Rights.** The Debtors’ Chapter 11 Cases are large and
4 complex. Although management of the Debtors, with the assistance of their
5 advisors and professionals, have made every reasonable effort to ensure that the
6 Schedules and SOFAs are as accurate and complete as possible, based on the
7 information that was available to them at the time of preparation, subsequent
8 information or discovery may result in material changes to these Schedules and
9 SOFAs, and inadvertent errors or omissions may have occurred. Because the
10 Schedules and SOFAs contain unaudited information, which is subject to further
11 review, verification, and potential adjustment, these Schedules and SOFAs may be
12 inaccurate and/or incomplete.

13 2. **No Waiver.** Nothing contained in the Schedules and SOFAs or these
14 General Notes shall constitute an admission or a waiver of any of the Debtors’ rights
15 to assert any claims or defenses. For the avoidance of doubt, listing a claim on
16 Schedule D as “secured,” on Schedule E/F as “priority,” on Schedule E/F as
17 “unsecured nonpriority,” or listing a contract or lease on Schedule G as “executory”
18 or “unexpired,” does not constitute an admission by the Debtors of the legal rights
19 of the claimant, or a waiver of the Debtors’ right to recharacterize or reclassify such
20 claim or contract. Any failure to designate a claim on the Debtors’ Schedules and
21 SOFAs as “disputed,” “contingent,” or “unliquidated” does not constitute an

1 admission by the Debtors that such amount is not “disputed,” “contingent” or
2 “unliquidated.” The Debtors reserve all of their rights to dispute, or to assert offsets
3 or defenses to, any claim reflected on the Schedules and SOFAs as to amount,
4 liability, priority, secured or unsecured status, classification or any other grounds or
5 to otherwise subsequently designate any claim as “contingent,” “unliquidated” or
6 “disputed.” The Debtors reserve all of their rights to amend their Schedules and
7 SOFAs as necessary and appropriate, including, but not limited to, with respect to
8 claim description and designation.

9 **3. Reporting Date.** The asset information provided herein, except as
10 otherwise noted, represents the asset data of the Debtor as of April 30, 2019 and the
11 liability information provided herein, except as otherwise noted, represents the
12 liability data of the Debtor as of April 30, 2019.

13 **4. Confidentiality.** Specific disclosure of certain claims, names, addresses
14 or amounts may be subject to certain disclosure restrictions contained in the Health
15 Insurance Portability and Accountability Act of 1996 (“HIPAA”), or otherwise, and
16 in any event, are of a particularly personal and private nature. To the extent the
17 Debtors believe a claim, name, address or amount falls under the purview of HIPAA
18 or includes information that is personal or private in nature, such claims, name,
19 address or amount (as applicable) are not included in these Schedules and SOFAs.

20 **5. Estimates and Assumptions.** The preparation of the Schedules and
21 SOFAs required the Debtors to make estimates and assumptions that affected the

1 reported amounts of assets and liabilities, the disclosure of contingent assets and
2 liabilities and the reported amounts of revenue and expense. Actual results could
3 differ materially from these estimates.

4 **6. Asset Presentation and Valuation.** The Debtors do not have current
5 market valuations for all of their assets. It would be prohibitively expensive, unduly
6 burdensome and an inefficient use of estate resources for the Debtors to obtain
7 current market valuations for all of their assets. Wherever possible, unless
8 otherwise indicated, book values are as of the April 30, 2019, inclusive of any
9 applicable depreciation. When necessary, the Debtors have indicated that the value
10 of certain assets is “Unknown” or “Undetermined.” Amounts ultimately realized
11 may vary from whatever value was ascribed and such variance may be material.
12 Accordingly, the Debtors reserve all of their rights to amend, supplement, or adjust
13 the value of each asset set forth herein. Also, goods received by the Debtors within
14 20 days of the Petition Date are subject to use and depletion and may not have been
15 on hand on the Petition Date.

16 **7. Liabilities.** Certain of the liabilities are scheduled unknown, contingent
17 and/or unliquidated at this time. Accordingly, the Schedules and the SOFAs do not
18 accurately reflect the aggregate amount of the Debtors’ total liabilities.

19 **8. Accounts Payable and Disbursements System.** The financial affairs
20 and business of the Debtors are complex. The Debtors use a centralized cash
21 management system to collect and transfer funds from numerous sources and

1 accounts and disburse funds to satisfy obligations arising from the daily operation of
2 their business as well as invest funds pursuant to the Debtors' investment guidelines,
3 making payments on behalf of each other and their nondebtor subsidiaries and
4 affiliates through cash accounts in the cash management system. Generally these
5 payments will result in an intercompany balance on the Debtors' books and records.

6 **9. Intercompany Transactions.** Prior to the Petition Date (and
7 subsequent to the Petition Date pursuant to Bankruptcy Court approval), the Debtors
8 routinely engaged (and continue to engage) in intercompany transactions with both
9 Debtors and nondebtor subsidiaries and affiliates. These intercompany transactions
10 are not included in the respective Debtor entities' Schedules and SOFAs. The
11 Debtors each reserve all rights with respect to claims against and debts owed to
12 other Debtors.

13 **10. Recharacterization.** The Debtors have made reasonable efforts to
14 characterize, classify, categorize or designate the claims, assets, executory contracts,
15 unexpired leases and other items reported in the Schedules and SOFAs correctly.
16 Due to the complexity and size of the Debtors' businesses, however, the Debtors
17 may have improperly characterized, classified, categorized or designated certain
18 items. Further, the designation of a category is not meant to be wholly inclusive or
19 descriptive of the rights or obligations represented by such item.

20 **11. Undetermined or Unknown Amounts.** The description of an amount
21 as "Undetermined" or "Unknown" is not intended to reflect upon the materiality of

1 such amount. Certain amounts may be clarified over the period of the bankruptcy
2 proceedings and certain amounts may depend on contractual obligations to be
3 assumed or rejected as part of a sale in a bankruptcy proceeding under § 363.

4 **12. Bankruptcy Court First-Day Orders.** The Bankruptcy Court has
5 entered certain orders (the “Orders”) authorizing the Debtors to pay various
6 outstanding prepetition claims, including, but not limited to, payments relating to
7 employee compensation and benefits. In general, claims paid pursuant to the Orders
8 are not reflected in the Schedules and SOFAs.

9 **13. Contingent Assets and Causes of Action.** Despite their reasonable
10 efforts to identify all known assets, the Debtors may not have listed all of their
11 causes of action or potential causes of action against third parties as assets in their
12 Schedules and SOFAs, including, but not limited to, avoidance actions arising under
13 chapter 5 of the Bankruptcy Code and actions under other relevant non-bankruptcy
14 laws to recover assets. The Debtors reserve all of their rights with respect to any
15 claims, causes of action, or avoidance actions they may have, and neither these
16 General Notes nor the Schedules and SOFAs shall be deemed a waiver of any such
17 claims, causes of actions, or avoidance actions or in any way prejudice or impair the
18 assertion of such claims. The value of any claim against a collection party is an
19 estimate and held by all operating Debtors.

20 The Debtors may also possess contingent and unliquidated claims against
21 affiliated entities (both Debtor and nondebtor) for various financial accommodations

1 and similar benefits they have extended from time to time, including, but not limited
2 to, contingent and unliquidated claims for contribution, reimbursement, and/or
3 indemnification arising from various contractual agreements. Additionally, prior to
4 the relevant Petition Date, each Debtor, as plaintiff, may have commenced various
5 lawsuits in the ordinary course of its business against third parties seeking monetary
6 damages for business-related losses and/or other forms of relief. Refer to each
7 SOFA Question #7, for lawsuits commenced prior to the relevant Petition Date in
8 which the Debtor was a plaintiff.

9 **14. Certain Funds Not Property of the Debtors' Estates.** The Debtors
10 received certain donations, testamentary or otherwise, which were provided subject
11 to restrictions (contractual or otherwise) on the use of such funds. These funds may
12 not be property of the Debtors' estates, and, as a consequence, the Debtors have not
13 listed any of the donors or grantors that may have an interest in these funds as
14 creditors of their estates in the Schedules and SOFAs.

15 **15. Unknown Addresses.** The Debtors have made and continue to make
16 their best efforts to collect all addresses for all parties in interest; not all addresses
17 for parties on these Schedules and SOFAs have been obtained. The Debtors
18 continue to pursue complete notice information and will provide updated
19 information as reasonable practicable.

20 **16. General Conventions Relating to the Schedules.** The Debtors adopted
21 the following conventions in connection with the preparation of the Schedules:

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- a. Schedule A/B. The Debtors’ assets on Schedule A/B are listed at book value based on the Debtors’ reasonable best efforts as of April 30, 2019, and may not necessarily reflect the market or recoverable value of these assets as of the Petition Date. As such, the balances presented in Schedule A/B are subject to further revision and change.

- b. Schedule D. The descriptions provided on Schedule D are intended only as a summary. Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent, and priority of any liens. Nothing in these Global Notes or in the Schedules and SOFAs shall be deemed a modification or interpretation of the terms of such agreements or related documents. To the extent the value of the collateral securing a claim listed on Schedule D is insufficient to satisfy the full amount such claim, the holder of such undersecured claim will have an unsecured deficiency claim against the Debtors for the remaining amount. Such unsecured deficiency claims are not listed on Schedule E/F.

The general capital structure of the Debtors as of the Petition Date is as follows:

Sunnyside Community Hospital Association (“Sunnyside”) was indebted to Banner Bank in the approximate principal amount of \$10.6 million and provided Banner Bank a first priority lien (the “Banner Bank Liens”) on all personal property and certain real property of Sunnyside (the “Banner Bank Collateral”).

MidCap Financial Trust was owed \$10.7 million and had a first priority lien (the “MidCap Liens”) on accounts receivable of SHC Medical Center - Toppenish (“Toppenish”) and SHC Medical Center - Yakima (“Yakima”) as well as certain other assets of SHC Holdco, LLC, Yakima, Toppenish, Yakima Home Care Holdings, LLC, and Yakima HMA Home Health, LLC (the “MidCap Collateral”).

Lapis Advisers, LP was owed \$10 million in principal and \$300,000 in interest and held a lien on all assets of the Debtors (the “Lapis Liens”).

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UMB Bank, N.A. was owed \$35,400,000 in principal and \$885,000 in interest and held a lien on all assets of the Debtors (the “UMB Liens”).

The Lapis Liens and the UMB Liens were subject to and subordinate only to the Banner Bank Liens on the Banner Bank Collateral, the MidCap Liens on the MidCap Collateral and valid and perfected purchase money security interests of record.

c. Schedule E/F. The Debtors have made reasonable efforts to report all priority and general unsecured claims against the Debtors on Schedule E/F based on the Debtors’ books and records as of the Petition Date. The claims listed on Schedule E/F arose or were incurred on various dates. In certain instances, the date on which a claim arose may be unknown or subject to dispute. Although reasonable efforts have been made to determine the date upon which claims listed on Schedule E/F were incurred or arose, fixing that date for each claim on Schedule E/F would be unduly burdensome and cost prohibitive and, therefore, the Debtors have not listed a date for each claim listed on Schedule E/F.

Certain tax claims are, or may in the future be, subject to audit, and the Debtors are unable to determine with certainty the amount of certain tax claims listed on Schedule E/F. Therefore, the Debtors have listed such claims as “Unliquidated” in amount, pending final resolution of any ongoing or future audits or outstanding issues. In addition, there may be other contingent, unliquidated claims from state and local taxing authorities, not all of which are listed.

The listing of any priority claim on Schedule E/F does not constitute an admission by the Debtors that such claim is entitled to priority treatment under § 507. The Debtors reserve the right to take the position that any claim listed on Schedule E/F is not entitled to priority.

Schedule E/F also contains the information available to the Debtors as of the Petition Date regarding pending litigation involving the Debtors. The inclusion of any legal action in the Schedules and SOFAs does not constitute an admission by the

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Debtors of any liability, the validity of any litigation, the amount of any potential claim that may result with respect to any legal action, or the amount and treatment of any potential claim resulting from any legal action currently pending or that may arise in the future.

Schedule E/F does not include certain deferred liabilities, accruals, or general reserves. Such amounts are general estimates and do not represent specific claims as of the Petition Date for each respective Debtor.

In the ordinary course of business, the Debtors generally receive invoices for goods and services after the delivery of such goods or services. As of the filing of the Schedules and SOFA, the Debtors have not received all invoices for payables, expenses, or liabilities that may have accrued before the Petition Date. Accordingly, the information contained in Schedules E/F may be incomplete. The Debtors reserve the right, but are not required, to amend Schedule E/F if and as it receives such invoices. The claims of individual creditors are generally listed at the amounts recorded on the Debtors' books and records and may not reflect credits or allowances due from the creditor. The Debtors reserve all of their rights concerning credits or allowances.

d. Schedule G. While reasonable efforts have been made to ensure the accuracy of the Schedule of Executory Contracts and Unexpired Leases, inadvertent errors or omissions may have occurred. The Debtors hereby reserve all of their rights to dispute the validity, status or enforceability of any contract, agreement or lease set forth on Schedule G and to amend or supplement such Schedule as necessary. The contracts, agreements and leases listed on Schedule G may have expired or may have been modified, amended or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letter and other documents, instruments and agreements which may not be listed therein. Certain of the executory agreements may not have been memorialized and could be subject to dispute. The Debtors reserve all of their rights, claims and causes of action with respect to the contracts and agreements listed on these Schedules and SOFAs, including

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the right to dispute or challenge the characterization or the structure of any transaction, document or instrument.

- e. Schedule H. Codefendants in litigation matters involving the Debtors are not listed in Schedule H.

17. General Conventions Relating to the SOFAs. The Debtors adopted

the following conventions in connection with the preparation of the SOFAs:

- a. SOFA Question 2. Interest income includes interest earned on loans, investment securities, escrow balances, and other interest-earning assets.
- b. SOFA Question 4. Certain insiders of the Debtors are employed and paid by nondebtor AHM, Inc. (“AHM”) but provide management services to the Debtors. Transfers from AHM to these insiders are not listed in SOFA Question 4.
- c. SOFA Question 5. The Debtors are unaware of any repossessions, foreclosures or returns other than returns of damaged or defective goods to vendors in the ordinary course of business.
- d. SOFA Question 11. All payments related to bankruptcy were made by Astria on behalf of itself and its Debtor affiliates and are reflected in Astria’s response.
- e. SOFA Question 19d. The Debtors provide various financial statements in the ordinary course of their business to parties for business, statutory, credit financing and other reasons. Past recipients of financial statements include regulatory agencies, financial institutions, vendors and other parties, as requested. In the ordinary course of their businesses, the Debtors have not maintained records of the entities the Debtors have provided with financial statements.

III.

CONCLUSION

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3 **18. Limitation of Liability.** The Debtors and their officers, employees,
4 agents, attorneys, and financial advisors do not guarantee or warrant the accuracy or
5 completeness of the data that is provided herein and shall not be liable for any loss
6 or injury arising out of or caused, in whole or in part, by the acts, errors, or
7 omissions, whether negligent or otherwise, in procuring, compiling, collecting,
8 interpreting, reporting, communicating, or delivering the information contained
9 herein. The Debtors and their officers, employees, agents, attorneys, and financial
10 advisors expressly do not undertake any obligation to update, modify, revise, or re-
11 categorize the information provided herein or to notify any third party should the
12 information be updated, modified, revised or recategorized. In no event shall the
13 Debtors or their officers, employees, agents, attorneys, and financial advisors be
14 liable to any third party for any direct, indirect, incidental, consequential, or special
15 damages (including, but not limited to, damages arising from the disallowance of a
16 potential claim against the Debtors or damages to business reputation, lost business,
17 or lost profits), whether foreseeable or not and however caused.

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Dated: June 19, 2019

/s/ Sam J. Alberts
SAMUEL R. MAIZEL (Admitted *Pro Hac Vice*)
SAM J. ALBERTS (WSBA #22255)
DENTONS US LLP

JAMES L. DAY (WSBA #20474)
BUSH KORNFELD LLP

*Proposed Attorneys for the Chapter 11 Debtors
and Debtors In Possession*

Fill in this information to identify the case:

Debtor name Sunnyside Community Hospital Association
United States Bankruptcy Court for the: Eastern District of WA
(State)
Case number (if known): 19-01191-11

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from Schedule A/B.....

\$8,400,343.00

1b. Total personal property:

Copy line 91A from Schedule A/B.....

\$94,084,221.00

1c. Total of all property:

Copy line 92 from Schedule A/B.....

\$102,484,564.00

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$57,185,000.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$0.00

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ \$ 17,033,355.42

4. Total liabilities.....

Lines 2 + 3a + 3b

\$74,218,355.42

Fill in this information to identify the case:

Debtor name Sunnyside Community Hospital Association
 United States Bankruptcy Court for the: Eastern District of Washingt
(State)
 Case number (if known): 19-01191-11

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets " Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>See attached file</u>			\$ <u>2,256,239.00</u>
3.2. _____			\$ _____

4. Other cash equivalents (Identify all)

4.1. <u>Certificate of deposit (2) at Lower Valley Credit Union (#5001 & 5002)</u>	\$ <u>786,390.00</u>
4.2. _____	\$ _____

5. Total of Part 1

\$ 3,042,629.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. <u>Benton REA, utility deposit for Prosser clinic in Prosser Washington</u>	\$ <u>500.00</u>
7.2. <u>White Hallow rent deposit for Plastics clinic in Yakima, Washington</u>	\$ <u>5,570.00</u>

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Prepaid insurance (107,752) Prepaid expense - annual amt then amortized (554,488)	\$	663,769.00
8.2. _____	\$	_____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 669,839.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
- Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less:	<u>33,191,108</u>	-	<u>22,204,273</u>	= →	\$ <u>10,986,835.00</u>
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	<u>53,200,469</u>	-	<u>35,590,188</u>	= →	\$ <u>17,610,281.00</u>
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 28,597,116.00

Part 4: Investments

13. Does the debtor own any investments?

- No. Go to Part 5.
- Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____	_____ %	_____	\$ _____
15.2. _____	_____ %	_____	\$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- No. Go to Part 6.
- Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials	_____ MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress	_____ MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale	_____ MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
Medical supplies	12/28/2018 MM / DD / YYYY	\$ 1,966,003.00	FIFO	\$ 1,966,003.00
23. Total of Part 5		✓		\$ 1,966,003.00

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- No
- Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- No
- Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- No
- Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.
- Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6	\$ _____	_____	\$ _____

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ 0.00

34. Is the debtor a member of an agricultural cooperative?

- No
- Yes. Is any of the debtor's property stored at the cooperative?
 - No
 - Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- No
- Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- No
- Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- No
- Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.
- Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	\$ _____	_____	\$ _____
40. Office fixtures	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software lease copiers	\$ 0.00	_____	\$ 0.00
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ 0.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- No
- Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- No
- Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- No. Go to Part 9.
 Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
<u>hospital equipment</u>	<u>\$ 406,509.00</u>	_____	<u>\$ 4,065,809.00</u>
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 4,065,809.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- No. Go to Part 10.
- Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 1016 Tacoma Avenue	Hospital	\$ 7,154,875.00	straight line depr	\$ 7,154,875.00
55.2 222 E. 2nd St. Grandview	Clinic	\$ 130,298.00	straight line depr	\$ 130,298.00
55.3 305 S 12th Ave Yakima	Clinic	\$ 492,731.00	straight line depr	\$ 491,731.00
55.4 1109 E Edison Ave, Sunnyside	House	\$ 89,942.00	straight line depr	\$ 89,942.00
55.5 1780 Alexander Rd Sunnyside	Land	\$ 108,055.00	straight line depr	\$ 108,055.00
55.6 1319 s 111th St Sunnyside	land	\$ 425,442.00	straight line depr	\$ 425,442.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 8,400,343.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- No
- Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- No
- Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- No. Go to Part 11.
- Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ 1,000.00	_____	\$ 1,000.00
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ 1,000.00

- 67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?
 No
 Yes
- 68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?
 No
 Yes
- 69. Has any of the property listed in Part 10 been appraised by a professional within the last year?
 No
 Yes

Part 11: All other assets

- 70. Does the debtor own any other assets that have not yet been reported on this form?
 Include all interests in executory contracts and unexpired leases not previously reported on this form.
 No. Go to Part 12.
 Yes. Fill in the information below.

Current value of debtor's interest

71. **Notes receivable**
 Description (include name of obligor) _____
 _____ Total face amount - _____ doubtful or uncollectible amount = → \$ _____

72. **Tax refunds and unused net operating losses (NOLs)**
 Description (for example, federal, state, local) _____
 _____ Tax year _____ \$ _____
 _____ Tax year _____ \$ _____
 _____ Tax year _____ \$ _____

73. **Interests in insurance policies or annuities**
 _____ \$ _____

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
 _____ \$ _____
 Nature of claim _____
 Amount requested \$ _____

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
 _____ \$ _____
 Nature of claim _____
 Amount requested \$ _____

76. **Trusts, equitable or future interests in property**
 _____ \$ _____

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership
Land, CIP, Other recivables (cost reports) \$ 55,741,825.00
 _____ \$ _____

78. **Total of Part 11.**
 Add lines 71 through 77. Copy the total to line 90. \$ 55,741,825.00

- 79. Has any of the property listed in Part 11 been appraised by a professional within the last year?
 No
 Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ <u>3,042,629.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ <u>669,839.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ <u>28,597,116.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ <u>0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ <u>1,966,003.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ <u>0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ <u>0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ <u>4,065,809.00</u>	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ <u>8,400,343.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ <u>1,000.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ <u>55,741,825.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ <u>94,084,221.00</u>	+ 91b. \$ <u>8,400,343.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ <u>102,484,564.00</u>

Sunnyside Community Hospital Association
 Form 206 A/B, part 9 real Property
 Case # 19-01191-11

Own

street address	type of property	net book value
1016 Tacoma Ave	Hospital Building	7,154,875.00
222 E. 2nd Street , Grandview, WA	Clinic	130,298
303 S. 12th Ave, Yakima, WA 98902	Clinic	491,731
1109 E. Edison Ave, Sunnyside, WA	House	89,942
1780 Alexander Rd, Sunnyside	land	108,055
2780 Alexander Rd, Sunnyside	land	included in above
1319 S. 11th St, Sunnyside, WA	land	425,442
700 S. 11th St, Sunnyside WA	land	included in above
518 S. 11th St, Sunnyside WA	land	included in above
522 S. 11th St, Sunnyside, WA	land	included in above
522 S. 11th St, Sunnyside, WA	land	included in above
576 S. 11th St, Sunnyside, WA	land	included in above
526 S. 11th St, Sunnyside, WA	land	included in above
530 S. 11th St, Sunnyside, WA	land	included in above
1 s 11th st, Sunnyside, WA	land	included in above
1001 e edison ave, Sunnyside	land	included in above
1009 e edison ave, Sunnyside	land	included in above
1005 E. Edison Ave, Sunnyside, WA	land	included in above
1314 S. 9th St, Sunnyside WA	land	included in above
1318 s. 9th St, Sunnyside WA	land	included in above
Unassigned address, Yakima WA	land	included in above
		8,400,343.00

Lease

Lessor	street address	type of property
Addleman Property Management LLC	2925 Allen Rd, Sunnyside, WA 98944	clinic bldg
Chardonnay Plaza, LLC	355 Chardonnay Ave, Prosser, WA 99350	clinic bldg
Grandview MOB, LLC	208 N. Euclid St, Grandview	clinic bldg
Hawkins Edwards, Inc	2705 E Lincoln Ave, Suite B/C, Sunnyside, WA 98944	clinic bldg
John Booth	6301 Thompson Drive A, Sunnyside, W a	duplex
John Booth	6309 Thompson Drive F, Sunnyside, WA 98944	duplex
The Heights on Grandview, LLC	220 W. Grandview Ave, Sunnyside, WA (units A31, B21, C21, D23)	apartments
MBM Land, LLC	6101 Summitview Ave, Suite200 Yakima WA	clinic bldg
Peter J. Swofford Testamentary Trust	1000 E. Edison, Sunnyside, WA	HR bldg
Specialty Center MOB LLC	500 S. 11th St, Sunnyside, WA 98944	clinic bldg
Wide Hollow Development	3907 Creekside Loop, Suite 130, Yakima, WA	clinic bldg

Fill in this information to identify the case:

Debtor name Sunnyside Community Hospital Association
 United States Bankruptcy Court for the: Eastern District of Washington
 (State)
 Case number (if known): 19-01191-11

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

	<i>Column A</i> Amount of claim <small>Do not deduct the value of collateral.</small>	<i>Column B</i> Value of collateral that supports this claim
<p>2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.</p>		
<p>2.1 Creditor's name <u>Banner Bank</u></p> <p>Creditor's mailing address <u>5920 W. Clearwater Avenue</u> <u>Kennewick, WA 99336</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred <u>6/8/16</u></p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. <u>See Global Notes.</u></p>	<p>Describe debtor's property that is subject to a lien <u>All personal property and certain real property</u></p> <p>Describe the lien <u>UCC 2006-159-6819-5</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p style="text-align: right;">\$ <u>10,600,000.00</u></p> <p style="text-align: right;">\$ <u>84,000,000.00</u></p>
<p>2.2 Creditor's name <u>All Points Capital Corp.</u></p> <p>Creditor's mailing address <u>275 Broad Hollow Road</u> <u>Melville, NY 11747</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred <u>10/29/04</u></p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <u>See Global Notes.</u></p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien <u>Master Lease - Equipment</u></p> <p>Describe the lien <u>UCC 2004-303-5049-6</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p style="text-align: right;">\$ <u>57,185,000.00</u></p>
<p>3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.</p>		<p>\$ <u>57,185,000.00</u></p>

Part 1:

Additional Page

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.3 Creditor's name McCommon Leasing Company Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address 12715 Bel-Red Road #201
Bellevue, WA 98005

Creditor's email address, if known _____

Date debt was incurred 6/1/09 Is the creditor an insider or related party?
 No
 Yes

Last 4 digits of account number _____ Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

Describe the lien UCC 2009-152-1099-4

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.4 Creditor's name General Electric Capital Corp. Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address PO Box 414, W-90
Milwaukee, WI 53201

Creditor's email address, if known _____

Date debt was incurred 10/19/09 Is the creditor an insider or related party?
 No
 Yes

Last 4 digits of account number _____ Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

Describe the lien UCC 2009-292-4689-7

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Part 1: Additional Page

Column A
Amount of claim

Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.5 Creditor's name

Siemens Financial Services, Inc.

Describe debtor's property that is subject to a lien

Equipment

\$ _____ \$ _____

Creditor's mailing address

170 Wood Avenue South
Iselin, NJ 08830

Describe the lien

UCC 2010-244-3165-2

Creditor's email address, if known

Is the creditor an insider or related party?

- No
- Yes

Date debt was incurred 9/1/10

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

- No
- Yes. Have you already specified the relative priority?

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

- No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

- Yes. The relative priority of creditors is specified on lines _____

2.6 Creditor's name

McCommon Leasing Company

Describe debtor's property that is subject to a lien

Equipment

\$ _____ \$ _____

Creditor's mailing address

12715 Bel-Red Road #201
Bellevue, WA 98005

Describe the lien

UCC 2011-052-4961-9

Creditor's email address, if known

Is the creditor an insider or related party?

- No
- Yes

Date debt was incurred 2/21/11

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

- No
- Yes. Have you already specified the relative priority?

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

- No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral.

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.7 Creditor's name GE HFS, LLC Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address PO Box 414, W-490
Milwaukee, WI 53201

Creditor's email address, if known _____

Date debt was incurred 11/20/12 Describe the lien UCC 2012-325-8357

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority. See Global Notes.
 Yes. The relative priority of creditors is specified on lines _____

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
 Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.8 Creditor's name GreatAmerica Financial Services C Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address 625 First Street
Cedar Rapids, IA 524012030

Creditor's email address, if known _____

Date debt was incurred 4/11/14 Describe the lien UCC 2014-101-7049-3

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority. See Global Notes.
 Yes. The relative priority of creditors is specified on lines _____

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:
 Check all that apply.
 Contingent
 Unliquidated
 Disputed

Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral.

Column B
**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.9 Creditor's name GreatAmerica Financial Services C Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address _____
625 First Street
Cedar Rapids, IA 524012030

Creditor's email address, if known _____

Date debt was incurred 7/21/14 Describe the lien UCC 2014-202-0485-0

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority. See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
 Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.10 Creditor's name U.S. Bank, N.A. Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address _____
77 East Wisconsin Avenue
Milwaukee, WI 53202

Creditor's email address, if known _____

Date debt was incurred 5/12/15 Describe the lien UCC 2015-132-1786-6

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority. See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
 Check all that apply.
 Contingent
 Unliquidated
 Disputed

Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral.
Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.11 Creditor's name Hologic Inc. **Describe debtor's property that is subject to a lien** Equipment \$ _____ \$ _____

Creditor's mailing address
36 Apple Ridge Road
Danbury, WA 06810

Creditor's email address, if known

Date debt was incurred 9/18/15 **Describe the lien** UCC 2015-261-2634-6

Last 4 digits of account number _____ **Is the creditor an insider or related party?**
 No
 Yes

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.12 Creditor's name Orth-Clinical Diagnostics, Inc. **Describe debtor's property that is subject to a lien** Equipment \$ _____ \$ _____

Creditor's mailing address
1001 U.S. Highway 202
Raritan, NJ 08869

Creditor's email address, if known

Date debt was incurred 9/24/15 **Describe the lien** UCC 2015-267-3811-2

Last 4 digits of account number _____ **Is the creditor an insider or related party?**
 No
 Yes

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Part 1:

Additional Page

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.15 Creditor's name First Midwest Bank Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address One Pierce Place, Suite 1500
Itasca, IL 60143

Creditor's email address, if known _____

Date debt was incurred 11/1/16 Describe the lien UCC 2016-306-1754-9

Last 4 digits of account number _____

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority. See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.16 Creditor's name Ortho-Clinical Diagnostics, Inc. Describe debtor's property that is subject to a lien Equipment \$ _____ \$ _____

Creditor's mailing address 1001 U.S. Highway 202
Raritan, NJ 08869

Creditor's email address, if known _____

Date debt was incurred 11/11/16 Describe the lien UCC 2016-316-4441-4

Last 4 digits of account number _____

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority. See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Part 1: Additional Page

Column A
Amount of claim

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.17 Creditor's name

Space Investment Partners

Describe debtor's property that is subject to a lien

Equipment

\$ _____ \$ _____

Creditor's mailing address

PO Box 31001-1566
Pasadena, CA 911101566

Describe the lien

UCC 2017-230-4652-2

Creditor's email address, if known

Is the creditor an insider or related party?

- No
- Yes

Date debt was incurred 8/18/17

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No
- Yes. Have you already specified the relative priority?

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

- No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

- Yes. The relative priority of creditors is specified on lines _____

2.18 Creditor's name

UMB Bank, N.A.

Describe debtor's property that is subject to a lien

All Assets

\$ 36,285,000.00 \$ 120,000,000.0

Creditor's mailing address

120 South Sixth Street, Suite 1400
Minneapolis, MN 55402

Describe the lien

UCC 2017-240-6787-8

Creditor's email address, if known

Is the creditor an insider or related party?

- No
- Yes

Date debt was incurred 11/1/17

Is anyone else liable on this claim?

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- No
- Yes. Have you already specified the relative priority?

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

- No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A
Amount of claim

Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.19 Creditor's name

Wintrust Equipment Finance

Describe debtor's property that is subject to a lien

Equipment

\$ _____ \$ _____

Creditor's mailing address

3665 Park Place West, Suite 150
Mishawaka, IN 46545

Describe the lien

UCC 2017-258-1932-2

Creditor's email address, if known

Is the creditor an insider or related party?

- No
- Yes

Date debt was incurred 9/15/17

Is anyone else liable on this claim?

Last 4 digits of account number

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- No
- Yes. Have you already specified the relative priority?

As of the petition filing date, the claim is:

Check all that apply.

- No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

- Contingent
- Unliquidated
- Disputed

- Yes. The relative priority of creditors is specified on lines _____

2.20 Creditor's name

MB Financial Bank, N.A.

Describe debtor's property that is subject to a lien

Equipment

\$ _____ \$ _____

Creditor's mailing address

6111 North River Road
Rosemont, IL 60018

Describe the lien

UCC 2017-356-6096-9

Creditor's email address, if known

Is the creditor an insider or related party?

- No
- Yes

Date debt was incurred 12/22/17

Is anyone else liable on this claim?

Last 4 digits of account number

- No
- Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- No
- Yes. Have you already specified the relative priority?

As of the petition filing date, the claim is:

Check all that apply.

- No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

- Contingent
- Unliquidated
- Disputed

- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral.

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.21 Creditor's name Lapis Advisers, LP Describe debtor's property that is subject to a lien Equipment \$ 10,300,000.00 \$ 120,000,000.00

Creditor's mailing address
265 Magnolia Avenue, Suite 100
Larkspur, CA 94939

Creditor's email address, if known _____

Date debt was incurred 1/18/19 Describe the lien UCC 2019-018-4123-9

Last 4 digits of account number _____ Is the creditor an insider or related party?
 No
 Yes

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

2.22 Creditor's name Schreiner Title Company Describe debtor's property that is subject to a lien APN: 221025-42450 \$ _____ \$ _____

Creditor's mailing address
30 North Second Street
Yakima, WA 98901

Creditor's email address, if known _____

Date debt was incurred 06/24/11 Describe the lien Deed of Trust No. 7738896

Last 4 digits of account number _____ Is the creditor an insider or related party?
 No
 Yes

Do multiple creditors have an interest in the same property?
 No
 Yes. Have you already specified the relative priority?
 No. Specify each creditor, including this creditor, and its relative priority.
See Global Notes.

 Yes. The relative priority of creditors is specified on lines _____

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Fill in this information to identify the case:

Debtor Sunnyside Community Hospital Association
 United States Bankruptcy Court for the: Eastern District of WA
(State)
 Case number 19-01191-11
(If known)

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
_____	<i>Check all that apply.</i>	
_____	<input type="checkbox"/> Contingent	
_____	<input type="checkbox"/> Unliquidated	
_____	<input type="checkbox"/> Disputed	
Date or dates debt was incurred	Basis for the claim: _____	

Last 4 digits of account number _____	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		

2.2 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
_____	<i>Check all that apply.</i>	
_____	<input type="checkbox"/> Contingent	
_____	<input type="checkbox"/> Unliquidated	
_____	<input type="checkbox"/> Disputed	
Date or dates debt was incurred	Basis for the claim: _____	

Last 4 digits of account number _____	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (qqqq)		

2.3 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
_____	<i>Check all that apply.</i>	
_____	<input type="checkbox"/> Contingent	
_____	<input type="checkbox"/> Unliquidated	
_____	<input type="checkbox"/> Disputed	
Date or dates debt was incurred	Basis for the claim: _____	

Last 4 digits of account number _____	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address See attached chart _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. \$ <u>17,033,355.42</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. \$ _____ <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. \$ _____ <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. \$ _____ <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. \$ _____ <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. \$ _____ <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Sunnyside Community Hospital Association

Name

Case number (if known) 19-01191-11

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts	
5a. Total claims from Part 1	5a.	\$ _____	
5b. Total claims from Part 2	5b. +	\$ <u>17,033,355.42</u>	
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<table border="1"><tr><td style="text-align: right;">\$ <u>17,033,355.42</u></td></tr></table>	\$ <u>17,033,355.42</u>
\$ <u>17,033,355.42</u>			

Sunnyside Community Hospital Association
Schedule F

Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
1st CLASS OFFICE SOLUTIONS, LLC	3016 E QUEEN AVE SPOKANE, WA 99217				974.94
4IMPRINT, INC.	25303 NETWORK PLACE CHICAGO, IL 60673-1253				394.34
509 INSANITY BASKETBALL	Unknown				500.00
ABADAN TRI-CITIES KBL, INC.	PO BOX 2930 TRI CITIES, WA 99302				1,925.53
ABBOTT LABORATORIES	PO BOX 92679 CHICAGO, IL 606752679				931.61
ABBOTT NUTRITION	75 REMITTANCE DR #1310 CHICAGO, IL 606751310				916.45
ABBOTT VASCULAR	75 REMITTANCE DRIVE, SUITE 1138 CHICAGO, IL 60675-1138				1,875.00
ABBOTT VASCULAR DIVISION	75 REMITTANCE DR #1138 CHICAGO, IL 606751138				2,819.00
ABBOTTS PRINTING INC	500 S 2ND AVE YAKIMA, WA 98902				336.97
ABBOTTS PRINTING INC	500 SOUTH SECOND AVE. YAKIMA, WA 98902				4,998.51
ABC FIRE CONTROL, INC.	PO BOX 10353 YAKIMA, WA 98909				589.13
ABILITY NETWORK, INC.	DEPT CH 16577 PALATINE, IL 60055-6577				5,533.82
ABIOMED INC	PO BOX 6214 BOSTON, MA 02212-6214				1,418.25
ACCELECARE WOUND CENTERS, INC	28525 NETWORK PLACE CHICAGO, IL 60673				101,028.97
ACCRUENT LLC	DEPT 3636 PO BOX 123636 DALLAS, TX 75312-3636				3,638.25
ACCUTECH	10125 S 52ND ST FRANKLIN, WI 53132				395.73
ACCUOTOME, INC	3222 PHOENIXVILLE PIKE BLDG 50 MALVERN, PA 19355				2,019.31
ACE HARDWARE-SUNNYSIDE	615 Yakima Valley Hwy SUNNYSIDE, WA 98944				1,355.73
ACELL	PO BOX 347766 PITTSBURGH, PA 15251-4766				2,199.60
ACIST MEDICAL SYSTEMS INC	PO BOX 978975 DALLAS, TX 75397-8975				1,284.21
ACUMED LLC	7995 COLLECTION CENTER DRIVE CHICAGO, IL 60693				6,153.86
ADDLEMAN PROPERTY MANAGEMENT LL	PO BOX 505 CASHMERE, WA 98815-0505				4,333.34
ADEPT-MED INTERNATIONAL	665 PLEASANT VALLEY RD DIAMOND SPRINGS, CA 95619				1,089.37
AES INC	ANESTHESIA EQUIPMENT PO BOX 358 BLACK DIAMOND, WA 980100358				284.35
AESCULAP	PO BOX 780426 PHILADELPHIA, PA 191780426				1,008.85
Agility Health, Inc.	PO Box 851313 Minneapolis, MN 55485-1313				4,217.25
AJAX ELECTRIC COMPANY, INC	2911 1ST AVE S SEATTLE, WA 98134				365.45
ALBRECHT WINDOWS & DOORS	501 YAKIMA VALLEY HIGHWAY SUNNYSIDE, WA 98944				1,088.24
ALCON LABORATORIES, INC DALLAS PNC	PO BOX 677775 DALLAS, TX 75267-7775				53,833.96
ALGER BRUSH CO. INC.	320 FLIGHTLINE LAGO VISTA, TX 78645				197.82
ALIMED INC	PO BOX 9135 DEDHAM, MA 020269135				378.73
ALL DOORS, INC.	PO BOX 1411 PASCO, WA 99301				1,236.97
ALL SEASON HEATING & AIR, INC	PO BOX 9006 YAKIMA, WA 98902				157.93
ALLEN MEDICAL SYSTEMS, INC.	100 DISCOVERY WAY ACTON, MA 01720-3948				313.04
ALLERGAN	12975 COLLECTIONS CENTER CHICAGO, IL 603930000				77,113.41
ALLIANCE PHYSICAL THERAPY PARTNERS, LLC	PO BOX 5509 CAROL STREAM, IL 60197-5509				934.60
ALLIANCE RECRUITING RESOURCES	P.O. BOX 670416 DALLAS, TX 752670416				30,393.32
ALLIANCE RECRUITING RESOURCES, INC.	PO BOX 670416 DALLAS, TX 75267-0416				13,928.31
ALLIANT COMMUNICATIONS, LLC	18 W MEAD AVE YAKIMA, WA 98902-6026				4,057.52
ALPHA SOURCE INC	PO BOX 809203 CHICAGO, IL 60680-9201				2,250.00
ALSCO, INC	1923 N WATERWORKS SPOKANE, WA 99212				47,374.84
AMAZON.COM CORP CR 60457 8781 022499 4	PO BOX 530958 ATLANTA, GA 30353-0958				1,762.45
AMERICAN BOARD OF NEUROLOGICAL SURGERY	38780 EAGLE WAY CHICAGO, IL 60678-1387				495.00
AMERICAN COLLEGE OF RADIOLOGY	1891 PRESTON WHITE DRIVE RESTON, VA 201914326				800.00
AMERICAN DATA GUARD, LLC	26609 79TH AVE S KENT, WA 98032-7319				53.00
AMERICAN MEDICAL ASSOC MEMBER RELATIONS	330 N. WABASH AVE. STE. 39300 CHICAGO, IL 60611-5885				800.69
AMERICAN MEDICAL LASERS	15402 NW 22ND AVE VANCOUVER, WA 98686				1,915.23
AMERICAN MEDICAL RESPONSE, INC	PO BOX 749667 LOS ANGELES, CA 900749667				13,234.98
AMERICAN MESSAGING	PO BOX 5749 CAROL STREAM, IL 60197-5749				2.25
AMERICAN PROFICIENCY INSTITUTE	DEPARTMENT 9526 P.O. BOX 30516 LANSING, MI 489098016				869.00
AMERICAN RED CROSS	PO BOX 100805 PASADENA, CA 911890805				43,638.23
AMO SALES AND SERVICES, INC.	75 REMITTANCE DRIVE SUITE #1437 CHICAGO, IL 60675-1437				529.58
AMPRONIX, INC	15 WHATNEY IRVINE, CA 92618				2,889.19
ANAEROBE SYSTEMS	15906 CONCORD CIRCLE MORGAN HILL, CA 95037				407.99
ANESTHESIA EQUIPMENT SUPPLY CO.	P.O. BOX 358 BLACK DIAMOND, WA 98010-0358				5,852.92
ANGIODYNAMICS	P.O. BOX 1549 ALBANY, NY 12201-1549				1,163.20
APEX PLUMBING & MECHANICAL	501 S 2ND AVE YAKIMA, WA 989020000				616.38
APEX PRINT TECHNOLOGIES	BIN 35, PO BOX 9201 MPLS, MN 55480-9201				18,401.05
API HEALTHCARE	33073 COLLECTION CTR DR CHICAGO, IL 606930330				15.00
AQUATIC SOLUTIONS YAKIMA	111 EMHOFF RD NACHES, WA 989370000				866.40
ARIAN ARANDA	PO BOX 204 2091 SUNNYSIDE MABTON RD SUNNYSIDE, WA 98944				175.68
ARMANDO VALENCIA	PO BOX 266 SUNNYSIDE, WA 98944				2,981.58
ARROW INTERNATIONAL	PO BOX 60519 CHARLOTTE, NC 282600000				10,967.68
ARROW INTERNATIONAL INC	P.O. BOX 8500-S-9060 PHILADELPHIA, PA 19178-9060				5,967.20
ARS NETWORKING	2321 E 4TH ST STE C-551 SANTA ANA , CA 92705				497.75
ARTHREX INC CORPORATE HEADQUARTERS	PO BOX 403511 ATLANTA, GA 30384-3511				23,607.77
A-SPECIAL CLEANING SERVICES	208 BEL AIR DR YAKIMA, WA 98908				4,124.16
ASPEN MEDICAL PRODUCTS, INC.	PO BOX 848397 LOS ANGELES, CA 90084-8397				201.08
AT & T	P.O. BOX 105068 ATLANTA, GA 30348-5068				651.88
AT & T MOBILITY	P.O. BOX 6463 CAROL STREAM, IL 60197-6444				7,300.72

Sunnyside Community Hospital Association
Schedule F

Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
B. BRAUN MEDICAL, INC.	P.O. BOX 780433 PHILADELPHIA, PA 19178-0433				248.75
BALTZO HEALTH PHYSICS SERVICE	32927 NE 51ST ST CARNATION, WA 980140900				2,600.00
BAUDELIA CORONA-OCHOA	1100 S EUCLID #3 GRANDVIEW, WA 98930				110.43
BAUSCH & LOMB VPNA LLC	4395 COLLECTION CENTER DR CHICAGO, IL 60693-0043				270.80
BAXTER HEALTHCARE - FENWA	DEPT CH 17924 PALATINE, IL 60055-7924				283.87
BAXTER HEALTHCARE CORP	PO BOX 730531 DALLAS, TX 75373-0531				18,744.62
BAXTER HEALTHCARE CORP ACCT 34229528	P.O. BOX 730531 DALLAS, TX 75373				25,809.51
BAYER HEALTHCARE	PO BOX 360172 PITTSBURGH, PA 152516172				658.00
BD DIAGNOSTICS	7 LOVETON CIRCLE SPARKS, MD 211520000				2,541.75
BEAVER-VISITEC INTERNATIO	PO BOX 842837 BOSTON, MA 02284-2837				1,144.64
BECKMAN COULTER INC. - CA	Dept. CH 10164 Palatine, IL 60055-0164				581.89
BECTON DICKINSON AND COMPANY	PO BOX 100921 PASADENA, CA 91189-0921				16,352.52
BEEKLEY CORPORATION	ONE PRESTIGE LANE BRISTOL, CT 6010				1,345.90
BELLMED	7800 SOUTH ELATI ST SUITE 260 LITTLETON, CO 80120				302.33
BERGEN SCREEN PRINT	PO BOX 8298 YAKIMA, WA 98908				207.74
BERKLEY	1330 S 51ST RICHMOND, CA 94804				191.39
BERND MOVING SYSTEMS, INC	600 N 18TH AVE YAKIMA, WA 98902				1,596.25
BEST PRACTICAL SOLUTIONS	285 WASHINGTON STREET UNIT F2 SOMERVILLE, MA 2143				4,740.00
BESTWESTERN GRAPEVINE INN	1849 QUAIL LANE SUNNYSIDE, WA 98944				430.76
BIOMERIEUX MO	PO BOX 500308 ST LOUIS, MO 631500308				16,459.42
BIONIX DEVELOPMENT CORP	P.O. BOX 935 TOLEDO, OH 43697-0935				173.95
BIORAD LABORATORIES DIAGNOSTICS PRODUCT	P.O. BOX 9740 LOS ANGELES, CA 90084-9740				1,258.64
BIO-RAD LABORATORIES INC	PO BOX 849740 LOS ANGELES, CA 90084-9740				16,536.64
BI-RITE LUMBER COMPANY	P.O. BOX 105525 ATLANTA, GA 30348-5525				48.98
BLEYHL FARM SERVICE	940 E WINE COUNTRY RD GRANDVIEW, WA 98930-8982				2,200.36
BONZI'S	633 YAKIMA VALLEY HWY SUNNYSIDE, WA 98944				554.74
BOSTON SCIENTIFIC CORPORATION	PO BOX 951653 DALLAS, TX 75395-1653				57,144.17
BRACCO DIAGNOSTICS INC	P.O. BOX 978952 DALLAS, TX 753978952				7,565.25
BRAMSTEDT INSTRUMENT CO	703 N KITTITAS ST ELLENSBURG, WA 989260000				9,236.67
BRASSELER USA FORMERLY KOMET MEDICAL	ONE BRASSELER BLVD SAVANNAH, GA 31419				260.92
BREG, INC.	PO BOX 849991 DALLAS, TX 75284-9991				4,639.06
BRIGGS FORMS & SUPPLIES	4900 UNIVERSITY AVE STE 200 WDM, IA 50266-6733				493.81
BRITTINEY WALTON	5510 ZAFRA CT PASCO, WA 99301				128.32
BRUCE ROGER PAUL DBA OXBOW CONSTRUCTION	9270 EMERALD RD SUNNYSIDE, WA 98944				550.29
BUSHNELL PLUMBING INC DBA ROTO - ROOTER	PO BOX 819 YAKIMA, WA 98907				1,286.85
C - MISC VENDOR	Unknown				2,541.75
C.R. BARD, INC.	P.O. BOX 75767 CHARLOTTE, NC 28275				13,623.55
CABINET TECH, LLC	PO BOX 2872 YAKIMA, WA 98907				2,694.26
CAH NETWORK	714 W PINE STREET NEWPORT, WA 99156				11,500.00
CALYPSO	7001 220TH ST SW MOUNTLAKE TERRACE, WA 98043-2124				164.28
CAMPBELLS MINI STORAGE	1401 W. RIVERSIDE AVE. SUNNYSIDE, WA 98944				39,032.00
CAPITAL INVENTORY, INC.	PO BOX 1081 WOODSTOCK, GA 30188				3,349.96
CARAVAN HEALTH	PO BOX 219185 KANSAS CITY, MO 64121-9285				111,930.36
CARDINAL HEALTH INCORPORATED	MEDICAL PRODUCTS & SRVS P.O. BOX 100316 PASADENA, CA 911890000				166,352.97
CARDINAL HEALTH MEDICAL PRODUCT SERVICE	P.O. BOX 100316 PASADENA, CA 91189-0316				13,871.23
CARDINAL HEALTH NUCLEAR PHARMAC	P.O. BOX 100552 PASADENA, CA 91189-0552				7,124.69
CARDIO SOLUTION, LLC	PO BOX 639028 CINCINNATI, OH 45263-9028				116,666.67
CARDIONET, LLC	PO BOX 417570 BOSTON, MA 02241-7570				75.00
CARDMEMBER SERVICE	PO BOX 790408 ST LOUIS, MO 63179-0408				43,328.65
CAREFUSION ALARIS PRODUCTS	25565 NETWORK PLACE CHICAGO, IL 60673-1255				32,754.15
CAREFUSION SOLUTIONS, LLC/PYXIS	25082 NETWORK PLACE CHICAGO, IL 60673-1250				90,010.83
CARL ZEISS MEDITEC INC	5160 HACIENDA DRIVE DUBLIN, CA 94568-7562				164.01
CARLOS SPINDOLA MENDOZA	2370 ROZA DR ZILLAH, WA 98953				100.00
CARSON KETCHUM	17481 SUMMITVIEW ROAD COWICHE, WA 98923				350.00
CARTIVA, INC.	DEPT 3846 PO BOX 123846 DALLAS, TX 75312-3846				22,400.00
CDW GOVERNMENT	75 REMITTANCE DR SUITE 1515 CHICAGO, IL 606751515				214,111.59
CENTERING HEALTHCARE INSTITUTE,	89 SOUTH STREET, SUITE 404 BOSTON, MA 2111				250.00
CENTRAL WA OCCUPATIONAL MEDICIN	PO BOX 22004 BELFAST, ME 04915-4117				445.00
CENTRAL WASHINGTON EYE CLINIC	3902 CREEKSIDE LOOP, STE. 110 YAKIMA, WA 98902				500.00
CENTURYLINK	Business Services PO Box 52187 Phoenix, AZ 85072-2187				414.46
CERIUM NETWORKS, INC.	1636 W 1ST AVE SPOKANE, WA 99201				5,243.94
CERNER CORPORATION ATTN ACC REC, 5TH FL	2800 ROCKCREEK PARKWAY KANSAS CITY, MO 64117				1,245,799.22
CHANNING BETE COMPANY	PO BOX 3538 SOUTH DEERFIELD, MA 01373-3538				569.45
CHARDONNAY PLAZA LLC	25521 NE 74TH CT BATTLE GROUND, WA 98604				45,798.72
CI INFORMATION MANAGEMENT	PO BOX 7346 KENNEWICK, WA 99336				1,176.00
CINTAS CORPORATION #605	PO BOX 650838 DALLAS, TX 75265-0838				200,613.58
CIOX	P.O. BOX 409669 ATLANTA, GA 303840000				88.06
CITY OF PROSSER	601 7TH STREET PROSSER, WA 99350				602.48
CITY OF YAKIMA	PO BOX 22720 YAKIMA, WA 98907-2720				344.60
CLINICAL AND LABORATORY STANDARDS INSTITUT	950 WEST VALLEY ROAD SUITE 2500 WAYNE, PA 19087				708.40

Sunnyside Community Hospital Association
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Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
CMX CORPORATION	P.O. BOX 58088 SEATTLE, WA 98138-1088				2,719.00
COCA COLA BOTTLING CO., INC.	P.O. BOX 2905 YAKIMA, WA 98907				2,110.75
CO-ENERGY	PO BOX 3998 PASCO, WA 99302				2,776.07
COHEN OCC MEDICINE, LL HEALTHY WORKER	307 SOUTH 12TH AVENUE, SUITE 12 YAKIMA, WA 98902				1,500.00
COLLECTIVE MEDICAL TECH	4760 S HIGHLAND DR #217 SALT LAKE CITY, UT 841170000				9,711.00
COLLEGE OF AMERICAN PATHOLOGIST	PO BOX 71698 CHICAGO, IL 60694-1698				9,999.50
COLUMBIA ELECTRIC SUPPLY	P.O. BOX 1120 VANCOUVER, WA 98666				7.90
CO-MEDICAL	7100 ROOSEVELT WAY NE SEATTLE, WA 98115-5652				1,262.91
COMPHEALTH, INC.	P.O. BOX 972651 DALLAS, TX 75397-2651				85.54
COMPRESSION THERAPY CONCEPTS IN	555 INDUSTRIAL WAY WEST EATONTOWN, NJ 7724				4,313.95
CONE INSTRUMENTS, LLC	DEPT 2465 BIRMINGHAM, AL 35246-2465				778.87
CONMED CORPORATION	CHURCH STREET STATION PO BOX 6814 NEW YORK, NY 102490000				4,153.95
CONTROL BOARDS PLUS RANDY OBRECHT	15575 125TH AVE GRAND RIVER, IA 50108				269.95
CONTROL SOLUTIONS INC.	35851 INDUSTRIAL WAY S ST HELENS, OR 97051				340.97
COOK MEDICAL INCORPORATED	22988 NETWORK PLACE CHICAGO, IL 606731229				44,695.15
COOPER SURGICAL	P.O. BOX 712280 CINCINNATI, OH 45271-2280				9,795.50
COPIERS NORTHWEST, INC.	601 DEXTER AVE N SEATTLE, WA 98109				11,339.74
COVIDIEN SALES, LLC	15 HAMPSHIRE ST MANSFIELD, MA 2048				33,003.90
CR BARD INCORPORATED	PO BOX 75767 CHARLOTTE, NC 282750000				3,139.69
CREST HEALTHCARE SUPPLY INC	PO BOX 727 DASSEL, MN 553250727				244.01
CROSS TX INC	32404 FRONTAGE ROAD BOZEMAN, MT 59715				26,966.71
CSI CARDIOVASCULAR SYSTEMS INC	DEPT CH 19348 PALATINE, IL 600559348				8,253.10
CULLIGAN WATER CONDITION YAKIM	3728 E LONGFELLOW STE #1 SPOKANE, WA 99217				537.98
CURASCRIP SPECIALITY DIS	PO BOX 978510 DALLAS, TX 75397-8510				13,108.50
CURBELL MEDICAL PRODUCTS,	62882 COLLECTIONS CENTER DR. CHICAGO, IL 60693-0628				5,521.06
CUSTOMIZED COMMUNICATIONS	PO BOX 5566 ARLINGTON, TX 76005				1,456.68
DANKO MARTINCIC	1033 W 7TH AVE SPOKANE, WA 99204				27,500.00
DATA MANAGEMENT INC	PO BOX 789 FARMINGTON, CT 06034-0789				197.40
DAVITA RENAL TREATMENT CENTERS-WE	PO BOX 781607 PHILADELPHIA, PA 19178-1607				169,033.00
DEPARTMENT OF L & I	P.O. BOX 44410 OLYMPIA, WA 98504-4410				141.60
DEPUY SYNTHES SALES	P.O. BOX 8538-662 PHILADELPHIA, PA 191710662				1,060.05
DESIGN SPACE MODULAR BUIL, INC	PO BOX 31001-1566 PASADENA, CA 91110-1566				77,709.22
DESIGN VERONIQUE MY TRUE IMAGE MANUFACT	999 MARINA WAY SOUTH RICHMOND, CA 94804				374.45
DEX MEDIA	PO BOX 9001401 LOUISVILLE, KY 40290				11,546.34
DINGUS ZARECOR & ASSOCIATES	12015 E MAIN SPOKANE, WA 992060000				3,000.00
DISCUS ANALYTICS LLC	105 W 8TH AVE STE 6080 SPOKANE, WA 99204				3,910.00
DISH	PO BOX 94063 PALATINE, IL 60094-4063				128.49
DIVCO INC.	P.O. BOX 3245 SPOKANE, WA 99220-3245				6,234.70
DJ ORTHOPEDICS, LLC	P.O. BOX 650777 DALLAS, TX 75265-0777				649.63
DJO LLC	PO BOX 650777 DALLAS, TX 75265-0777				24,277.50
DSHS OFFICE OF FINANCIAL RECOVERY	P.O. BOX 9501 OLYMPIA, WA 98507-9501				851,820.00
DURA-SHINE CLEAN, LLC	PO BOX 2754 PASCO, WA 99302				3,550.00
E3 SOLUTIONS	PO BOX 72 YAKIMA, WA 98907				252.00
EAGLE SIGNS LLC	1511 S KEYS ROAD YAKIMA, WA 98903				662.01
EARL ARCHITECTS, LLC	301 N MAIN STREET GREENVILLE, SC 29601				368,935.63
EATONS REFRIGERATION	1625 VOELKER AVE YAKIMA, WA 98902				488.96
EBSCO INVESTMENT SERVICES, INC.	PO BOX 830460 BIRMINGHAM, AL 35283				49.09
ECOLAB	PO BOX 70343 CHICAGO, IL 60673-0343				2,139.35
ECOLAB INC	P.O. BOX 100512 PASADENA, CA 911890512				418.98
ECOLAB INC	PO BOX 100512 PASADENA, CA 91189-0512				310.79
ECOLAB PEST ELIMINATION DIV	26252 NETWORK PLACE CHICAGO, IL 60673-1262				552.50
ECRI INST EMERGENCY CARE RESEARCH INST	LB#1472 PO BOX 95000 PHILADELPHIA, PA 19195-0001				374.00
EMERGENCY NURSES ASSOCIATION	PO BOX 83314 CHICAGO, IL 60691-3314				225.00
EMPLOYMENT SECURITY DEPT UI TAX ADMIN	P.O. BOX 34949 SEATTLE, WA 98124-1949				34,700.31
EMTECH LABORATORIES, INC.	PO BOX 12900 ROANOKE, VA 24022				1,237.33
ESCROW PACIFIC CONTRACT COLLECTION DEPT	P.O. BOX 170 YAKIMA, WA 98907				109,175.04
ETTER MCMAHON LAMBERSON VAN WERT ORESKI	618 W RIVERSIDE AVE., SUITE 210 SPOKANE, WA 99201				21,513.79
EVERGREEN ANESTHESIA ASSOCIATES	3800 S. Highland Blvd. West Richland, WA 99353				75,729.59
EZ WAY, INC	PO BOX 89 CLARINDA, IA 51632				536.57
FASTENAL	1818 E EDISON AVE SUNNYSIDE, WA 98944				30.00
FASTEX ADVANCED MOBILE IMAGING,	PO BOX 379 YAKIMA, WA 98907				600.00
FATBEAM, LLC	2065 W RIVERSTONE DR SUITE 105 COEUR D'ALENE, ID 83814				25,036.91
FDA-MQSA PROGRAM	P.O. BOX 979109 ST LOUIS, MO 631979000				2,589.93
FIRST CHOICE HEALTH NETWORK	MS:310170 PO BOX 94041 SEATTLE, WA 98124 0				19,316.00
FISHER & PAYKEL HEALTHCARE, INC	DEPT CH 16926 PALATINE, IL 60055-6926				394.93
FISHER SCIENTIFIC ACCT# 811330-001	13551 COLLECTION CTR DR CHICAGO, IL 60693				99,440.21
FOOD SERVICES OF AMERICA	PO BOX 6248 SPOKANE, WA 99217				5,492.15
FOUNDATION FOR HEALTH CARE QUAL	705 SECOND AVE. SUITE 703 SEATTLE, WA 98104				345.00
FRANZ FAMILY BAKERIES	P.O. BOX 742654 LOS ANGELES, CA 900742654				1,049.95
FRONTIER NEUROSURGERY	6101 SUMMITVIEW SUITE 200 YAKIMA, WA 989080000				3,497,832.00

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		C	U	D	
FUSION MEDICAL STAFFING L	PO BOX 82674 LINCOLN, NE 68501				83,532.66
FUTURELINK COMMUNICATIONS	PO BOX 10803 YAKIMA, WA 98909-8030				2,366.88
G12 COMMUNICATIONS	150 LAKE STREET SOUTH #240 KIRKLAND, WA 98033				3,308.34
GALLEGOS KEONI MANA DANG RUN LANDSCAPE	191 HULL RD SELAH, WA 98942				432.80
GCX CORPORATION	PO BOX 1410 SUISUN CITY, CA 94585-4410				939.26
GE HEALTHCARE EQUIP FINANCE	PO BOX 641419 PITTSBURG, PA 152641419				470,193.80
GE HEALTHCARE FINANCIAL SERVICE	P.O. BOX 641419 PITTSBURGH, PA 15264-1419				188,324.84
GE HEALTHCARE IITS USA CORP.	15724 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693				3,193.10
GE MEDICAL SYSTEMS	PO BOX 96483 CHICAGO, IL 60693				175.32
GE MEDICAL SYSTEMS INFORM	5517 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693				7,433.23
GENOVEVA VARGAS	PO BOX 446 PROSSER, WA 99350				144.00
GETINGE USA SALES LLC	PO BOX 775436 CHICAGO, IL 606775436				4,475.85
GLOBALSTAR USA	P.O. BOX 30519 LOS ANGELES, CA 900300519				1,036.60
GLOBUS MEDICAL	PO BOX 203329 DALLAS, TX 753203329				241,338.56
GN RESOUND	PO BOX 200217 PITTSBURGH, PA 15251-0217				2,340.61
GRACE MEDICAL	PO BOX 34877 MEMPHIS, TN 38184-0877				2,126.00
GRANDVIEW CHAMBER OF COMMERCE	PO BOX 717 GRANDVIEW, WA 98930				255.00
GRANDVIEW MOB, LLC	1214 N. 20TH AVE YAKIMA, WA 98902				3,812.04
GREAT AMERICA FINANCIAL S	PO BOX 660831 DALLAS, TX 75266-0831				4,300.69
GREATER YAKIMA	PO BOX 1490 YAKIMA, WA 989071490				500.00
GUARDIAN SECURITY SYSTEMS, INC.	1743 FIRST AVE SO SEATTLE, WA 981340000				6,693.40
GYNEX	PO BOX 3189 REDMOND, WA 98073				323.80
HAEMONETICS INC	24849 NETWORK PL CHICAGO, IL 606731248				7,019.89
HAEMONTETICS	549 ALDI BLVD MT. JULIET, TN 37122				620.35
HALYARD HEALTH INC	P.O. BOX 732583 DALLAS, TX 753732583				2,258.40
HARDY DIAGNOSTICS	429 S. Pioneer Blvd. Springboro, OH 45066-3002				559.09
HAROLD'S REPAIR & RENTAL	802 SIXTH ST SUNNYSIDE, WA 98944				445.44
HARRIS OFFICE EQUIPMENT	605 N FIRST ST YAKIMA, WA 98901				5,693.83
HAVEL'S INC.	3726 LANSDALE ST. CINCINNATI, OH 45227				847.15
HAWKINS EDWARDS, INC ATTN: PAUL HAWKINS	225 W. MAIN, SUITE 200 SPOKANE, WA 99201				419,654.78
HAYES HEALTHCARE, LLC	6700 N ANDREWS AVE SUITE, 600 FORT LAUDERDALE, FL 33309				130,852.33
HCPRO	PO BOX 5094 BRENTWOOD, TN 37024				2,998.24
HEALTH BUSINESS SOLUTIONS INC	10620 GRIFFIN RD SUITE 204 COOPER CITY, FL 33328				67,825.72
HEALTH FACILITIES PLANNING & DEVELOP	120 1ST AVENUE WEST, SUITE 100 SEATTLE, WA 98119				14,579.37
HEALTH NET STAFFCOM, DBA STAFFING ANGEL	PO BOX 633429 CINCINNATI, OH 45263-3429				1,896.80
HEALTHMARK INDUSTRIES CO.	DEPT 7058 P.O. BOX 30516 LANSING, MI 489098016				1,098.49
HEALTHMARKIT CONSULTING, LLC	7517 CRESTED BUTTE DR PLANO, TX 75025				20,324.57
HEALTHSTREAM, INC.	P.O. BOX 102817 ATLANTA, GA 30368-2817				21,869.08
HEALTHWIND	8640 154TH AVE NE REDMOND, WA 980520000				3,073.95
HEART-CARE CORPORATION OF AMERI	PO BOX 3012 SOUTHEASTERN, PA 19398-3012				6,300.00
HELMER SCIENTIFIC	28689 NETWORK PLACE CHICAGO, IL 60673-1286				7,436.77
HEMATOLOGIS, INC	P.O. BOX 24712 SEATTLE, WA 981240000				8,940.00
HILL ROM COMPANY INC	1238 College Park Dr. Dover, DE 19904				10,337.93
HOLOGIC INC	24506 NETWORK PLACE CHICAGO, IL 606730000				31,366.28
HOPKINS MEDICAL PRODUCTS, INC	DEPT 2651 BIRMINGHAM, AL 35246				16.85
HORIZON MENTAL HLTH MGMNT- BEHAV HLTH	PO BOX 840839 DALLAS, TX 75284-0839				55,715.53
HORTY, SPRINGER & MATTERN	4614 FIFTH AVENUE PITTSBURGH, PA 15213				600.00
HOVER TECH INTERNATIONAL	4482 INOVATION WAY ALLENTOWN, PA 18109				4,100.00
HTGAF HOLDING LLC DBA GAFFEY HEALTHCARE	5110 MARYLAND WAY, SUITE 200 BRENTWOOD, TN 37027				98,530.80
HUNSAKER, ARON T. H2 ELECTRIC LLC	633 YAKIMA VALLEY HWY SUNNYSIDE, WA 98944				665.75
ID INC	4915 BENTWOOD WAY GRANITE BAY, CA 95746				13,500.00
IFAX SOLUTIONS	1020 EAST MAIN STREET NORRISTOWN, PA 19401-2778				1,799.75
INCYTE PATHOLOGY	P.O. BOX 3405 SPOKANE, WA 992203405				41,843.96
INFORMATION RESOURCE MANAGEMENT	P.O. BOX 2185 SPOKANE, WA 99210				58,334.34
INFUSYSTEM, INC	31700 RESEARCH PARK DRIVE MADISON HEIGHTS, MI 48071-4627				225.00
INLAND ALARM, LLC	1100 AHTANUM ROAD YAKIMA, WA 98903				1,629.12
INLAND FIRE PROTECTION	1100 AHTANUM ROAD YAKIMA, WA 98903				216.40
INLAND NW HEALTH SERVICES	PO BOX 2185 SPOKANE, WA 992100000				58,627.57
INSTRUMENTATION LABORATORY	P.O. BOX 350074 BOSTON, MA 02241-0574				733.72
INTEGRA INFORMATION TECHNOLOGIE	P.O. BOX 8304 BOISE, ID 83707-2304				5,039.21
INTEGRA LIFESCIENCES CORP INC	PO BOX 404129 ATLANTA, GA 303844129				6,789.14
INTEGRA LIFESCIENCES SALES LLC	P.O. BOX 404129 ATLANTA, GA 303844129				13,821.93
INTERSTATE ALL BATTERY CNTR RET ACQ&DEV	4301 121ST ST URBANDALE, IA 50323-2301				1,077.54
INTERSTATE FORMS AND LABELS LLC	205 RANCHO LANE YAKIMA, WA 98908				2,780.91
INVISIBLE INK CORPORATION	PO BOX 10771 YAKIMA, WA 98909				27.00
INVOTEC INTERNATIONAL, INC.	6833 PHILLIPS INDUSTRIAL BLVD JACKSONVILLE, FL 32256				124.02
IRIDEX CORP	1212 TERRA BELLA AVE MOUNTAIN VIEW, CA 94043				3,293.88
IRON MOUNTAIN	PO BOX 915004 DALLAS, TX 753915004				1,055.65
ISOSCAN	6225 N MEEKER PLACE, SUITE 130 BOISE, ID 83713				20,815.40
JAS AND OB PHOTOGRAPHY	317 YAKIMA VALLEY HWY SUNNYSIDE, WA 98944				388.22

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Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
JOHN DEERE FINANCIAL	PO BOX 4450 CAROL STREAM, IL 60197-4450				235.83
JOHN OR MISHELLE BOOTH	2130 SCOON ROAD SUNNYSIDE, WA 98944				329,000.00
JOHNSON & JOHNSON HEALTH CARE SYS INC.	5972 COLLECTIONS CENTER DR. CHICAGO, IL 60693				22,486.74
JRF ORTHO	PO BOX 843549 KANSAS CITY, MO 64184-3549				11,815.00
JURGAN DEVELOPMENT AND MFG. (6018 S HIGHLANDS AVE MADISON, WI 537050000				396.00
K & D MACHINE INC NUMBER	4651 N COUNTY LINE ROAD GRANDVIEW, WA 98930				302.58
K2M, INC	600 HOPE PARKWAY SE LEESBURG, VA 20175				6,441.83
KATENA NUMBER	4 STEWART CT DENVILLE, NJ 7834				1,477.24
KCI USA	PO BOX 301557 DALLAS, TX 75303-1557				12,364.81
KCI USA NUMBER	P.O. BOX 301557 DALLAS, TX 75303-1557				2,009.19
KELLEY'S TELE-COMMUNATIONS	8121 W GRANDRIDGE BLVD STE C KENNEWICK, WA 993360000				242.50
KENNEDY, SHERYL L., CPA LLC NUMBER	400 GALER ST. SEATTLE, WA 98109				1,500.00
KENTEC MEDICAL	17871 FITCH ST IRVINE, CA 926140000				1,311.55
Kevin L Hurst, W.I.T., LCC	PO BOX 724 PROSSER, WA 99350				215.80
KEY SURGICAL INC. ACCOUNTS RECEIVABLE	PO BOX 860524 MINNEAPOLIS, MN 55486-0524				2,242.19
KIE SUPPLY CORPORATION NUMBER	113 EAST COLUMBIA DRIVE KENNEWICK, WA 99336-3786				1,383.96
KRISTIN BOND M.D.	4390 FACTORY ROAD SUNNYSIDE, WA 98944				1,350.00
LABCORP	PO BOX 12140 BURLINGTON, NC 272162140				82,611.58
LAERDAL MEDICAL CORPORATION	LOCKBOX #4987 PHILADELPHIA, PA 19178				323.08
LAMBERTON ELECTRIC, INC.	PO BOX 1056 NACHES, WA 98937				26,411.79
LANDAUER, INC.	PO BOX 809051 CHICAGO, IL 60680-9051				1,802.21
LANGUAGE LINE SERVICES	PO BOX 202564 DALLAS, TX 75320-2564				38,053.37
LANTHEUS MEDICAL IMAGING	331 TREBLE COVE RD N. BILLERICA, MA 1862				1,728.00
LEAF	PO BOX 742647 CINCINNATI, OH 45274-2647				1,046.30
LEMAITRE VASCULAR INC	PO BOX 978979 DALLAS, TX 753978979				833.78
LIFECCELL CORPORATION	PO BOX 301582 DALLAS, TX 75303-1582				88,248.00
LIFENET HEALTH	PO BOX 79636 BALTIMORE, MD 21279-0636				21,405.00
LIN SOFTWARE, LLC	221 KENYON ST NW, STE 202 OLYMPIA, WA 98502				1,298.40
LINKEDIN CORPORATION	1000 W MAUDE AVENUE SUNNYVALE, CA 94085				4,677.75
LINVATEC (CONMED LINVATEC)	P.O. BOX 301231 DALLAS, TX 75303-1231				4,246.21
LOCKSHOP	1612 E. EDISON SUNNYSIDE, WA 98944				43.16
LOCUM TENENS.COM	PO BOX 405547 ATLANTA, GA 303840000				71,578.83
LRS HEALTHCARE	PO BOX 310781 DES MOINES, IA 50331-0781				73,613.50
M CAMPBELL & COMPANY, INC	2828 W IRVING ST PASCO, WA 99301				22,886.61
M G WAGNER CO INC	PO BOX 9605 YAKIMA, WA 989090000				410.02
MACRO HELIX LLC	PO BOX 742256 ATLANTA, GA 30374-2256				18,249.77
MAGNACOUSTICS	1995 PARK ST ATLANTIC BEACH, NY 11509				835.00
MAILFINANCE	DEPT 3682 DALLAS, TX 75312-3682				2,441.44
MAINE STANDARDS COMPANY	221 US ROUTE 1 CUMBERLAND FORE, ME 41100000				1,305.69
MARIA ELENA NELSON	2105 CAYUSE LANE YAKIMA, WA 98901				937.50
MARKETLAB INC NUMBER	DEPT 2506 BIRMINGHAM, AL 35246-2506				377.18
MASIMO	28932 NETWORK PLACE CHICAGO, IL 606731289				3,175.29
MBM LAND, LLC	1214 N 20TH AVENUE YAKIMA, WA 98902-1209				243,445.69
MCKESSON DRUG DC #8173	LOCKBOX LAC-057256 LOS ANGELES, CA 90065				39,980.17
MCKESSON PLASMA & BIOLOGICS LLC NUMBER	16578 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693				18,237.75
MEDCONNECT USA DEPT N701B	PO BOX 30102 SALT LAKE CITY, UT 84130-0102				1,448.48
MEDICAL OPTICS	6619 W CALUMET ROAD MILWAUKEE, WI 53223				3,491.65
MEDICAL SOLUTIONS NUMBER	PO BOX 310737 DES MOINES, IA 50331-0737				34,612.55
MEDICATION REVIEW, INC. NUMBER	104 S FREYA STREET, STE 225 TURQUOISE FLAG BLDG SPOKANE, WA 99202				15,500.00
MEDISYSTEM, INC NUMBER	521 W ROSECRANS AVE GARDENA, CA 90248				109.47
MEDIVATORS	NW 9841 PO BOX 1450 MINNEAPOLIS, MN 554850000				1,996.82
MEDLINE DEPT 1080	PO BOX 121080 DALLAS, TX 75312-1080				91,698.57
MEDSTAR TRANSPORTATION	PO BOX 34628 #74747 SEATTLE, WA 981241628				3,267.80
MEDTRONIC USA INC	4642 COLLECTION CTR DR CHICAGO, IL 606930000				498,275.93
MEESKE EXCAVATION LLC NUMBER	25001 N ROTHROCK ROAD PROSSER, WA 99350				2,219.43
MEGADYNE MEDICAL PRODUCTS	PO BOX 1332 SANDY, UT 840910000				849.29
MENKE JACKSON BEYER, LLP NUMBER	807 N 39TH AVE YAKIMA, WA 98902				9,517.40
MENTOR WORLDWIDE LLC NUMBER	33 TECHNOLOGY DR. IRVINE, CA 92618				8,933.26
MERIT MEDICAL SYSTEMS INC	P.O. BOX 204842 DALLAS, TX 753204842				8,299.44
MERIT RESOURCE SERVICES	PO BOX 1039 200 E 3RD AVE ELLENSBURG, WA 989260000				22.00
MERZ NORTH AMERICA NUMBER	PO BOX 912073 DENVER, CO 80291-2073				98.50
MEYER, FLUEGGE & TENNEY,	P.O. BOX 22680 YAKIMA, WA 98907				525.00
MICRO TECHNOLOGY, INC	18179 MEADOWLARK LANE LAKE OSWEGO, OR 97034				2,434.99
MICRO-AIRE	LOCK BOX 96565 CHICAGO, IL 60693				573.48
MICROLINE SURGICAL	PO BOX 392205 PITTSBURGH, PA 15251-9205				459.53
MICROSURGICAL TECHNOLOGY NUMBER	PO BOX 74007048 CHICAGO, IL 60674-7048				2,373.91
MID VALLEY NEPHROLOGY ASSOCIATES, PLLC	1368 WHITE BLUFFS ST RICHLAND, WA 99352				44,050.31
MIDWEST HEALTH CARE INC	300 S MT AUBURN RD STE 100 CAPE GIRARDEAU, MO 637030000				9,174.00
MILLENNIUM SURGICAL CORP. NUMBER	PO BOX 775385 CHICAGO, IL 60677-5385				1,690.50
MRI CONTRACT STAFFING, IN NUMBER	1735 MARKET STREET, SUITE 200 PHILADELPHIA, PA 19103				18,378.30

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		C	U	D	
MSDSONLINE, INC. NUMBER	27185 NETWORK PLACE CHICAGO, IL 60673-1271				2,588.53
MSR WEST	6520 212TH ST SW STE 208 LYNNWOOD, WA 980360000				161.86
MTF NUMBER	P.O. BOX 415911 BOSTON, MA 2241				44,379.33
MUSCULOSKELETAL TRANSPLANT FOU	PO BOX 415911 BOSTON, MA 22410000				972.30
NASEER AHMAD MD	PO BOX 2770 WOODINVILLE, WA 98072				380.41
NATIONAL COMPREHENSIVE CANCER NETWORK, II	3025 CHEMICAL TOAD, SUITE 100 PLYMOUTH MEETING, PA 19462				4,377.00
NATUS MEDICAL INC DEPT 33768	PO BOX 39000 SAN FRANCISCO, CA 94139				564.91
NAVEX GLOBAL, INC.	PO BOX 60941 CHARLOTTE, NC 28260-0941				10,184.55
NAVICURE, INC	1311 SOLUTIONS CENTER CHICAGO, IL 60677-1311				1,799.00
NAVIX DIAGNOSTIC, INC.	PO BOX 536563 PITTSBURGH, PA 15253-5907				5,250.00
NEOFUNDS BY NEOPOST	PO BOX 30193 TAMPA, FL 33630-3193				1,960.35
NEOGENOMICS LABORATORIES, INC	PO BOX 864403 ORLANDO, FL 32886-4403				5,356.00
NET HEALTH SYSTEMS, INC.	PO BOX 72046 CLEVELAND, OH 44192				4,937.02
NETWORK SERVICES	29060 NETWORK PLACE CHICAGO, IL 606731290				785.37
NEUDORFER ENGINEERS, INC.	5516 1 ST AVENUE SOUTH SEATTLE, WA 98108				1,661.66
NEUWAVE MEDICAL, INC	3529 ANDERSON ST. MADISON, WI 53704				11,650.00
NOEL ALBARRAN-VILLA	2030 1/2 SUNNYSIDE MABTON RD SUNNYSIDE, WA 98944				75.00
NOEL COMMUNICATION, INC.	P.O. BOX 111 YAKIMA, WA 98907				53,796.30
NORTH STAR MHP STORAGE COLLECTION DEPT	PO BOX 530 NORTH BEND, WA 98045				125,960.00
NORTHWEST TISSUE CENTER	921 TERRY AVENUE SEATTLE, WA 98104				2,171.00
NOVARAD CORP	752 E 1180 S STE 200 AMERICAN FORK, UT 84003				1,251.36
NUAIRE INC.	NW 1483 MINNEAPOLIS, MN 55485				291.91
NUANCE COMMUNICATIONS, INC.	PO BOX 2561 CAROL STREAM, IL 60132-2561				7,509.00
NUVASIVE INC.	FILE #50678 LOS ANGELES, CA 90074-0678				46,649.69
OAKTREE PRODUCTS, INC.	610 SPIRIT VALLEY EAST CHESTERFIELD, MO 63005				219.92
OFFICE DEPOT	PO BOX 70049 LOS ANGELES, CA 90074-0049				7,446.03
OFFICE OF SUPPORT ENFORCMENT WA SUP REG	P.O. BOX 45868 OLYMPIA, WA 98504-5868				123.00
OLSON, CRAIG A. COTRONIX	7387 COUNTY 20 CALEDONIA, MN 55921				1,017.00
OLYMPUS AMERICA INC.	DEPT 0600 DALLAS, TX 75312-0600				15,582.45
ORIGIN DIAGNOSTICS, LLC	1230 ROSECRANS AVE.; SUITE 530 MANHATTAN BEACH, CA 90266				2,065.00
ORTHO-CLINICAL DIAGNOSTICS, INC	PO BOX 3655 CAROL STREAM, IL 60132-3655				86,909.80
ORTHOPIX	3451 PLANO PARKWAY LEWISVILLE, TX 75056				26,200.00
OTICON INC.	PO BOX 347996 PITTSBURGH, PA 15251-4996				10,482.00
OTIS ELEVATOR CO	PO BOX 73579 CHICAGO, IL 606737579				2,235.20
OVER THE HILL THEATRICALS	1312 SCENIC DR PROSSER, WA 99350				400.00
OWENS & MINOR	PO BOX 53523 LOS ANGELES, CA 90074-3523				90,129.75
OXARC INC.	P.O. BOX 2605 SPOKANE, WA 99220-2605				6,668.59
PACIFIC MEDICAL	212 AVENIDA FABRICANTE SAN CLEMENTE, CA 92672				2,544.15
PACIFIC MEDICAL LLC	1700 NORTH CHRISMAN ROAD TRACY, CA 95304				1,429.95
PACIFIC NORTHWEST UNIV HEALTH SCIENCES	111 UNIVERSITY PARKWAY SUITE #202 YAKIMA, WA 98901				37,500.00
PAGERDUTY.COM	600 TOWNSEND STREET SAN FRANCISCO, CA 94103				8,882.33
PALM HARBOR MEDICAL	2997 POST ROCK COURT TARPON SPRINGS, FL 346880000				2,228.90
PARAGARD DIRECT	12601 COLLECTION CENTER DRIVE CHICAGO, IL 60693				3,608.10
PARAGON 28, INC.	DEPT. V1532 DENVER, CO 80217-0180				84,594.45
PARAMOUNT COMMUNICATIONS, INC.	1236 COLUMBIA PARK TRAIL RICHLAND, WA 99352				3,032.16
PARCUS MEDICAL, LLC	6423 PARKLAND DR. SARASOTA, FL 34243				3,802.80
PARTS SOURCE INC	PO BOX 645186 CINCINNATI, OH 452645186				5,930.64
PATHOLOGY ASSOC MEDICAL LABS	P.O. BOX 2720 SPOKANE, WA 99220-4002				1,681.01
PAULA R ROWLEY	4260 STOVER RD SUNNYSIDE, WA 98944				200.00
PDC HEALTHCARE	PO BOX 71549 CHICAGO, IL 606941995				3,575.77
PEPSI COLA BOTTLING	PO BOX 111 YAKIMA, WA 989010000				1,793.20
PERFORMANCE HEALTH	PO BOX 93040 CHICAGO, IL 60673-3040				3,332.23
PETER F. STOLOFF, P.C.	5285 MEADOWS ROAD, SUITE 235 LAKE OSWEGO, OR 97035				2,892.60
PETER J. SWOFFORD TESTAME BYPASS TRUST	C/O SHIRLEY M. SWOFFORD, TRUSTEE SUNNYSIDE, WA 98944				12,108.25
PETNET SOLUTIONS, INC.	PO BOX 2714 CAROL STREAM, IL 60132-2714				5,640.00
PFIZER INC.	PO BOX 417510 BOSTON, MA 02241-7510				10,940.40
PHARMEDIUM SERVICES LLC	29104 Network Place CHICAGO, IL 60673-1291				3,779.28
PHILIPS HEALTHCARE	PO BOX 100355 ATLANTA, GA 303840355				5,942.96
PHILIPS MEDICAL SYSTEMS	P.O. BOX 100355 ATLANTA, GA 30384-0355				18,432.09
PHONAK, LLC	PO BOX 100825 PASADENA, CA 91189-0825				34,693.20
PHS MEDICAL	5729 MAIN STREET #238 SPRINGFIELD, OR 97478				161.00
PITNEY BOWES GLOBAL FINAN	PO BOX 371887 PITTSBURGH, PA 15250-7887				1,776.12
PLATT ELECTRIC SUPPLY, IN	P.O. BOX 418759 BOSTON, MA 02241-8759				1,596.91
PLSA ENGINEERING & SURVEY	521 N 20TH AVE STE 3 YAKIMA, WA 98902-1886				55,850.00
POLYMEDCO	P.O. BOX 95816 CHICAGO, IL 60694-5816				188.44
POSITIVE PROMOTIONS	PO BOX 11537 NEWARK, NJ 07101-4537				2,407.24
PPC SOLUTIONS, INC	18303 E APPLEWAY AVE SPOKANE, WA 99016				28,248.36
PRECISION DYNAMICS CORPORATION	PO BOX 71549 CHICAGO, IL 60694-1995				81.06
PRE-EMPLOY.COM, INC.	P.O. BOX 491570 REDDING, CA 96049				749.90
PREFERRED SECURITY, INC	1119 S. 68TH AVE YAKIMA, WA 98908				53.95

Sunnyside Community Hospital Association
Schedule F

Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
PREMIER HEALTHCARE SOLUTIONS, I	5882 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693				77,526.54
PRESCOTT'S INC	18940 MICROSCOPE WAY MONUMENT, CA 80132				10,748.75
PRESS GANEY	BOX 88335 MILWAUKEE, WI 53288-0335				28,910.24
PRO-ED, INC.	PO BOX 679029 DALLAS, TX 75267-9029				129.80
Prosser Chamber of Commerce	1230 BENNETT AVE PROSSER, WA 99350				315.00
PROSSER MEMORIAL HOSPITAL	723 MEMORIAL STREET PROSSER, WA 99350				326.95
PULMONARY EXCHANGE LTD PEL/VIP MED STAF	PO BOX 809258 CHICAGO, IL 60680-9258				73,350.00
PURCHASE POWER	PO BOX 371874 PITTSBURGH, PA 15250-7874				1,335.11
PUTERBAUGH GENERAL CONSTRUCTION INC.	PO BOX 158 GRANDVIEW, WA 98930				49.28
QBSI-XEROX	PO BOX 398160 SAN FRANCISCO, CA 94139-8160				1,755.07
QIAGEN, INC	19300 GERMANTOWN RD GERMANTOWN, MD 20874				11,758.66
QUANTUM MEDICAL	15800 NW 15TH AVE MIAMI, FL 33169				101.82
QUEST DIAGNOSTICS	PO BOX 912400 PASADENA, CA 91110-2400				50.40
RAFAELA DIAZ	PO BOX 661 TIETON, WA 98947				72.84
RAINIER PLASTICS, INC	PO BOX 9125 YAKIMA, WA 98909				120.07
RAINWATER, INC.	143 DIVISION GRANDVIEW, WA 98930				99.31
RAY'S MEATS INC.	P.O. BOX 9875 YAKIMA, WA 98909				6,660.43
REAL VNC LIMITED	BETJEMAN HOUSE, 104 HILLS ROAD CAMBRIDGE, 1LQ				1,891.79
RECO	REFRIGERATION EQUIPMENT PO BOX 9217 YAKIMA, WA 989090000				1,224.91
RICHARD J BAGGERLY	2030 MIDVALE RD MABTON, WA 98935				517.22
ROBINS, REBECCA J EARLY BIRD CODING	3304 SHARON WAY YAKIMA, WA 98902				632.00
ROCHE DIAGNOSTICS CORP INC	MAIL CODE 5021 PO BOX 660367 DALLAS, TX 752660367				8,369.86
RODDA PAINT CO	3107 N MARINE DRIVE PORTLAND, OR 97203				124.28
RODRIGUEZ, BRYAM RODRIGUEZ CLEANING II	119 ALPINE WAY #B YAKIMA, WA 98908				8,000.00
RORY CALHOON	126315 W OLD HWY PROSSER, WA 99350				95.54
ROTARY CLUB OF YAKIMA	PO BOX 464 YAKIMA, WA 98907				940.00
ROTO ROOTER-WA	8524 W GAGE BLVD A-299 KENNEWICK, WA 99336				631.91
ROYAL CUP, INC.	PO BOX 170971 BIRMINGHAM, AL 35217-0971				643.28
RR DONNELLEY & SONS COMPA	PO BOX 932721 CLEVELAND, OH 44193				312.58
RURAL PHYSICIANS GROUP	10624 S EASTERN AVE SUITE A263 HENDERSON, NV 890520000				64,173.12
SAFEWAY INC.	PO BOX 742918 LOS ANGELES, CA 90074-2918				1,206.39
SANOFI PASTEUR, INC.	12458 COLLECTIONS CENTER DR. CHICAGO, IL 60693				90,632.02
SCHEEF & STONE, LLP	500 N AKARD STREET, SUIT DALLAS, TX 75201				582.60
SEARS COMMERCIAL DEPT 53 - 4012697403	P.O. BOX 78037 PHOENIX, AZ 85062-8037				431.59
SECURITY MINI STORAGE	PO BOX 247 GRANDVIEW, WA 98930				6,240.00
SECURITY SPECIALTIES, LLC	PO BOX 10086 YAKIMA, WA 98909				175.00
SENSORS SAFETY PRODUCTS,	6003 CHAPEL HILL ROAD STE 117 RALEIGH, NC 27607				383.26
SENSOSCIENTIFIC, INC	685 COCHRAN ST. SUITE 200 SIMI VALLEY, CA 93065				1,739.35
SERVICEMASTER PROFESSIONA	1240 INDUSTRIAL WAY UNION GAP, WA 98903				1,189.83
SHARE PREGNANCY & INFANT LOSS SUPPORT, INC	402 JACKSON STREET SAINT CHARLES, MO 63301				300.00
SHARN ANESTHESIA, INC. DEPT 2459	PO BOX 11407 BIRMINGHAM, AL 35246-2459				308.06
SHERRY JOHNSON (FNP)	2628 BEESCREEK RD RIDGELAND, SC 29936				496.42
SHOCKWAVE MEDICAL, INC.	48501 WARM SPRINGS BLVD, SUITE 108 FREMONT, CA 94539				2,750.00
SHRED-IT US JV LLC	28883 NETWORK PLACE CHICAGO, IL 60673-1288				12,110.24
SIMPLE BOX STORAGE, LLC	PO BOX 704 LYNDEN, WA 98264-0704				431.60
SLEEPELITE SLEEP DIAGNOST OF OK, LLC	16675 ROSEROCK CIRCLE CHOCTAW, OK 73020				33,800.00
SME SOLUTIONS, LLC	10107 S TACOMA WAY SUITE A-2 LAKEWOOD, WA 98499				1,040.27
SMILEMAKERS	P.O. BOX 2543 SPARTANBURG, SC 29304				300.43
SMITH & NEPHEW ORTHOPEDIC DIVISIONS	1450 BROOKS RD MEMPHIS, TN 38116				185,254.21
SMITH AND NEPHEW ENDOSCOPY	PO BOX 60333 CHARLOTTE, NC 282600333				25,478.53
SMITH SECKMAN REID, INC	2995 SIDCO DRIVE NASHVILLE, TN 37204				27,000.00
SMITHS MEDICAL ASD INC	PO BOX 7247-7784 PHILADELPHIA, PA 191707784				441.68
SOURCEMED ATTN ACCOUNTS RECEIVABLE	PO BOX 11407 BIRMINGHAM, AL 35246-0927				45,526.86
SOUSLEY SOUND INC	1005 TIETON DRIVE YAKIMA, WA 989027604				621.50
SPECIAL CLEANING SERVICES/A	2002 ENGLEWOOD AVE SUITE E YAKIMA, WA 98902				4,124.16
SPECIALTY CENTER MOB LLC	1214 N 20TH AVENUE YAKIMA, WA 98902				49,502.19
SPRAGUE PEST CONTROL	P.O. BOX 2222 TACOMA, WA 98401-2222				274.27
St Lukes Clinics	915 E 1st St Duluth, MN 55805				35.00
STAFF CARE	PO BOX 281923 ATLANTA, GA 303841923				(794.50)
STANDARD PAINT AND FLOORING	409 W YAKIMA AVE YAKIMA, WA 98902				1,924.88
STAPLES ADVANTAGE	PO BOX 660409 DALLAS, TX 75266-0409				10,300.80
STAPLES TECHNOLOGY SOLUTIONS	P.O. BOX 95230 CHICAGO, IL 60694				2,291.83
STAPLES, INC	500 STAPLE DRIVE FRAMINGHAM, MA 1702				18.98
STERICYCLE INC	P.O. BOX 6578 CAROL STREAM, IL 60197-6578				53.43
STERILMED INC	62792 COLLECTIONS CTR DR CHICAGO, IL 606930627				15,842.08
STERIS CORPORATION INC	LOCKBOX # 771652 1652 SOLUTION CENTER CHICAGO, IL 606771006				12,645.28
STRYKER COMMUNICATIONS	22491 NETWORK PLACE CHICAGO, IL 60673				547.56
STRYKER ENDOSCOPY CO STRYKER SALES CORP	PO BOX 93276 CHICAGO, IL 60673-3276				32,984.00
STRYKER FINANCE	25652 NETWORK PLACE CHICAGO, IL 606730000				34,919.95
STRYKER INSTRUMENTS	PO BOX 70119 CHICAGO, IL 606730119				509.94

Sunnyside Community Hospital Association
Schedule F

Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
STRYKER INSTRUMENTS	P.O. BOX 70119 CHICAGO, IL 60673-0119				97,274.70
STRYKER MEDICAL	P.O. BOX 93308 CHICAGO, IL 60673-3308				68,803.39
STRYKER ORTHOPAEDICS	PO BOX 93213 CHICAGO, IL 606733213				220,626.36
STRYKER SPINE	21912 NETWORK PLACE CHICAGO, IL 60673-1912				225,594.99
SUNNYSIDE EMERGENCY GROUP A PROF L.L.C.	PO BOX 677979 DALLAS, TX 75267-7979				1,417.80
SUNNYSIDE HIGH SCHOOL ASB	Unknown				100.00
SUNNYSIDE HIGH SCHOOL GRIZZLY BOOSTER CLUB	Unknown				7,500.00
SUNNYSIDE INN ATTN DON VLIENER	804 E EDISON SUNNYSIDE, WA 98944				151.66
SURGICAL NEUROMONITORING PLLC	PO BOX 5542 PITTSBURGH, PA 15206				105,762.50
SURGICAL NOTES MDP, LP	3100 MONTICELLO AVE., SUITE 45 DALLAS, TX 75205				1,027.20
SURGICAL PRODUCT SOLUTIONS	643 FIRST AVE, SUITE 200 PITTSBURGH, PA 15219				21,498.26
SYNERTX INC	7540 N 19TH AVE #200 PHOENIX, AZ 85021-7967				169,050.08
SYNTHE (U.S.A.)	P.O. BOX 8538-662 PHILADELPHIA, PA 19171-0662				39,533.56
SYSCO	PO BOX 1610 WILSONVILLE, OR 970700000				27,732.91
SYSTEMEX AMERICA INC	28241 NETWORK PL CHICAGO, IL 60673-1282				30,330.23
TAP MEDICAL PRODUCTS INC	704 228TH AVE NE #684 SAMMAMISH, WA 980740000				1,141.53
TELEFLEX MEDICAL	PO BOX 601608 CHARLOTTE, NC 282600000				13,065.22
TELESPECIALISTS, LLC	9110 COLLEGE POINTE CT FORT MYERS, FL 33919				5,200.00
TENACORE HOLDINGS, INC.	1525 E EDINGER AVE SANTA ANA, CA 92705				1,488.37
TERUMO MEDICAL CORPORATION	2101 COTTONTAIL LANE SOMERSET, NJ 08873 0				3,200.00
THE AMERICAN COLL OF OB AND GYN	PO BOX 826312 PHILADELPHIA, PA 19182-6312				142.25
THE CARRINGTON COMPANY	PO BOX 1328 EUREKA, CA 95502				84,318.00
THE DENTAL BOX, LLC	3400 EAST MCDOWELL PHOENIX, AZ 85008				645.62
THE HEIGHTS ON GRANDVIEW, LLC	220 WEST GRANDVIEW AVE APT A-11 SUNNYSIDE, WA 98944				3,247.19
THE KULLMAN FIRM	1100 POYDRAS ST., SUITE 1600 NEW ORLEANS, LA 70163-1600				15,344.20
The Lockshop	1612 E. Edison Ave. Sunnyside, WA 98944				43.16
THE PARTY CONNECTION	2807 W WASHINGTON AVE YAKIMA, WA 98903				643.25
THREE M COMPANY 3M VXC5717	PO BOX 844127 DALLAS, TX 75284-4127				841.86
TIDI/CONTOUR FABRICATORS, INC	PO BOX 776290 CHICAGO, IL 60677-6290				1,135.31
TOSHIBA AM. MEDICAL SYSTEMS	P.O. BOX 91605 CHICAGO, IL 60693				16,392.16
TREASURE VALLEY COFFE CO COLUMBIA BASIN	PO BOX 6145 KENNEWICK, WA 99336				265.04
TREBROM COMPANY, INC	5506 35TH AVE NE SEATTLE, WA 98105				31,875.10
TRIMED	PO BOX 55189 VALENCIA, CA 913850189				6,624.00
TRI-TECH, INC	8770 Trade Street Leland, NC 28451				114.00
TYPENEX MEDICAL LLC	303 EAST WACKER DRIVE SUITE 1030 CHICAGO, IL 60601				3,676.56
TZ MEDICAL INC	17750 SW UPPER BOONES FERRY ROAD SUITE 150 PORTLAND, OR 97224				1,055.93
U.S. BANK	Unknown				1,550.51
U.S. BANK EQUIPMENT FINANCE	PO BOX 790448 ST LOUIS, MO 63179-0448				1,400.94
U.S. CELLULAR	DEPT. 0205 PALATINE, IL 60055-0205				468.66
ULTRA-CHEM INC.	PO BOX 14608 LENEXA, KS 66285				256.68
ULTRALING HEALTHCARE SOLUTIONS,	38 W 21ST ST FL 6 NEW YORK, NY 10010-6975				808.50
UNION AVENUE COMPOUNDING PHARMA	2302 S UNION AVE TACOMA, WA 98405				273.00
UNITED STATES DRUG TESTING LABORATORIES	1700 S. MOUNT PROSPECT ROAD DES PLAINES, IL 60018-1804				687.00
UNITED STATES ENDOSCOPY GROUP,	5976 HEISLEY RD MENTOR, OH 44060				234.39
UNITRON HEARING	PO BOX 86 MINNEAPOLIS, MN 55486-2392				610.00
UNIVERSAL BACKGROUND SCREENING,	PO BOX 5920 SCOTTSDALE, AZ 85261				12,255.25
UNIVERSITY OF WASHINGTON TASP PROGRAM	750 REPUBLICAN STREET SEATTLE, WA 98109				2,400.00
US HEALTHWORKS	PO BOX 404467 ATLANTA, GA 303840000				124.83
UTAH MEDICAL PRODUCTS	7043 SOUTH 300 WEST MIDVALE, UT 84047				960.85
V.K. POWELL CONSTRUCTION LLC	PO BOX 10295 YAKIMA, WA 98909				9,564.19
VALLEY AUTO PARTS	P.O. BOX 809 SUNNYSIDE, WA 98944				281.50
VALLEY LOCK & KEY SERVICE	3402 W WASHINGTON AVE, #118 YAKIMA, WA 98903				271.14
VALUE MANAGEMENT GROUP, LLC VMG HEALTH	PO BOX 674046 DALLAS, TX 75267-4046				14,350.00
VAN WINGERDEN LANDSCAPING IRRIGATIO INC	1291 CEMETERY ROAD SUNNYSIDE, WA 98944				45.09
VEE TECHNOLOGIES, INC	PO BOX 732709 DALLAS, TX 75373-2709				44,918.38
VENTURA MEDSTAFF, LLC	PO BOX 3544 OMAHA, NE 68103-0544				15,594.00
VERATHON MEDICAL	PO BOX 935117 ATLANTA, GA 31193-5117				2,292.01
VERIZON WIRELESS	PO BOX 660108 DALLAS, TX 75266-0108				2,325.74
VINTAGE HEALTH RESOURCES, INC.	2032 EXETER ROAD, SUITE 2 GERMANTOWN, TN 38138				44,372.96
VIRTUAL RADIOLOGIC PROF OF TEXA	25983 NETWORK PLACE CHICAGO, IL 60673-1259				97,443.72
VISSER GARY A. DVM EASTSIDE STORAGE LLC	106 S 9TH ST. SUNNYSIDE, WA 98944				3,180.00
VISTA STAFFING SOLUTIONS	FILE 50834 LOS ANGELES, CA 90074-0834				91,890.43
VIVORTE	657 S HURSTBOURNE PKWY #204 LOUISVILLE, KY 40222				4,429.69
VSEE LAB, INC.	3188 KIMLEE DRIVE, SUITE 100 SAN JOSE, CA 95132				3,588.00
VVAIRE MEDICAL INC	29429 NETWORK PLACE CHICAGO, IL 60673-1294				2,953.14
WA HOSP WORKERS COMPENSATION TR NUMBER	999 3RD AVE STE 1400 SEATTLE, WA 98104-4041				243,323.54
WALDMAN, RICHARD WALDMANS PRODUCE	PO BOX 1552 ZILLAH, WA 98953				2,867.85
WAL-MART COMMUNITY BRC	P.O. BOX 530933 ATLANTA, GA 30353-0933				286.81
WASHINGTON HOSPITAL SVCS. INC	999 THIRD AVENUE, SUITE 1400 SEATTLE, WA 98104				25,197.27
WASHINGTON STATE DEPARTMENT OF HEALTH	PO BOX 1099 OLYMPIA, WA 985071099				11,667.60

Sunnyside Community Hospital Association
Schedule F

Vendor Name	Vendor Address	Cont/Unliq/Disp			Total
		C	U	D	
WASHINGTON STATE PATROL ACCT REC	P.O. BOX 42602 OLYMPIA, WA 98504-2602				600.00
WASHINGTON STATE PHARMACY	ASSOCIATION 411 WILLIAMS AVE S RENTON, WA 980570000				648.00
WCP SOLUTIONS	PO BOX 84145 SEATTLE, WA 98124				(7.33)
WEATHERBY LOCUMS, INC.	PO BOX 972633 DALLAS, TX 75397-2633				137,526.01
WELLS FARGO FINANCIAL LEA	P.O. BOX 10306 DES MOINES, IA 50306-0306				11,180.78
WERFEN USA LLC	PO BOX 347934 PITTSBURGH, PA 152514934				46,809.61
WEST INTER	DEPARTMENT #1343 DENVER, CO 80256-0001				5,243.95
WESTERN PEAKS CALIBRATION SERVICES	PO BOX 550 LA VETA, CO 81055				1,560.00
WESTONE LABORATORIES	PO BOX 15100 COLORADO SPRINGS, CO 80935				100.73
WIDE HOLLOW DEVELOPMENT LLC	PO BOX 9831 YAKIMA, WA 98909				19,505.98
WIDEX USA, INC.	PO BOX 123721 DALLAS, TX 75312-3721				438.00
WILDERNESS MEDICAL STAFFING	1124 W RIVERSIDE AVE SUITE 215 SPOKANE, WA 99201				83,151.17
WILLOUGHBY, CLYDE DBA VALLEY SPRAY, LLC	P.O. BOX 237 GRANDVIEW, WA 98930				2,411.57
WOLTERS KLUWER	PO BOX 1590 HAGERSTOWN, MD 21740				7,522.63
WORKPLACE PREVENTIONS SOLUTIONS	PO BOX 724 DAVENPORT, WA 99122				1,050.00
WRIGHT MEDICAL TECHNOLOGY	PO BOX 503482 ST LOUIS, MO 63150-3482				40,422.60
XEROX CORPORATION INC	PO BOX 7405 PASADENA, CA 911097405				939.11
YAKIMA COUNTY PUBLIC WORKS	128 N 2ND ST 4TH FLR YAKIMA, WA 989010000				100.00
YAKIMA COUNTY TREASURER	P.O. BOX 22530 YAKIMA, WA 98907-2530				76,924.95
YAKIMA HERALD REPUBLIC	PO BOX 9668 YAKIMA, WA 989090000				1,224.44
YAKIMA REGIONAL	110 S. 9TH AVENUE YAKIMA, WA 98902				7,495.44
Yakima Steak Company	221 W Yakima Ave Yakima , WA 98902				171.76
YAKIMA VALLEY COMMUNITY COLLEGE	PO BOX 22520 YAKIMA, WA 989072520				1,000.00
YAKIMA VALLEY RADIOLOGY	PO BOX 2925 YAKIMA, WA 989072925				300.00
ZEROWET, INC.	P.O. BOX 4375 PALOS VERDES PENINSULA, CA 90274				152.80
ZIMMER US INC	14235 COLLECTIONS CTR DR CHICAGO, IL 606930000				9,782.88
ZIRMED, INC.	1311 SOLUTIONS CENTER CHICAGO, IL 60677-1311				55.00
ZOLL MEDICAL CORP	PO BOX 27028 NEW YORK, NY 100877028				2,291.85
					17,033,355.42

Fill in this information to identify the case:

Debtor name Sunnyside Community Hospital Association
United States Bankruptcy Court for the Eastern District of Washingt
(State)
Case number (if known): 19-01191-11 Chapter

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

	See attached chart	See attached chart
2.1	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	
2.2	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	
2.3	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	
2.4	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	
2.5	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	

Sunnyside Community Hospital Association
Form 206G Executory Contract List
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Contract	Contract Type	Contract Number	Term Date
A. T. Still University, Kirksville College of Osteopathic Medicine	Residency Program agreement		10/21/15, Auto Renew annually
Big Bend Community College	Affiliation Agreement		12/31/2019
Boise State College of Health Sciences	Affiliation Agreement		11/13/17, Auto Renew annually
Central Washington Family Medicine Residency Program	Residency Program agreement		8/22/17, Auto Renew annually
Charter College Medical Assistant Program	Affiliation Agreement		6/21/2011, Auto Renew annually
Columbia Basin College Health Sciences Programs	Affiliation Agreement		1/23/2013, Auto Renew annually
Georgetown University School of Nursing	Affiliation Agreement		7/11/2017, Auto Renew annually
Gonzaga University School of Nursing	Affiliation Agreement		7/2/2015, Auto Renew annually
Idaho State University School of Nursing	Affiliation Agreement		3/21/2018, Auto Renew annually
Midwestern University (Nurse Anesthesia)	Affiliation Agreement		12/31/2011, Auto Renew annually
Multicare Health System Residency Program	Residency Program agreement		12/17/2015, Auto Renew annually
NYU Langone Hospital	Residency Program - Dental		12/20/2017, Auto renew annually
Pacific Northwest University of Health Sciences	Affiliation Agreement		5/25/2007, Auto Renew annually
Pima Medical Institute Respiratory Therapy Program	Affiliation Agreement		10/4/2012, Auto Renew annually
Soillus Northwest Family Medicine Residency Program (YVFWC)	Residency Program agreement		6/29/2018, Auto Renew annually
University of Cincinnati College of Nursing University of Washington PA program (Medex)	Residency Program agreement		7/18/2017, Auto Renew annually
Western University of Health Sciences/Physician Assistant Program	Affiliation Agreement		3/30/2018, Auto Renew annually
YVCC Medical Assistant Program	Affiliation Agreement		5/13/2014, Auto Renew annually

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YVCC Radiologic Sciences Program	Affiliation Agreement		Auto Renew annually
Yakima Valley Technical Skills Center (YV Tech)	Affiliation Agreement		12/1/2013, Auto Renew annually
Alliance Recruiting Resources	Locum Tenens		Auto Renew annually
Clinical Colleagues (Nurse Anesthesia)	Locum Tenens		Auto Renew annually
Comp Health	Locum Tenens		Auto Renew annually
Fusion Medical Staffing	Contract Labor		Auto Renew Annually
Hayes Locums	Locum Tenens		Auto Renew annually
Locumtenens.com	Locum Tenens		Auto Renew annually
Pulmonary Exchange	Contract Labor		Auto Renew annually
Staffcare	Locum Tenens		Auto Renew annually
United Anesthesia	Locum Tenens		Auto Renew annually
Vintage Nursing	Contract Labor		Auto Renew annually
Vista Staffing Solutions	Contract Labor		Auto Renew annually
Weatherby Healthcare	Locum Tenens		Auto Renew annually
Wilderness Medical Staffing	Locum Tenens		Auto Renew annually
Kristin Bond, MD	Administrative Service Agreement (MEC)		12/31/19
Ana Garcia, MD	Administrative Service Agreement (MEC)		12/31/19
Tim Calayan, MD	Administrative Service Agreement (MEC)		12/31/19
David Shoemaker, MD	Administrative Service Agreement (MEC)		12/31/19
3M	Business Associate Agreement (BAA)		12/31/19
Applied Statistics and Management Inc. (MD-Staff credentialing software)	BAA – Credentialing services		Auto Renew annually

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June 19, 2019

Argus Insurance (now HUB International)	BAA – Insurance Services		Auto Renew annually
Astria Sunnyside Foundation	BAA		Auto Renew annually
Blue Mountain Oncology Program	BAA – Oncology/Pathology		Auto Renew annually
Butler Snow LLP	BAA - Legal		Auto Renew annually
City of Sunnyside	BAA		Auto Renew annually
City of Sunnyside Ambulance Transport Agreement	BAA- Ambulance Transport		11/1/2016, Auto Renew annually
Collective Medical	BAA- ED Patient Data Subscription Service		Auto Renew annually
DaVita	BAA - Medical Directorship Agreement		Auto Renew annually
DZA and Associates	BAA - Accounting		Auto Renew annually
Harlan Halma, MD	BAA – Physician affiliation agreement		Auto Renew annually
Health Tech Management Services	BAA – Management Services		Auto Renew annually
HT-GAF Holdings, LLC (Gaffey Healthcare)	BAA – Coding Services		Auto Renew annually
ID Inc.	BAA – Incident Reporting		Auto Renew annually
Integra Information Technologies	BAA – Coding Services		Auto Renew annually
Kristin Bond, MD	BAA – Committee Chair		Auto Renew annually
Novara	BAA		Auto Renew annually
Novarad	BAA – Imaging Services		Auto Renew annually
Valley Coding	BAA – Coding Services		Auto Renew annually
Washington Hospital Services	BAA – Peer review services		Auto Renew annually
Yakima Adjustment Services	BAA – Collection agency		Auto Renew annually
Yakima Valley Farmworkers Clinic	BAA – physician affiliation agreement		Auto Renew annually
Blue Mountain Oncology Program	Contract Services- cancer registry abstraction		12/31/2020

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Cintas	Contract Services- environmental services		Auto Renew annually
CIOX	Contract Services- release of info services		Auto Renew annually
Copiers NW	Contract Services – Copier Maintenance		Auto Renew
Department of Health	Personal Service Contract – Immunization Sharing	3202	12/31/2019
DSHS-Division of Disability Determination Services	Personal Service Contract	1935-54988	8/31/2022
DSHS-Division of Disability Determination Services	Personal Service Contract	1935-54989	4/30/2023
Engage	Contract Services – Education		8/31/2021
GCACH Practice Transformation Agreement	Professional Services Contract – Integrated Managed Care		7/15/2020
Grandview Heights Apartments	Residential Lease	Units A31, B21, C21, D23	Auto Renew annually
Harmony Healthcare	Contract Services- coding services		Auto Renew annually
Hawkins Edwards	Residential Lease	2705 E Lincoln, Suites A-D	Auto Renew annually
Healogics	Contract Services – Wound Care		10/29/2013, Auto Renew annually
Intervision	Contract Services – IT		Auto Renew annually
ISOSCAN	Contract Services – Mobile PET/CT Scan		Auto Renew annually
Language Line	Contract Services- Interpretive services		3/22/2020
Lloyd Butler	Residential Lease	Grandview Medical Center	Auto Renew Annually
LRS	Contract Services – Staffing Agreement		Auto Renew annually
Macro Helix 340b	Contract Services		Auto Renew annually
Microsoft	Licensure – Office Software		Auto Renew, 3 year periods
Mid Valley Nephrology- Vamsi Kanneganti	Professional Service Agreement		10/31/19
Mischelle & John Booth	Residential Lease		Month to month
MSDS Online	Contract Services – MSDS database		Auto Renew annually

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Nighthawk Radiology (VRAD)	Contract Services - VRAD		Auto Renew annually
Nuance	Contract Services- transcription		With Cary for signature
Oxarc	Contract Service- Gases for OR		9/17/2024
Press Ganey	Contract Services – Data Analysis and Reporting		Auto renew annually
Providence Health Services – Pediatric Echocardiogram and Electrocardiogram Interpretation	Professional Service Agreement		Auto Renew annually
Providence Health Systems	Professional Services Agreement – PHI Sharing		Auto Renew annually
Pulmonary Exchange	Contract Services – Staffing Agreement		Auto Renew annually
Pulmonary Exchange	Staffing Agreement		Auto Renew annually
Region 8 Healthcare Coalition Regional Plan	MOU		Auto Renew Annually
Rural Physician Group	Hospital Services Agreement		Auto Renew annually
Schumacher Clinical Group	Hospital Services Agreement		Auto Renew annually
Sleep Elite	Professional Services Agreement – Sleep Lab		7/17/2013, Auto Renew annually
Stericycle	Contract Services – Environmental Services		Auto Renew annually
Team Health	Hospital Services -- Confidential Information Agreement		Auto Renew annually
Telespecialists	Hospital Services Agreement – Telemedicine		Auto Renew annually
The CAH Network, dba NW Rural Health Network	Membership Agreement		Auto Renew annually
The Compliance Team	Accreditation Contract – Rural Health Clinic Accreditation	DLT-2017-194	6/29/2019
VEE Technologies	Contract Services- coding services		Auto Renew annually
Wolters Kluwer	Licensure Agreement – Clinical Database	001-00-50235918	Auto Renew annually

Sunnyside Community Hospital Association
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Yakima Health District BCCHP	Contract Services – Low income women’s health screenings		Auto Renew annually
YV Tech Skills Center	Affiliation Agreement		5/2021
GE/Optima 660	CT	1-178498260084	10/2022
GE/MR450W	MRI	99990574A	10/2022
GE Lunar	DEXA	1-161579589633	10/2022
GE/9900	C-ARM	1-178498260084	10/2022
GE/9800	C-ARM		NOT ON CONTRACT
GE/Definium 8000	X-Ray	99991127B	10/2022
Carestream DR retrofit	X-Ray	1-178498260084	10/2022
Toshiba/Kalare	X-Ray		NOT ON CONTRACT
GE/AMX4 w/mobile retrofit	X-Ray		NOT ON CONTRACT
GE/AMX4 w/mobile retrofit	Portable	1- 178498260084(only retrofit & Detector on contract	10/2022
GE/AMX4	Portable	NOT ON CONTRACT/NOT DIGITAL	NOT ON CONTRACT
GE Infinia	Nuclear Medicine	1-178498260084	10/2022
GE/Logiq E9	Ultrasound	1-178498260084	10/2022
GE/Logiq E9	Ultrasound	1-178498260084	10/2022
GE/S7	Ultrasound-ER	1-178498260084	10/2022
GE/Logiq E9	Ultrasound (vasc)	4C97206	10/2022
Vascupro	ABI Machine		
GE/Vivid E90 and TEE Probe	Echo Ultrasound	1-178498260084	10/2022
Carestream 975	CR	1-178498260084	10/2022
Amrad fmt/Carestream DR retrofit	X-Ray Ortho	XRAY NOT ON CONTRACT, DR ON WARRANTY	
Hologic Selenia	Mammography	129402-1-3RCFE8	9/2020
Cenova CAD	Mammo/CAD	129402-1-3RCFE8	9/2020
GE OptimaCL323i	IR/Cath Lab	1-178498260084	10/2022

Sunnyside Community Hospital Association

Schedule G

Provider	Contract Expiration Date	Mailing Address
Alvord, Jon PA-C	02/07/24	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Alvord, Lori MD	12/11/22	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Antoci, Tatiana MD	09/01/22	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Antoci, Valentin MD	09/01/22	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Atteberry, David MD	n/a	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Brizuela, Miguel MD	08/18/19	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Bronson, Davis MD	05/12/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Calayan, Vlastimil MD	09/01/20	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Cleland-Zamudio, Suzanne MD	10/01/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Commet, Vern NP	05/16/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Diaz, Selena FNP-C	04/16/22	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Drazin, Doniel MD	11/07/19	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Furan, Paul PA-C	06/13/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Garcia, Ana MD	07/26/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902

Sunnyside Community Hospital Association

Schedule G

Provider	Contract Expiration Date	Mailing Address
Gardner, Mark PA-C	01/01/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Gray, Jody ARNP	12/15/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Grunert, Peter MD	06/25/23	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Gustavson, Andrew MD	08/13/23	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Herron, Karena NP	01/15/23	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
LeCheminant, Jeff DPM	05/12/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Livingston, Chase DO	08/13/22	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Madej, Anna MD	06/21/19	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Martincic, Danko MD	03/18/20	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Riaz, Muhammad MD	09/15/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Rodriguez, Ben PA-C	10/31/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Shoemaker, David MD	06/01/21	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Titus, Deborah FNP-C	10/01/20	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Tracy Schnarrenberger, MD (Berg)	06/30/23	C/O Astria Health 900 W. Chestnut Yakima, WA 98902

Sunnyside Community Hospital Association

Schedule G

Provider	Contract Expiration Date	Mailing Address
Treece, Gary MD	10/31/19	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Ward, Brad MD	07/09/23	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Wells, Robert MD	04/01/24	C/O Astria Health 900 W. Chestnut Yakima, WA 98902
Zoric, Christina AGACNP	04/22/24	C/O Astria Health 900 W. Chestnut Yakima, WA 98902

Fill in this information to identify the case:

Debtor name Sunnyside Community Hospital Association
 United States Bankruptcy Court for the: Eastern District of Washingt
(State)
 Case number (if known): 19-01191-11

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing address	Name	<i>Check all schedules that apply:</i>
2.1	_____	See Attached Chart Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5	_____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	_____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Schedule H
Co-Debtors

Debtor	Case Number	Lapis Advisors	UMB Bank	Mid-Cap Financial	VK Powell Construction	MBI		Fidelity Title	Stryker Corporation
						Construction Services	Construction Services		
Astria Health	(19-01189-11)	x			x		x		
Glacier Canyon, LLC	(19-01193-11)	x	x						
Kitchen and Bath Furnishings, LLC	(19-01194-11)	x	x						
Oxbow Summit, LLC	(19-01195-11)	x	x						
SHC Holdco, LLC	(19-01196-11)	x	x	x					
SHC Medical Center-Toppenish	(19-01190-11)	x	x	x	x		x	x	x
SHC Medical Center-Yakima	(19-01192-11)	x	x	x	x			x	x
Sunnyside Community Hospital Association	(19-01191-11)	x	x					x	x
Sunnyside Community Hospital Home Medical Supply, LLC	(19-01197-11)	x	x						
Sunnyside Home Health	(19-01198-11)	x	x						
Sunnyside Professional Services, LLC	(19-01199-11)								
Yakima Home Care Holdings, LLC	(19-01201-11)	x	x	x					
Yakima HMA Home Health, LLC	(19-01200-11)	x	x	x					

Each "X" Indicated that Creditor has a security interest

Fill in this information to identify the case and this filing:

Debtor Name Sunnyside Community Hospital Association
United States Bankruptcy Court for the: Eastern District of WA
(State)
Case number (if known): 19-01191-11

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING - Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

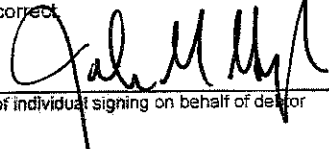
I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 6/19/2019
MM / DD / YYYY

x 
Signature of individual signing on behalf of debtor

John M. Gallagher
Printed name

President & CEO
Position or relationship to debtor

