

UNITED STATES BANKRUPTCY COURT

Central DISTRICT OF California

In Re. Beverly Community Hospital Association

§
§
§
§

Debtor(s)

Case No. 23-12359

Lead Case No. 23-12359

☒ Jointly Administered

Monthly Operating Report

Chapter 11

Reporting Period Ended: 09/30/2023

Petition Date: 04/19/2023

Months Pending: 5

Industry Classification:

6	2	2	1
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Reporting Method:

Accrual Basis ☒

Cash Basis ☐

Debtor's Full-Time Employees (current):

444

Debtor's Full-Time Employees (as of date of order for relief):

632

Supporting Documentation (check all that are attached):

(For jointly administered debtors, any required schedules must be provided on a non-consolidated basis for each debtor)

- ☒ Statement of cash receipts and disbursements
- ☒ Balance sheet containing the summary and detail of the assets, liabilities and equity (net worth) or deficit
- ☒ Statement of operations (profit or loss statement)
- ☒ Accounts receivable aging
- ☒ Postpetition liabilities aging
- ☒ Statement of capital assets
- ☒ Schedule of payments to professionals
- ☒ Schedule of payments to insiders
- ☐ All bank statements and bank reconciliations for the reporting period
- ☐ Description of the assets sold or transferred and the terms of the sale or transfer

/s/ Howard M. Ehrenberg

Signature of Responsible Party

11/30/2023

Date

Howard M. Ehrenberg

Printed Name of Responsible Party

1875 Century Park East, Suite 1900 Los Angeles, CA

90067

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore § 1320.4(a)(2) applies.



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Debtor's Name Beverly Community Hospital Association

Case No. 23-12359

Part 1: Cash Receipts and Disbursements		Current Month	Cumulative
a.	Cash balance beginning of month	\$10,532,465	
b.	Total receipts (net of transfers between accounts)	\$22,151,744	\$66,398,310
c.	Total disbursements (net of transfers between accounts)	\$9,779,093	\$67,252,812
d.	Cash balance end of month (a+b-c)	\$22,905,116	
e.	Disbursements made by third party for the benefit of the estate	\$24,020,852	\$24,020,852
f.	Total disbursements for quarterly fee calculation (c+e)	\$33,799,945	\$91,273,664

Part 2: Asset and Liability Status (Not generally applicable to Individual Debtors. See Instructions.)		Current Month
a.	Accounts receivable (total net of allowance)	\$18,033,310
b.	Accounts receivable over 90 days outstanding (net of allowance)	\$4,463,369
c.	Inventory (Book <input type="radio"/> Market <input type="radio"/> Other <input checked="" type="radio"/> (attach explanation))	\$0
d.	Total current assets	\$44,504,247
e.	Total assets	\$51,495,324
f.	Postpetition payables (excluding taxes)	\$17,281,301
g.	Postpetition payables past due (excluding taxes)	\$3,273,929
h.	Postpetition taxes payable	\$0
i.	Postpetition taxes past due	\$0
j.	Total postpetition debt (f+h)	\$17,281,301
k.	Prepetition secured debt	\$67,064,945
l.	Prepetition priority debt	\$0
m.	Prepetition unsecured debt	\$47,744,145
n.	Total liabilities (debt) (j+k+l+m)	\$132,090,391
o.	Ending equity/net worth (e-n)	\$-80,595,067

Part 3: Assets Sold or Transferred		Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	\$38,313,618	\$38,313,618
b.	Total payments to third parties incident to assets being sold/transferred outside the ordinary course of business	\$24,020,852	\$24,020,852
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$14,292,767	\$14,292,767

Part 4: Income Statement (Statement of Operations) (Not generally applicable to Individual Debtors. See Instructions.)		Current Month	Cumulative
a.	Gross income/sales (net of returns and allowances)	\$4,622,110	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	\$1,384,240	
c.	Gross profit (a-b)	\$3,237,870	
d.	Selling expenses	\$1,326,186	
e.	General and administrative expenses	\$554,791	
f.	Other expenses	\$66,979,103	
g.	Depreciation and/or amortization (not included in 4b)	\$177,863	
h.	Interest	\$117,202	
i.	Taxes (local, state, and federal)	\$0	
j.	Reorganization items	\$253,431	
k.	Profit (loss)	\$-66,170,706	\$87,697,570

Debtor's Name Beverly Community Hospital Association

Case No. 23-12359

Part 5: Professional Fees and Expenses

a.			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative	
	Debtor's professional fees & expenses (bankruptcy) <i>Aggregate Total</i>		\$0	\$315,053	\$0	\$200,000	
	<i>Itemized Breakdown by Firm</i>						
		Firm Name	Role				
	i	Kurtzman Carson Consultant	Other	\$0	\$115,053	\$0	\$0
	ii	Sheppard, Mullin, Richter	Lead Counsel	\$0	\$0	\$0	\$0
	iii	Portage Point Partners, LLC	Financial Professional	\$0	\$0	\$0	\$0
	iv	Orrick Herrington & Sutcliffe	Special Counsel	\$0	\$0	\$0	\$0
	v	Bryan Cave Leighton Paisner	Other	\$0	\$200,000	\$0	\$200,000
	vi	Dentons US LLP	Other	\$0	\$0	\$0	\$0
	vii	Greenberg Traurig, LLP	Other	\$0	\$0	\$0	\$0
	viii	Sill Cummins & Gross P.C	Other	\$0	\$0	\$0	\$0
	ix	Colliers International Greater	Other	\$0	\$0	\$0	\$0
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	xi						
	xii						
	xiii						
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Debtor's Name Beverly Community Hospital Association

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b.			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
	Debtor's professional fees & expenses (nonbankruptcy) <i>Aggregate Total</i>		\$0	\$5,372	\$0	\$5,372
	<i>Itemized Breakdown by Firm</i>					
	Firm Name	Role				
i	Seyfarth and Shaw LLP	Other	\$0	\$0	\$0	\$0
ii	MKM Law Group PC	Other	\$0	\$0	\$0	\$0
iii	Blanchard Saiger Law PC	Other	\$0	\$0	\$0	\$0
iv	Clark-Hill	Other	\$0	\$0	\$0	\$0
v	Reeves Immigration Law Group	Other	\$0	\$0	\$0	\$0
vi	Doyle, Schiffer, McMahon LLP	Other	\$0	\$5,372	\$0	\$5,372
vii	West and Rosa LLP	Other	\$0	\$0	\$0	\$0
viii	Hooper, Lundy, and Bookman	Other	\$0	\$0	\$0	\$0
ix	Nixon Peabody	Other	\$0	\$0	\$0	\$0
x	James R. Lahana	Other	\$0	\$0	\$0	\$0
xi	Moss Adams LLP	Other	\$0	\$0	\$0	\$0
xii	Holthouse Carlin & Van Trigt	Other	\$0	\$0	\$0	\$0
xiii	Miller Geer & Associates	Other	\$0	\$0	\$0	\$0
xiv	Nizette Short	Other	\$0	\$0	\$0	\$0

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xv	Bell, McAndrews & Hitachi	Other	\$0	\$0	\$0	\$0
xvi	Tegria Services Group	Other	\$0	\$0	\$0	\$0
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	xcix						
	c						
c.	All professional fees and expenses (debtor & committees)						

Part 6: Postpetition Taxes**Current Month****Cumulative**

a.	Postpetition income taxes accrued (local, state, and federal)	\$0	\$0
b.	Postpetition income taxes paid (local, state, and federal)	\$0	\$0
c.	Postpetition employer payroll taxes accrued	\$0	\$0
d.	Postpetition employer payroll taxes paid	\$472,215	\$6,463,524
e.	Postpetition property taxes paid	\$0	\$0
f.	Postpetition other taxes accrued (local, state, and federal)	\$0	\$0
g.	Postpetition other taxes paid (local, state, and federal)	\$0	\$0

Part 7: Questionnaire - During this reporting period:

- a. Were any payments made on prepetition debt? (if yes, see Instructions) Yes ☒ No ☐
- b. Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions) Yes ☐ No ☒
- c. Were any payments made to or on behalf of insiders? Yes ☐ No ☒
- d. Are you current on postpetition tax return filings? Yes ☐ No ☒
- e. Are you current on postpetition estimated tax payments? Yes ☒ No ☐
- f. Were all trust fund taxes remitted on a current basis? Yes ☒ No ☐
- g. Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions) Yes ☐ No ☒
- h. Were all payments made to or on behalf of professionals approved by the court? Yes ☒ No ☐ N/A ☐
- i. Do you have:
- Worker's compensation insurance? Yes ☒ No ☐
- If yes, are your premiums current? Yes ☒ No ☐ N/A ☐ (if no, see Instructions)
- Casualty/property insurance? Yes ☒ No ☐
- If yes, are your premiums current? Yes ☒ No ☐ N/A ☐ (if no, see Instructions)
- General liability insurance? Yes ☒ No ☐
- If yes, are your premiums current? Yes ☒ No ☐ N/A ☐ (if no, see Instructions)
- j. Has a plan of reorganization been filed with the court? Yes ☐ No ☒
- k. Has a disclosure statement been filed with the court? Yes ☐ No ☒
- l. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes ☒ No ☐

Debtor's Name Beverly Community Hospital Association

Case No. 23-12359

Part 8: Individual Chapter 11 Debtors (Only)

- | | | |
|--|---|-----|
| a. Gross income (receipts) from salary and wages | _____ | \$0 |
| b. Gross income (receipts) from self-employment | _____ | \$0 |
| c. Gross income from all other sources | _____ | \$0 |
| d. Total income in the reporting period (a+b+c) | _____ | \$0 |
| e. Payroll deductions | _____ | \$0 |
| f. Self-employment related expenses | _____ | \$0 |
| g. Living expenses | _____ | \$0 |
| h. All other expenses | _____ | \$0 |
| i. Total expenses in the reporting period (e+f+g+h) | _____ | \$0 |
| j. Difference between total income and total expenses (d-i) | _____ | \$0 |
| k. List the total amount of all postpetition debts that are past due | _____ | \$0 |
| | | |
| l. Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)? | Yes <input type="radio"/> No <input checked="" type="radio"/> | |
| m. If yes, have you made all Domestic Support Obligation payments? | Yes <input type="radio"/> No <input type="radio"/> N/A <input checked="" type="radio"/> | |

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.

/s/ Howard M. Ehrenberg

Signature of Responsible Party

Chapter 11 Trustee

Title

Howard M. Ehrenberg

Printed Name of Responsible Party

11/30/2023

Date

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
BALANCE SHEET
UNAUDITED

FOR THE MONTH ENDED
9/30/2023

Assets

Cash and cash equivalents	\$ 22,905,116
Certificates of Deposit& Savings	2,130,247
Net Patient Accounts receivable	10,238,418
Third Party Settlements Receivable	19,261,611
Other Receivables	(11,466,719)
Inventories	-
Prepaid Expenses	1,261,699
Deposits & Other Current Assets	173,875
Total current assets	44,504,247
Non-Current Assets	6,991,077
Total Assets	\$ 51,495,324

Liabilities and Fund Balance

Current Liabilities - Post-petition

Trade payables	\$ 12,907,905
Accrued compensation and liabilities	2,475,604
Accrued Paid Time Off & Sick Leave Reserve	125,764
Accrued Interest Payable	1,442,587
Accrued Professional Fees	329,441
Accrued Other Expense	-
Total current liabilities	17,281,301

Liabilities subject to compromise

Long term Debt, net	47,744,145
Taxes payable	67,064,945
	-
Total Liabilities	132,090,391

Fund Balance

	(80,595,067)
Total Liabilities and Fund Balance	\$ 51,495,324

[1] Note: Substantially all of the Debtors' assets were sold pursuant to court approved sale on September 6, 2023 [Docket No. 718].

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
STATEMENT OF OPERATIONS
UNAUDITED

	SEP 1, 2023 - SEP 30, 2023
Net Revenue	\$ 4,622,110
Cost of Good Sold	(1,384,240)
Gross Profit	<u>3,237,870</u>
Selling, General & Administrative	
Selling Expenses	1,326,186
General & Administrative	554,791
Depreciation and Amortization	177,863
Total Expenses	<u>2,058,840</u>
Income (Loss) from Operataions	1,179,030
Other expense, net [1]	(66,979,103)
Interest Expense, net	<u>(117,202)</u>
Net Income (Loss)	(65,917,274)
Reorganization items	(253,431)
Adjusted Net income (Loss)	<u>\$ (66,170,705)</u>

[1] Includes loss on sale of assets pursuant to court approved sale on September 6, 2023 [Docket No. 718].

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
ACCOUNTS RECEIVABLE AGING
September 30, 2023

UNAUDITED								
CATEGORY	TOTAL	CURRENT	1-30 DAYS	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS	
Insurance Claims	\$ 13,919,284	\$ (1,645,735)	\$ 1,443,067	\$ 5,084,354	\$ 2,615,679	\$ 1,911,117	\$ 4,510,802	
Workers Comp Receivable	265,679	29,450	41,217	74,048	43,797	26,086	51,080	
Allowance for Doubtful Accounts	(3,946,544)	-	(157,887)	(904,402)	(848,541)	(790,668)	(1,245,046)	
	10,238,418	(1,616,285)	1,326,398	4,254,000	1,810,936	1,146,534	3,316,835	
Third Party Settlement Receivable	19,261,611	19,261,611						
Other Receivables	(11,466,719)		(11,466,719)					
Total	\$ 18,033,310	\$ 17,645,326	\$ (10,140,321)	\$ 4,254,000	\$ 1,810,936	\$ 1,146,534	\$ 3,316,835	

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
ACCOUNTS RECEIVABLE AGING
September 30, 2023
UNAUDITED

CATEGORY	TOTAL	1-30 DAYS	OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS
Trade Payables	\$ 8,320,873	1,716,114	3,330,830	1,252,468	556,153	1,465,308
Accrual Journal Entries	4,587,032	4,587,032				
Total	\$ 12,907,906	\$ 6,303,146	\$ 3,330,830	\$ 1,252,468	\$ 556,153	\$ 1,465,308

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
SCHEDULE OF INSIDER PAYMENTS
September 30, 2023
UNAUDITED

DATE	PAYEE	REASON	AMOUNT
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None

**BEVERLY COMMUNITY HOSPITAL ASSOCIATION
SCHEDULE OF PRE-PETITION PAYMENTS**

September 30, 2023

UNAUDITED

DATE	PAYEE	REASON	AUTHORIZATION	AMOUNT
	None			

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
STATEMENT OF CAPITALIZED ASSETS
September 30, 2023
UNAUDITED

TYPE	CAPITALIZED ASSET	BOOK VALUE
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None.

[1] Includes gain on sale of assets pursuant to court approved sale on September 6, 2023 [Docket No. 718].

**BEVERLY COMMUNITY HOSPITAL ASSOCIATION
CASH ACTIVITY
UNAUDITED**






	FOR THE PERIOD FROM SEP 1 -30, 2023
Total Receipts	\$ 22,151,744
Cash Disbursements:	
Payroll & Taxes	4,260,364
Employee Benefits	531,021
Temp Nursing	9,008
Physicians	-
Leases & Rentals	426,254
Utilities	60,926
Insurance	117,014
Medical Supplies	98,671
Purchased Services	3,510,004
Patient Refunds	-
Other G&A	765,830
UST Fees	-
Total Disbursements	<u>9,779,093</u>
Cash Flow	12,372,651
Beginning Balance	<u>10,532,465</u>
Ending Balance	<u>\$ 22,905,116</u>

Note: Substantially all of the Debtors' assets were sold pursuant to court approved sale on September 6, 2023 [Docket No. 718]. Proceeds from the sale, totaling \$24,020,852, were disbursed from escrow for the benefit of secured lenders.

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 DENTAL PLAN ACCOUNT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0455	\$0.00

Business Checking - Analysis-XXXXXXXX0455

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	4 Credit(s) This Period	\$22,615.47
	4 Debit(s) This Period	\$22,615.47
09/29/2023	Ending Balance	\$0.00

Other Credits

Date	Description	Amount
09/06/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$6,487.98
09/13/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$5,121.86
09/20/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$6,759.44
09/27/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$4,246.19

Electronic Debits

Date	Description	Amount
09/06/2023	DELTA-3941461312 PAYMENT 28599	\$6,487.98
09/13/2023	DELTA-3941461312 PAYMENT 28916	\$5,121.86
09/20/2023	DELTA-3941461312 PAYMENT 29244	\$6,759.44
09/27/2023	DELTA-3941461312 PAYMENT 29467	\$4,246.19

Daily Balances

Date	Amount	Date	Amount
09/06/2023	\$0.00	09/20/2023	\$0.00
09/13/2023	\$0.00	09/27/2023	\$0.00

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

Please report any errors or omissions within 30 days. Otherwise the statement will be considered correct and checks genuine. All deposits and credits are subject to final payment.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

Telephone or write us at the number or address shown on the front of this statement as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. If you have a question concerning your statement, please be prepared to:

- Tell us your name and account number.
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 days (5 business days if involving a VISA transaction, 20 business days if involving a new account) after we hear from you and will correct any error promptly.

If we need more time, however, we may take up to 45 days (90 days involving a new account, point-of-sale, or foreign-initiated transaction) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days (5 business days if involving a VISA transaction, 20 business days involving a new account) for the amount you think is in error, so that you will have the use of the money during the time that it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. Your account is considered a new account for the first 30 days after the first deposit is made, unless each of you already has an established account with us before this account was opened.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.






INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

A hold for uncollected funds may be placed on funds deposited by check or similar instruments. This could delay your ability to withdraw such funds. The delay, if any, would not exceed the period of time permitted by law. For a complete copy of our Funds Availability Policy, please contact your branch or write us at: Hanmi Bank, 3660 Wilshire Blvd., Penthouse Suite A, Los Angeles, CA 90010.

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 "H" ACCOUNT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0544	\$41,901.53

Business Checking - Analysis-XXXXXXXX0544

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$40,465.94
	2 Credit(s) This Period	\$11,696.75
	35 Debit(s) This Period	\$10,261.16
09/29/2023	Ending Balance	\$41,901.53

Deposits

Date	Description	Amount
09/12/2023	REMOTE DEPOSIT	\$5,956.77

Electronic Credits

Date	Description	Amount
09/18/2023	COBRA Prem IGOE AND COMPANY NTE* REF* Aug COBRA PREM\	\$5,739.98

Electronic Debits

Date	Description	Amount
09/01/2023	MBI SETL MED-I-BANK	\$351.50
09/05/2023	IGOE AND COMPANY DIRECT DEP MED-I-BANK	\$20.00
09/05/2023	MBI SETL MED-I-BANK	\$177.54
09/05/2023	MBI SETL MED-I-BANK	\$217.31
09/05/2023	MBI SETL MED-I-BANK	\$630.12
09/05/2023	MBI SETL MED-I-BANK	\$1,260.63
09/06/2023	MBI SETL MED-I-BANK	\$48.77
09/07/2023	IGOE AND COMPANY DIRECT DEP MED-I-BANK	\$30.00
09/07/2023	Igoe and Company IDR Chk Re IGOBEVERL	\$52.37
09/07/2023	MBI SETL MED-I-BANK	\$568.24
09/08/2023	IGOE AND COMPANY DIRECT DEP MED-I-BANK	\$120.00
09/08/2023	MBI SETL MED-I-BANK	\$1,275.09
09/11/2023	MBI SETL MED-I-BANK	\$143.10
09/11/2023	MBI SETL MED-I-BANK	\$152.70
09/11/2023	MBI SETL MED-I-BANK	\$705.30
09/13/2023	MBI SETL MED-I-BANK	\$53.05
09/14/2023	MBI SETL MED-I-BANK	\$40.00
09/14/2023	IGOE AND COMPANY DIRECT DEP MED-I-BANK	\$122.02



CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>• Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>• Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>• Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	• Verified debit card purchases?	• Computed cancelled checks to check stubs?	• Verified additions and subtractions?	• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?	BALANCE
• Accounted for bank charges?	• Verified debit card purchases?												
• Computed cancelled checks to check stubs?	• Verified additions and subtractions?												
• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?												

Please report any errors or omissions within 30 days. Otherwise the statement will be considered correct and checks genuine. All deposits and credits are subject to final payment.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

Telephone or write us at the number or address shown on the front of this statement as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. If you have a question concerning your statement, please be prepared to:

- Tell us your name and account number.
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- Tell us the dollar amount of the suspected error.

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INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

A hold for uncollected funds may be placed on funds deposited by check or similar instruments. This could delay your ability to withdraw such funds. The delay, if any, would not exceed the period of time permitted by law. For a complete copy of our Funds Availability Policy, please contact your branch or write us at: Hanmi Bank, 3660 Wilshire Blvd., Penthouse Suite A, Los Angeles, CA 90010.

Business Checking - Analysis-XXXXXXXX0544 (continued)

Electronic Debits (continued)

Date	Description	Amount
09/15/2023	MBI SETL MED-I-BANK	\$1,845.65
09/18/2023	MBI SETL MED-I-BANK	\$44.64
09/18/2023	MBI SETL MED-I-BANK	\$91.07
09/18/2023	MBI SETL MED-I-BANK	\$110.00
09/19/2023	MBI SETL MED-I-BANK	\$237.24
09/20/2023	Igoe and Company IDR Chk Re IGOBEVERL	\$70.00
09/20/2023	MBI SETL MED-I-BANK	\$111.53
09/21/2023	MBI SETL MED-I-BANK	\$88.05
09/22/2023	MBI SETL MED-I-BANK	\$644.37
09/25/2023	MBI SETL MED-I-BANK	\$15.00
09/25/2023	MBI SETL MED-I-BANK	\$208.89
09/26/2023	MBI SETL MED-I-BANK	\$15.89
09/27/2023	MBI SETL MED-I-BANK	\$86.24
09/28/2023	MBI SETL MED-I-BANK	\$70.92
09/29/2023	IGOE AND COMPANY DIRECT DEP MED-I-BANK	\$15.00
09/29/2023	MBI SETL MED-I-BANK	\$229.93
09/29/2023	IGOE AND COMP IN Admin Pymt	\$409.00

Daily Balances






Date	Amount	Date	Amount	Date	Amount
09/01/2023	\$40,114.44	09/13/2023	\$40,616.99	09/22/2023	\$42,952.40
09/05/2023	\$37,808.84	09/14/2023	\$40,454.97	09/25/2023	\$42,728.51
09/06/2023	\$37,760.07	09/15/2023	\$38,609.32	09/26/2023	\$42,712.62
09/07/2023	\$37,109.46	09/18/2023	\$44,103.59	09/27/2023	\$42,626.38
09/08/2023	\$35,714.37	09/19/2023	\$43,866.35	09/28/2023	\$42,555.46
09/11/2023	\$34,713.27	09/20/2023	\$43,684.82	09/29/2023	\$41,901.53
09/12/2023	\$40,670.04	09/21/2023	\$43,596.77		

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 AHC BLUE CROSS CAPITATION ACCT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0552	\$914,085.54

Business Checking - Analysis-XXXXXXXX0552

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$1,811,414.62
	2 Credit(s) This Period	\$1,667,333.13
	46 Debit(s) This Period	\$2,564,662.21
09/29/2023	Ending Balance	\$914,085.54

Electronic Credits

Date	Description	Amount
09/06/2023	ANTHEM BLUE 5T DMS EFT 3220134826	\$155,400.00

Other Credits

Date	Description	Amount
09/05/2023	248364 Internet Transfer from 500290706 on 9/05/23 AT 12:23 Requested by Alice C	\$1,511,933.13

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
64136	09/07/2023	\$1,682,753.19	122535	09/11/2023	\$290.28	122560	09/14/2023	\$8,162.87
64137	09/06/2023	\$721,179.94	122536	09/25/2023	\$347.19	122561	09/14/2023	\$73.30
122502*	09/29/2023	\$74.03	122537	09/11/2023	\$1,876.96	122562	09/14/2023	\$18,010.32
122513*	09/05/2023	\$10,444.28	122538	09/11/2023	\$7,106.90	122563	09/19/2023	\$329.00
122518*	09/01/2023	\$301.85	122539	09/11/2023	\$17,209.17	122564	09/14/2023	\$16,502.38
122524*	09/01/2023	\$181.15	122550*	09/12/2023	\$22.77	122565	09/13/2023	\$5,818.53
122526*	09/14/2023	\$8,353.39	122551	09/12/2023	\$208.90	122566	09/18/2023	\$12,106.76
122527	09/14/2023	\$5,495.93	122552	09/14/2023	\$1,020.36	122567	09/18/2023	\$402.81
122528	09/14/2023	\$5,444.79	122553	09/18/2023	\$29.84	122568	09/18/2023	\$388.22
122529	09/18/2023	\$1,302.86	122554	09/14/2023	\$63.76	122569	09/25/2023	\$93.73
122530	09/25/2023	\$224.60	122555	09/14/2023	\$243.64	122570	09/20/2023	\$426.82
122531	09/08/2023	\$9,259.90	122556	09/18/2023	\$1,818.66	122571	09/18/2023	\$77.78
122532	09/07/2023	\$83.70	122557	09/14/2023	\$2,844.38	122574*	09/25/2023	\$339.12
122533	09/11/2023	\$5,595.88	122558	09/14/2023	\$49.60	122575	09/25/2023	\$28.67
122534	09/11/2023	\$53.35	122559	09/14/2023	\$17,487.67	122576	09/29/2023	\$269.72

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>• Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>• Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>• Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	• Verified debit card purchases?	• Computed cancelled checks to check stubs?	• Verified additions and subtractions?	• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?	BALANCE
• Accounted for bank charges?	• Verified debit card purchases?												
• Computed cancelled checks to check stubs?	• Verified additions and subtractions?												
• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?												

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INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

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Business Checking - Analysis-XXXXXXXX0552 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount
122583*	09/29/2023	\$263.26

* Indicates skipped check number

Daily Balances






Date	Amount	Date	Amount	Date	Amount
09/01/2023	\$1,810,931.62	09/11/2023	\$1,022,411.20	09/19/2023	\$916,152.68
09/05/2023	\$3,312,420.47	09/12/2023	\$1,022,179.53	09/20/2023	\$915,725.86
09/06/2023	\$2,746,640.53	09/13/2023	\$1,016,361.00	09/25/2023	\$914,692.55
09/07/2023	\$1,063,803.64	09/14/2023	\$932,608.61	09/29/2023	\$914,085.54
09/08/2023	\$1,054,543.74	09/18/2023	\$916,481.68		

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 PAYROLL ACCOUNT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXXX0579	\$943,767.44

Business Checking - Analysis-XXXXXXXXX0579

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$75,463.24
	3 Credit(s) This Period	\$3,643,592.64
	226 Debit(s) This Period	\$2,775,288.44
09/29/2023	Ending Balance	\$943,767.44

Other Credits

Date	Description	Amount
09/07/2023	598864 Internet Transfer from 550198764 on 9/07/23 AT 15:53 RIF and Severance an	\$800,000.00
09/13/2023	442420 Internet Transfer from 550198764 on 9/13/23 AT 11:06 PPE 9 9 2023	\$1,875,778.95
09/27/2023	411290 Internet Transfer from 550198764 on 9/27/23 AT 8:27 PPE 9 23 2023	\$967,813.69

Other Debits

Date	Description	Amount
09/13/2023	Outgoing Wire 379397 ADP CLIENT TRUST 1500390592	\$1,403,889.20
09/27/2023	Outgoing Wire 383975 ADP CLIENT TRUST 3300331305	\$964,876.78

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
206307	09/05/2023	\$49.18	206328*	09/11/2023	\$471.26	206347*	09/15/2023	\$1,425.47
206310*	09/22/2023	\$1,645.84	206330*	09/11/2023	\$23.79	206348	09/18/2023	\$1,793.52
206311	09/05/2023	\$469.21	206331	09/15/2023	\$3,115.06	206350*	09/11/2023	\$2,711.74
206314*	09/12/2023	\$4,274.95	206332	09/18/2023	\$753.81	206351	09/14/2023	\$489.71
206316*	09/11/2023	\$766.70	206333	09/11/2023	\$394.10	206352	09/11/2023	\$2,231.39
206317	09/11/2023	\$947.07	206335*	09/20/2023	\$1,771.85	206353	09/11/2023	\$1,490.27
206318	09/18/2023	\$565.38	206336	09/14/2023	\$301.62	206354	09/14/2023	\$1,664.51
206319	09/11/2023	\$274.59	206337	09/14/2023	\$5,512.61	206355	09/18/2023	\$1,122.48
206321*	09/11/2023	\$10,733.51	206338	09/12/2023	\$1,723.02	206358*	09/19/2023	\$844.50
206322	09/12/2023	\$5,157.16	206339	09/11/2023	\$1,609.54	206359	09/11/2023	\$2,204.17
206323	09/15/2023	\$196.83	206340	09/12/2023	\$2,370.21	206360	09/18/2023	\$2,599.71
206324	09/19/2023	\$2,243.64	206343*	09/11/2023	\$1,428.54	206361	09/11/2023	\$842.57
206325	09/12/2023	\$4,275.20	206344	09/11/2023	\$793.63	206362	09/14/2023	\$4,117.96

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
<p>BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows:</p> <p>Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct</p> <p>If your checkbook and statement do not balance, have you</p> <ul style="list-style-type: none"> • Accounted for bank charges? • Computed cancelled checks to check stubs? • Verified ATM withdrawals and fees? • Verified debit card purchases? • Verified additions and subtractions? • Computed deposit amount on statement to your checkbook? 							BALANCE

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Business Checking - Analysis-XXXXXXXX0579 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
206363	09/14/2023	\$1,043.80	206426*	09/13/2023	\$269.01	206490	09/12/2023	\$1,857.18
206364	09/08/2023	\$2,081.92	206427	09/18/2023	\$795.09	206491	09/13/2023	\$1,940.79
206366*	09/11/2023	\$1,083.90	206428	09/11/2023	\$2,120.36	206492	09/12/2023	\$1,000.97
206368*	09/12/2023	\$1,882.58	206430*	09/20/2023	\$238.65	206493	09/27/2023	\$855.64
206369	09/11/2023	\$1,124.74	206431	09/12/2023	\$1,284.05	206494	09/12/2023	\$1,920.75
206370	09/18/2023	\$1,703.82	206432	09/14/2023	\$25.55	206495	09/27/2023	\$180.05
206371	09/12/2023	\$706.34	206433	09/13/2023	\$968.69	206496	09/11/2023	\$740.92
206372	09/19/2023	\$1,691.71	206436*	09/11/2023	\$1,055.02	206497	09/11/2023	\$877.01
206373	09/12/2023	\$863.84	206438*	09/12/2023	\$2,563.39	206499*	09/11/2023	\$434.12
206374	09/18/2023	\$460.54	206439	09/18/2023	\$756.33	206500	09/18/2023	\$649.88
206376*	09/28/2023	\$737.13	206440	09/27/2023	\$1,029.88	206501	09/11/2023	\$420.12
206377	09/12/2023	\$3,025.75	206441	09/11/2023	\$1,338.50	206502	09/18/2023	\$225.28
206378	09/12/2023	\$351.75	206444*	09/11/2023	\$806.51	206503	09/11/2023	\$327.56
206380*	09/22/2023	\$1,255.44	206446*	09/12/2023	\$637.90	206505*	09/28/2023	\$693.85
206381	09/11/2023	\$1,413.17	206447	09/28/2023	\$983.61	206506	09/14/2023	\$1,141.78
206382	09/14/2023	\$1,610.60	206449*	09/12/2023	\$387.74	206507	09/11/2023	\$1,668.89
206383	09/11/2023	\$165.79	206450	09/11/2023	\$562.47	206508	09/18/2023	\$2,092.33
206384	09/11/2023	\$837.32	206451	09/21/2023	\$1,018.17	206509	09/14/2023	\$1,362.13
206385	09/11/2023	\$392.26	206452	09/11/2023	\$981.30	206511*	09/14/2023	\$476.98
206387*	09/12/2023	\$173.82	206453	09/11/2023	\$2,959.47	206512	09/12/2023	\$366.18
206388	09/18/2023	\$745.24	206454	09/12/2023	\$2,533.85	206514*	09/28/2023	\$3,323.21
206389	09/18/2023	\$1,267.62	206455	09/12/2023	\$3,239.03	206515	09/14/2023	\$703.47
206390	09/12/2023	\$786.72	206456	09/12/2023	\$637.81	206517*	09/19/2023	\$1,361.43
206391	09/11/2023	\$875.24	206457	09/11/2023	\$731.84	206518	09/11/2023	\$663.83
206392	09/18/2023	\$310.28	206458	09/29/2023	\$782.74	206519	09/08/2023	\$912.30
206393	09/11/2023	\$1,653.40	206459	09/11/2023	\$2,135.67	206520	09/11/2023	\$799.87
206394	09/19/2023	\$444.83	206460	09/27/2023	\$932.99	206521	09/11/2023	\$792.02
206395	09/11/2023	\$1,073.03	206461	09/11/2023	\$484.96	206522	09/11/2023	\$3,659.37
206399*	09/15/2023	\$1,593.60	206462	09/11/2023	\$667.87	206523	09/12/2023	\$396.41
206400	09/11/2023	\$2,317.83	206464*	09/11/2023	\$950.65	206524	09/11/2023	\$1,730.87
206401	09/11/2023	\$1,264.30	206465	09/18/2023	\$1,871.33	206526*	09/12/2023	\$580.04
206402	09/12/2023	\$901.81	206466	09/25/2023	\$34.20	206527	09/11/2023	\$1,102.13
206403	09/19/2023	\$1,267.43	206467	09/14/2023	\$1,763.50	206529*	09/12/2023	\$923.83
206404	09/13/2023	\$278.62	206468	09/14/2023	\$885.80	206530	09/29/2023	\$889.21
206406*	09/25/2023	\$1,660.90	206471*	09/14/2023	\$1,898.32	206531	09/11/2023	\$971.51
206407	09/25/2023	\$829.45	206472	09/19/2023	\$865.74	206532	09/18/2023	\$1,295.35
206408	09/11/2023	\$1,420.42	206473	09/18/2023	\$2,779.74	206533	09/11/2023	\$1,240.90
206409	09/12/2023	\$2,268.66	206475*	09/29/2023	\$3,693.90	206534	09/14/2023	\$628.77
206410	09/11/2023	\$1,850.71	206476	09/11/2023	\$1,231.65	206535	09/15/2023	\$1,739.71
206411	09/13/2023	\$1,780.34	206477	09/13/2023	\$1,232.53	206536	09/11/2023	\$1,079.31
206412	09/19/2023	\$496.94	206478	09/12/2023	\$467.93	206537	09/13/2023	\$922.90
206413	09/13/2023	\$1,689.42	206479	09/11/2023	\$472.11	206538	09/27/2023	\$1,251.47
206414	09/26/2023	\$188.23	206480	09/18/2023	\$1,112.27	206539	09/15/2023	\$2,770.19
206415	09/18/2023	\$1,296.57	206481	09/22/2023	\$1,689.74	206540	09/22/2023	\$176.47
206416	09/11/2023	\$1,845.21	206482	09/14/2023	\$1,346.90	206541	09/12/2023	\$471.82
206417	09/11/2023	\$1,084.58	206483	09/11/2023	\$494.07	206542	09/11/2023	\$1,106.47
206419*	09/11/2023	\$1,392.87	206484	09/25/2023	\$1,108.20	206543	09/15/2023	\$1,257.06
206421*	09/19/2023	\$1,255.79	206485	09/13/2023	\$7,796.16	206544	09/13/2023	\$1,673.61
206422	09/11/2023	\$812.38	206486	09/25/2023	\$1,105.89	206545	09/11/2023	\$1,655.92
206423	09/12/2023	\$457.48	206488*	09/11/2023	\$1,115.25	206546	09/15/2023	\$1,448.82
206424	09/11/2023	\$1,584.91	206489	09/11/2023	\$1,536.14	206547	09/11/2023	\$1,234.28

Business Checking - Analysis-XXXXXXXXX0579 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
206548	09/14/2023	\$77.55	206560	09/15/2023	\$10,348.68	206573	09/22/2023	\$1,547.01
206549	09/27/2023	\$1,704.33	206561	09/18/2023	\$6,249.30	206574	09/22/2023	\$6,374.20
206550	09/11/2023	\$499.56	206562	09/20/2023	\$7,037.60	206576*	09/22/2023	\$3,920.63
206551	09/22/2023	\$730.02	206563	09/18/2023	\$1,849.31	206577	09/18/2023	\$4,780.64
206553*	09/12/2023	\$909.39	206564	09/18/2023	\$10,146.42	206579*	09/15/2023	\$2,737.36
206554	09/12/2023	\$2,173.85	206566*	09/29/2023	\$4,249.47	206580	09/19/2023	\$6,374.20
206555	09/18/2023	\$2,148.16	206567	09/22/2023	\$2,943.63	206581	09/18/2023	\$6,632.14
206556	09/18/2023	\$827.91	206568	09/19/2023	\$3,843.92	206582	09/26/2023	\$9,189.33
206557	09/13/2023	\$625.48	206569	09/18/2023	\$5,772.34	206583	09/18/2023	\$7,811.63
206558	09/18/2023	\$6,249.30	206571*	09/25/2023	\$10,556.37	206584	09/15/2023	\$4,334.53
206559	09/19/2023	\$1,812.78	206572	09/18/2023	\$10,982.66			

* Indicates skipped check number






Daily Balances

Date	Amount	Date	Amount	Date	Amount
09/05/2023	\$74,944.85	09/14/2023	\$1,158,276.43	09/22/2023	\$986,810.58
09/07/2023	\$874,944.85	09/15/2023	\$1,127,309.12	09/25/2023	\$971,515.57
09/08/2023	\$871,950.63	09/18/2023	\$1,039,662.74	09/26/2023	\$962,138.01
09/11/2023	\$782,187.20	09/19/2023	\$1,017,159.83	09/27/2023	\$959,120.56
09/12/2023	\$730,615.79	09/20/2023	\$1,008,111.73	09/28/2023	\$953,382.76
09/13/2023	\$1,183,327.99	09/21/2023	\$1,007,093.56	09/29/2023	\$943,767.44

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 BEVERLY HOSPITAL
 GENERAL ACCOUNT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0595	\$484,705.54

Business Checking - Analysis-XXXXXXXX0595

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$499,970.00
	389 Credit(s) This Period	\$6,954,202.95
	43 Debit(s) This Period	\$6,969,467.41
09/29/2023	Ending Balance	\$484,705.54

Deposits

Date	Description	Amount
09/01/2023	REMOTE DEPOSIT	\$119.51
09/01/2023	REMOTE DEPOSIT	\$7,476.44
09/01/2023	REMOTE DEPOSIT	\$13,715.47
09/05/2023	REMOTE DEPOSIT	\$860.00
09/06/2023	REMOTE DEPOSIT	\$81.02
09/06/2023	REMOTE DEPOSIT	\$147.00
09/06/2023	REMOTE DEPOSIT	\$12,651.16
09/06/2023	REMOTE DEPOSIT	\$151,240.49
09/06/2023	REMOTE DEPOSIT	\$1,227,717.53
09/08/2023	REMOTE DEPOSIT	\$510.23
09/08/2023	REMOTE DEPOSIT	\$87,431.38
09/13/2023	REMOTE DEPOSIT	\$240.82
09/15/2023	REMOTE DEPOSIT	\$4,385.78
09/15/2023	REMOTE DEPOSIT	\$7,558.55
09/18/2023	REMOTE DEPOSIT	\$333.34
09/18/2023	REMOTE DEPOSIT	\$2,190.45
09/18/2023	REMOTE DEPOSIT	\$48,133.63
09/18/2023	REMOTE DEPOSIT	\$180,420.25
09/18/2023	REMOTE DEPOSIT	\$233,746.06
09/19/2023	REMOTE DEPOSIT	\$20.00
09/19/2023	REMOTE DEPOSIT	\$50.00
09/19/2023	REMOTE DEPOSIT	\$3,572.73
09/19/2023	REMOTE DEPOSIT	\$115,924.73
09/21/2023	REMOTE DEPOSIT	\$73.39
09/21/2023	REMOTE DEPOSIT	\$46,596.94
09/22/2023	REMOTE DEPOSIT	\$22.78
09/22/2023	REMOTE DEPOSIT	\$60,624.53

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>• Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>• Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>• Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	• Verified debit card purchases?	• Computed cancelled checks to check stubs?	• Verified additions and subtractions?	• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?	BALANCE
• Accounted for bank charges?	• Verified debit card purchases?												
• Computed cancelled checks to check stubs?	• Verified additions and subtractions?												
• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?												

Please report any errors or omissions within 30 days. Otherwise the statement will be considered correct and checks genuine. All deposits and credits are subject to final payment.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

Telephone or write us at the number or address shown on the front of this statement as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. If you have a question concerning your statement, please be prepared to:

- Tell us your name and account number.
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 days (5 business days if involving a VISA transaction, 20 business days if involving a new account) after we hear from you and will correct any error promptly.

If we need more time, however, we may take up to 45 days (90 days involving a new account, point-of-sale, or foreign-initiated transaction) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days (5 business days if involving a VISA transaction, 20 business days involving a new account) for the amount you think is in error, so that you will have the use of the money during the time that it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. Your account is considered a new account for the first 30 days after the first deposit is made, unless each of you already has an established account with us before this account was opened.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

A hold for uncollected funds may be placed on funds deposited by check or similar instruments. This could delay your ability to withdraw such funds. The delay, if any, would not exceed the period of time permitted by law. For a complete copy of our Funds Availability Policy, please contact your branch or write us at: Hanmi Bank, 3660 Wilshire Blvd., Penthouse Suite A, Los Angeles, CA 90010.

Business Checking - Analysis-XXXXXXXX0595 (continued)

Deposits (continued)

Date	Description	Amount
09/25/2023	REMOTE DEPOSIT	\$8,451.67
09/26/2023	REMOTE DEPOSIT	\$90.00
09/26/2023	REMOTE DEPOSIT	\$438.53
09/26/2023	REMOTE DEPOSIT	\$8,743.65
09/27/2023	REMOTE DEPOSIT	\$3,818.31
09/27/2023	REMOTE DEPOSIT	\$26,132.03
09/27/2023	REMOTE DEPOSIT	\$45,235.77
09/28/2023	REMOTE DEPOSIT	\$52,579.25
09/29/2023	REMOTE DEPOSIT	\$69,012.93

Electronic Credits

Date	Description	Amount
09/01/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 391187427* 1954472349\	\$70.58
09/01/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101048527* 1341858379\	\$85.09
09/01/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101078966* 1341858379\	\$101.33
09/01/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826408812* 1542174068\	\$128.10
09/01/2023	HCCLAIMPMT VALLEY PRESBYTER TRN* 1* 8101875* 1951945832\	\$206.77
09/01/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 391181626* 1954472349\	\$268.14
09/01/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101022446* 1341858379\	\$579.07
09/01/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1851640* 1330704304\	\$1,174.21
09/01/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8118727* 1330219954\	\$1,539.00
09/01/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101022445* 1341858379\	\$1,592.47
09/01/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101022444* 1341858379\	\$4,157.81
09/01/2023	EFT Paymen HealthCare Partn TRN* 1* 222619709* 1330219954\	\$8,745.00
09/01/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826413753* 1542174068\	\$12,495.13
09/01/2023	EFT Paymen OPTUM TRN* 1* 6744228* 1330219954\	\$17,282.53
09/01/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0375023* 1262326076* 000001011~	\$243,319.98
09/05/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 952000497213* 1954518790~	\$44.16
09/05/2023	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1217546* 1954690845\	\$82.27
09/05/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 977000469819* 1954518790~	\$300.52
09/05/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826415018* 1542174068\	\$322.36
09/05/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101109377* 1341858379\	\$389.06
09/05/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826415371* 1542174068\	\$507.08
09/05/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042459* 1954310407\	\$538.98
09/05/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000192008* 1205327501\	\$643.73
09/05/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 977000469815* 1954518790~	\$1,263.91
09/05/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0809741826* 1954402957\	\$1,475.00
09/05/2023	HCCLAIMPMT AETNA AS01 TRN* 1* 823242000353620* 1066033492\	\$1,942.46
09/05/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101300665* 1341858379\	\$2,553.17
09/05/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101300664* 1341858379\	\$2,745.80
09/05/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1411426* 1465596242\	\$7,628.89
09/05/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 952000497211* 1954518790~	\$10,803.38
09/05/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101300662* 1341858379\	\$14,504.39
09/05/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101300663* 1341858379\	\$14,956.81
09/05/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 952000497210* 1954518790~	\$19,163.92
09/05/2023	APA ACO 4934 ACH BATCH	\$19,780.10
09/05/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101300666* 1341858379\	\$19,903.46
09/05/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 952000497212* 1954518790~	\$22,545.85
09/05/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0376076* 1262326076* 000001011~	\$25,607.06
09/05/2023	HCCLAIMPMT CA DHCS MEDI-CAL TRN* 1* 050065045* 1680217053~	\$102,187.67
09/06/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101565871* 1341858379\	\$100.28
09/06/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101504931* 1341858379\	\$139.26
09/06/2023	HCCLAIMPMT CIGNA EDGE TRANS TRN* 1* 602700800922* 1591031071~	\$280.59
09/06/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1854732* 1330704304\	\$385.41
09/06/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826416138* 1542174068\	\$675.93
09/06/2023	HCCLAIMPMT EMANATE CITRUS V TRN* 1* 7708343* 1956006469\	\$789.06
09/06/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826417104* 1542174068\	\$830.19
09/06/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 392222068* 1954472349\	\$1,255.95

Business Checking - Analysis-XXXXXXXXX0595 (continued)**Electronic Credits (continued)**

Date	Description	Amount
09/06/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0809742149* 1954402957\	\$1,282.80
09/06/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826416787* 1542174068\	\$1,421.95
09/06/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826417541* 1542174068\	\$2,152.73
09/06/2023	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 25866295* 1912155938~	\$2,873.65
09/06/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826416139* 1542174068\	\$3,551.92
09/06/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101504934* 1341858379\	\$4,888.13
09/06/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101504932* 1341858379\	\$5,421.39
09/06/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101405469* 1341858379\	\$9,532.28
09/06/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000192321* 1205327501\	\$13,399.89
09/06/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101504933* 1341858379\	\$34,659.00
09/06/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0377224* 1262326076* 000001011~	\$113,123.44
09/07/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 907000629439* 1954518790~	\$45.54
09/07/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101634349* 1341858379\	\$48.61
09/07/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101707660* 1341858379\	\$52.47
09/07/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101707658* 1341858379\	\$108.47
09/07/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101707659* 1341858379\	\$139.57
09/07/2023	HCCLAIMPMT HEALTH CARE LA, TRN* 1* 4537916* 1954298276\	\$142.40
09/07/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042628* 1954310407\	\$309.09
09/07/2023	HCCLAIMPMT ASSOCIATED HISPA TRN* 1* 2320020* 1954365761\	\$381.49
09/07/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826418476* 1542174068\	\$485.82
09/07/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 907000629437* 1954518790~	\$565.26
09/07/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042555* 1954310407\	\$661.59
09/07/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000192552* 1205327501\	\$760.53
09/07/2023	EFT Paymen OPTUM TRN* 1* 1686359* 1330219954\	\$1,186.78
09/07/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826418477* 1542174068\	\$1,199.39
09/07/2023	MIS Chargepoint Inc Payment from Chargepoint for: AUG23-FLEXBILL NA01675	\$1,222.61
09/07/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101707661* 1341858379\	\$1,342.29
09/07/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 907000629440* 1954518790~	\$1,541.01
09/07/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101707662* 1341858379\	\$2,196.73
09/07/2023	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 25906487* 1912155938~	\$3,003.51
09/07/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1412059* 1465596242\	\$3,718.82
09/07/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8119371* 1330219954\	\$5,289.12
09/07/2023	EFT Paymen HealthCare Partn TRN* 1* 222621399* 1330219954\	\$5,346.96
09/07/2023	HCCLAIMPMT AETNA A06 TRN* 1* 823244000039052* 1066033492\	\$5,500.00
09/07/2023	EFT Paymen OPTUM TRN* 1* 1686437* 1330219954\	\$31,565.71
09/07/2023	EFT Paymen OPTUM TRN* 1* 6744537* 1330219954\	\$45,687.54
09/07/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 907000629438* 1954518790~	\$49,190.41
09/07/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0378540* 1262326076* 000001011~	\$336,208.91
09/08/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826421887* 1542174068\	\$17.69
09/08/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101783452* 1341858379\	\$48.61
09/08/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1860783* 1330704304\	\$435.71
09/08/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826426738* 1542174068\	\$734.00
09/08/2023	HCCLAIMPMT CIGNA TRN* 1* 230905090027521* 1591031071\	\$790.73
09/08/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 913000435144* 1954518790~	\$947.21
09/08/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 901000604039* 1954518790~	\$1,387.83
09/08/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101883856* 1341858379\	\$2,303.18
09/08/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0803427933* 1954402957\	\$3,405.83
09/08/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 901000604040* 1954518790~	\$3,868.38
09/08/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101883858* 1341858379\	\$4,776.68
09/08/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1101883857* 1341858379\	\$9,510.67
09/08/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0379980* 1262326076* 000001011~	\$20,047.29
09/08/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 913000435143* 1954518790~	\$79,453.15
09/11/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 393855251* 1954472349\	\$34.58
09/11/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4013281* 1954310407\	\$80.50
09/11/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102198752* 1341858379\	\$109.42
09/11/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826427999* 1542174068\	\$235.76
09/11/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 393855153* 1954472349\	\$257.39
09/11/2023	HCCLAIMPMT CIGNA TRN* 1* 230907090052290* 1591031071\	\$260.31
09/11/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 964000594077* 1954518790~	\$329.52
09/11/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826428342* 1542174068\	\$805.36
09/11/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042708* 1954310407\	\$923.67
09/11/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 964000594078* 1954518790~	\$959.70

Business Checking - Analysis-XXXXXXXX0595 (continued)

Electronic Credits (continued)

Date	Description	Amount
09/11/2023	HCCLAIMPMT AETNA A06 TRN* 1* 823249000398182* 1066033492\	\$1,078.37
09/11/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1412790* 1465596242\	\$2,688.21
09/11/2023	HCCLAIMPMT AETNA AS01 TRN* 1* 823249000398174* 1066033492\	\$3,751.24
09/11/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102198754* 1341858379\	\$4,189.27
09/11/2023	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1217699* 1954690845\	\$4,567.04
09/11/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102198753* 1341858379\	\$7,714.34
09/11/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000192821* 1205327501\	\$8,057.46
09/11/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1413075* 1465596242\	\$8,996.99
09/11/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 964000594075* 1954518790~	\$9,855.27
09/11/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 964000594076* 1954518790~	\$12,237.38
09/11/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0381054* 1262326076* 000001011~	\$29,145.25
09/11/2023	HCCLAIMPMT CA DHCS MEDI-CAL TRN* 1* 050070667* 1680217053~	\$90,687.47
09/12/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826429378* 1542174068\	\$92.60
09/12/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102461873* 1341858379\	\$150.56
09/12/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000192975* 1205327501\	\$459.45
09/12/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0809743025* 1954402957\	\$710.00
09/12/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102461874* 1341858379\	\$1,140.37
09/12/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102319226* 1341858379\	\$1,347.87
09/12/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826429728* 1542174068\	\$1,814.23
09/12/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102461875* 1341858379\	\$2,283.66
09/12/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 982000571029* 1954518790~	\$3,158.65
09/12/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8120081* 1330219954\	\$3,701.42
09/12/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 982000571027* 1954518790~	\$4,469.26
09/12/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826429037* 1542174068\	\$8,952.21
09/12/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102461876* 1341858379\	\$13,855.26
09/12/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826429036* 1542174068\	\$14,853.91
09/12/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0382184* 1262326076* 000001011~	\$18,658.42
09/12/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 982000571030* 1954518790~	\$24,794.02
09/12/2023	HCCLAIMPMT AETNA A06 TRN* 1* 823250000248766* 1066033492\	\$27,568.91
09/12/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102461877* 1341858379\	\$32,333.80
09/12/2023	EFT Paymen OPTUM TRN* 1* 6744887* 1330219954\	\$70,086.93
09/13/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1863898* 1330704304\	\$60.64
09/13/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102627951* 1341858379\	\$139.57
09/13/2023	HCCLAIMPMT HEALTH CARE LA, TRN* 1* 4541177* 1954298276\	\$169.13
09/13/2023	HCCLAIMPMT EMANATE CITRUS V TRN* 1* 7708391* 1956006469\	\$199.52
09/13/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042819* 1954310407\	\$226.72
09/13/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102685090* 1341858379\	\$282.21
09/13/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102664331* 1341858379\	\$346.32
09/13/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102627954* 1341858379\	\$570.13
09/13/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 999000686214* 1954518790~	\$733.16
09/13/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102627952* 1341858379\	\$763.60
09/13/2023	HCCLAIMPMT ASSOCIATED HISPA TRN* 1* 2320508* 1954365761\	\$836.56
09/13/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826430587* 1542174068\	\$1,037.76
09/13/2023	EFT Paymen OPTUM TRN* 1* 1686781* 1330219954\	\$1,535.00
09/13/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1413813* 1465596242\	\$1,871.84
09/13/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000193205* 1205327501\	\$3,114.76
09/13/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0383287* 1262326076* 000001011~	\$3,426.94
09/13/2023	GEN-PYMT LA COUNTY NTE* 202309105847241 * A2400143993 * 504132	\$3,582.85
09/13/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8120212* 1330219954\	\$4,142.61
09/13/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826430588* 1542174068\	\$4,544.24
09/13/2023	EFT Paymen HealthCare Partn TRN* 1* 222623995* 1330219954\	\$7,076.58
09/13/2023	APA ACO 4934 ACH BATCH	\$19,830.76
09/13/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 999000686215* 1954518790~	\$35,736.44
09/13/2023	EFT Paymen OPTUM TRN* 1* 1686870* 1330219954\	\$71,943.28
09/13/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102627953* 1341858379\	\$76,874.86
09/13/2023	EFT Paymen OPTUM TRN* 1* 6745007* 1330219954\	\$124,538.27
09/14/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 915000454109* 1954518790~	\$28.36
09/14/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102707294* 1341858379\	\$135.93

Business Checking - Analysis-XXXXXXXXX0595 (continued)**Electronic Credits (continued)**

Date	Description	Amount
09/14/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1102707293* 1341858379\	\$374.61
09/14/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0801361319* 1954402957\	\$853.88
09/14/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826431427* 1542174068\	\$980.54
09/14/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 915000454108* 1954518790~	\$1,278.25
09/14/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000193352* 1205327501\	\$8,684.84
09/14/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103031065* 1341858379\	\$9,887.28
09/14/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826431426* 1542174068\	\$17,629.43
09/14/2023	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 26066840* 1912155938~	\$18,219.43
09/14/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103031064* 1341858379\	\$47,539.15
09/14/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 915000454107* 1954518790~	\$59,139.63
09/14/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0384076* 1262326076* 000001011~	\$169,968.25
09/15/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042892* 1954310407\	\$31.29
09/15/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103245421* 1341858379\	\$71.94
09/15/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4013330* 1954310407\	\$73.40
09/15/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1869466* 1330704304\	\$236.12
09/15/2023	HCCLAIMPMT CIGNA TRN* 1* 230912090041921* 1591031071\	\$991.82
09/15/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103179323* 1341858379\	\$1,566.46
09/15/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 968000471316* 1954518790~	\$2,721.18
09/15/2023	HCCLAIMPMT GLOBAL CARE MEDI TRN* 1* 3263860* 1954439760\	\$3,172.00
09/15/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 968000471315* 1954518790~	\$4,311.33
09/15/2023	EFT Paymen OPTUM TRN* 1* 1687246* 1330219954\	\$8,104.97
09/15/2023	HCCLAIMPMT VALLEY PRESBYTER TRN* 1* 8102063* 1951945832\	\$9,059.48
09/15/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103179324* 1341858379\	\$9,248.92
09/15/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826439527* 1542174068\	\$10,112.79
09/15/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826434853* 1542174068\	\$10,584.72
09/15/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1414530* 1465596242\	\$12,549.62
09/15/2023	EFT Paymen HealthCare Partn TRN* 1* 222626241* 1330219954\	\$13,353.54
09/15/2023	EFT Paymen OPTUM TRN* 1* 6745355* 1330219954\	\$15,892.05
09/15/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 968000471314* 1954518790~	\$16,999.38
09/15/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0385297* 1262326076* 000001011~	\$37,681.47
09/18/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103277669* 1341858379\	\$93.59
09/18/2023	HCCLAIMPMT SOUTHERN CALIFOR TRN* 1* 1217839* 1954690845\	\$131.47
09/18/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103277668* 1341858379\	\$177.26
09/18/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2042984* 1954310407\	\$295.26
09/18/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1415247* 1465596242\	\$495.78
09/18/2023	HCCLAIMPMT PNC-ECHO TRN* 1* 1103717200* 1341858379\	\$756.64
09/18/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 988000554242* 1954518790~	\$1,204.67
09/18/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1414912* 1465596242\	\$1,304.20
09/18/2023	HCCLAIMPMT AETNA A06 TRN* 1* 823256000452730* 1066033492\	\$2,788.14
09/18/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 396676112* 1954472349\	\$2,868.00
09/18/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103443564* 1341858379\	\$4,817.06
09/18/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826441263* 1542174068\	\$6,267.14
09/18/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826440844* 1542174068\	\$7,263.14
09/18/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103443563* 1341858379\	\$10,319.48
09/18/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 988000554243* 1954518790~	\$12,421.78
09/18/2023	APA ACO 4934 ACH BATCH	\$16,933.07
09/18/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103443565* 1341858379\	\$38,948.47
09/18/2023	HCCLAIMPMT CA DHCS MEDI-CAL TRN* 1* 050076482* 1680217053~	\$56,165.55
09/18/2023	HCCLAIMPMT NORIDIAN JEA TRN* 1* EFT0386264* 1262326076* 000001011~	\$139,006.46
09/19/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103649732* 1341858379\	\$29.52
09/19/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4013384* 1954310407\	\$137.18
09/19/2023	HCCLAIMPMT CLEVERCAREGS3 TRN* 1* 1118202* 1842272340\	\$208.50
09/19/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8121455* 1330219954\	\$757.64
09/19/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 938000384099* 1954518790~	\$972.42
09/19/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103649733* 1341858379\	\$1,594.88
09/19/2023	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 26154954* 1912155938~	\$6,968.90
09/19/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0809744106* 1954402957\	\$9,125.22
09/19/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103649734* 1341858379\	\$14,021.31
09/19/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000193888* 1205327501\	\$15,384.98
09/19/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826442016* 1542174068\	\$32,214.10
09/19/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 938000384098* 1954518790~	\$36,313.57
09/20/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103770889* 1341858379\	\$106.04

3660 Wilshire Blvd Ste PH-A
 Los Angeles, CA 90010

BEVERLY COMMUNITY HOSPITAL

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Customer Number: XXXXXXXX0595

Business Checking - Analysis-XXXXXXXX0595 (continued)

Electronic Credits (continued)

Date	Description	Amount
09/20/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826443359* 1542174068\	\$130.24
09/20/2023	36 TREAS 310 MISC PAY 951816005360012	\$179.06
09/20/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1873000* 1330704304\	\$213.14
09/20/2023	HCCLAIMPMT KHSMLCAL TRN* 1* 368432* 1770392231\	\$246.02
09/20/2023	HCCLAIMPMT CIGNA EDGE TRANS TRN* 1* 603500796452* 1591031071~	\$323.52
09/20/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2043067* 1954310407\	\$448.87
09/20/2023	HCCLAIMPMT ASSOCIATED HISPA TRN* 1* 2320994* 1954365761\	\$524.71
09/20/2023	HCCLAIMPMT HEALTH CARE LA, TRN* 1* 4544839* 1954298276\	\$840.23
09/20/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103847261* 1341858379\	\$994.13
09/20/2023	36 TREAS 310 MISC PAY 951816005360012	\$1,470.35
09/20/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103847260* 1341858379\	\$2,738.66
09/20/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 990007973565* 1954518790~	\$2,865.39
09/20/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 990007973564* 1954518790~	\$3,054.31
09/20/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103847259* 1341858379\	\$4,452.01
09/20/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1415965* 1465596242\	\$6,108.51
09/20/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8121603* 1330219954\	\$8,677.14
09/20/2023	EFT Paymen OPTUM TRN* 1* 1687432* 1330219954\	\$30,430.00
09/20/2023	EFT Paymen OPTUM TRN* 1* 6745573* 1330219954\	\$109,589.83
09/21/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 398049576* 1954472349\	\$34.58
09/21/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 978000628420* 1954518790~	\$52.63
09/21/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1103927295* 1341858379\	\$72.82
09/21/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 398049464* 1954472349\	\$215.47
09/21/2023	HCCLAIMPMT EMANATE CITRUS V TRN* 1* 7708441* 1956006469\	\$225.15
09/21/2023	HCCLAIMPMT HEALTH CARE LA, TRN* 1* 4545652* 1954298276\	\$251.41
09/21/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104026810* 1341858379\	\$295.26
09/21/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2043134* 1954310407\	\$434.10
09/21/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826443680* 1542174068\	\$459.71
09/21/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104026809* 1341858379\	\$2,223.52
09/21/2023	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 26218185* 1912155938~	\$13,546.68
09/21/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000194236* 1205327501\	\$15,814.33
09/21/2023	EFT Paymen HealthCare Partn TRN* 1* 222627832* 1330219954\	\$17,097.89
09/21/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104026808* 1341858379\	\$24,081.36
09/21/2023	EFT Paymen OPTUM TRN* 1* 1687564* 1330219954\	\$43,549.65
09/21/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 978000628418* 1954518790~	\$125,089.78
09/21/2023	EFT Paymen OPTUM TRN* 1* 6745671* 1330219954\	\$135,490.81
09/22/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104288274* 1341858379\	\$72.82
09/22/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826447372* 1542174068\	\$181.06
09/22/2023	HCCLAIMPMT EMANATE CITRUS V TRN* 1* 7708447* 1956006469\	\$239.63
09/22/2023	HCCLAIMPMT BELLA VISTA MEDI TRN* 1* 1095953* 1954457453\	\$884.97
09/22/2023	EFT Paymen OPTUM TRN* 1* 1687876* 1330219954\	\$1,460.00
09/22/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1416594* 1465596242\	\$1,685.60
09/22/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104231938* 1341858379\	\$1,957.01
09/22/2023	EFT Paymen HealthCare Partn TRN* 1* 222629908* 1330219954\	\$3,925.38
09/22/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826451874* 1542174068\	\$4,100.00
09/22/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 988000602585* 1954518790~	\$9,303.40
09/22/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104231936* 1341858379\	\$11,610.41
09/22/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104231937* 1341858379\	\$13,112.25
09/22/2023	HCCLAIMPMT WELLCARE OF CALI TRN* 1* 1000194368* 1205327501\	\$17,453.33
09/22/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1416323* 1465596242\	\$17,453.33
09/22/2023	HCCLAIMPMT CIGNA TRN* 1* 230919090040760* 1591031071\	\$24,374.24
09/22/2023	EFT Paymen OPTUM TRN* 1* 6745981* 1330219954\	\$41,123.98
09/25/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104323039* 1341858379\	\$6.47
09/25/2023	HCCLAIMPMT PNC-ECHO TRN* 1* 1104787913* 1341858379\	\$18.90
09/25/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 947000484764* 1954518790~	\$119.09
09/25/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104521467* 1341858379\	\$136.55
09/25/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104521468* 1341858379\	\$192.23
09/25/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 398975347* 1954472349\	\$228.54
09/25/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4013448* 1954310407\	\$446.19

Business Checking - Analysis-XXXXXXXXX0595 (continued)**Electronic Credits (continued)**

Date	Description	Amount
09/25/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2043281* 1954310407\	\$1,066.53
09/25/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1417602* 1465596242\	\$1,107.27
09/25/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104521469* 1341858379\	\$1,344.68
09/25/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104521470* 1341858379\	\$2,972.33
09/25/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 947000484763* 1954518790~	\$3,427.67
09/25/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 947000484761* 1954518790~	\$9,752.55
09/25/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104521471* 1341858379\	\$13,957.03
09/25/2023	APA ACO 4934 ACH BATCH	\$21,375.46
09/25/2023	HCCLAIMPMT CA DHCS MEDI-CAL TRN* 1* 050082497* 1680217053~	\$53,034.28
09/25/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1417022* 1465596242\	\$62,036.89
09/26/2023	HCCLAIMPMT HEALTH CARE LA, TRN* 1* 4547150* 1954298276\	\$9.64
09/26/2023	GEN-PYMT LA COUNTY NTE* 202309215863072 * A2400175909 * 504132	\$10.00
09/26/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826453821* 1542174068\	\$28.49
09/26/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104716110* 1341858379\	\$203.27
09/26/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104716112* 1341858379\	\$1,398.88
09/26/2023	HCCLAIMPMT GLOBAL CARE MEDI TRN* 1* 3265686* 1954439760\	\$1,853.34
09/26/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104716111* 1341858379\	\$10,164.11
09/26/2023	EFT Paymen OPTUM TRN* 1* 6746198* 1330219954\	\$63,845.00
09/27/2023	HCCLAIMPMT ASSOCIATED HISPA TRN* 1* 2321418* 1954365761\	\$10.12
09/27/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104979773* 1341858379\	\$74.00
09/27/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104944346* 1341858379\	\$96.77
09/27/2023	CLAIMS IEHP CLAIMS2 TRN* 1* EFT-1887255* 1330704304\	\$122.04
09/27/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 955000706154* 1954518790~	\$145.25
09/27/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4013481* 1954310407\	\$166.32
09/27/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2043394* 1954310407\	\$316.89
09/27/2023	HCCLAIMPMT GLOBAL CARE MEDI TRN* 1* 3265991* 1954439760\	\$664.55
09/27/2023	HCCLAIMPMT HEALTH CARE LA, TRN* 1* 4548618* 1954298276\	\$715.43
09/27/2023	HCCLAIMPMT Health Net, LLC TRN* 1* 0809745435* 1954402957\	\$773.00
09/27/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 970000567406* 1954518790~	\$1,305.30
09/27/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104944345* 1341858379\	\$1,668.05
09/27/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1418569* 1465596242\	\$2,132.21
09/27/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104944347* 1341858379\	\$2,479.48
09/27/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8122886* 1330219954\	\$3,446.45
09/27/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826455723* 1542174068\	\$3,674.38
09/27/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 955000706153* 1954518790~	\$6,345.27
09/27/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 970000567405* 1954518790~	\$7,477.83
09/27/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1104944348* 1341858379\	\$29,294.81
09/28/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826456148* 1542174068\	\$28.49
09/28/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105606912* 1341858379\	\$58.13
09/28/2023	HCCLAIMPMT BELLA VISTA MEDI TRN* 1* 1096319* 1954457453\	\$275.13
09/28/2023	HCCLAIMPMT VALLEY PRESBYTER TRN* 1* 9917177* 1951945832\	\$803.66
09/28/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105120837* 1341858379\	\$1,252.42
09/28/2023	HCCLAIMPMT ASSOCIATED HISPA TRN* 1* 2321574* 1954365761\	\$1,386.80
09/28/2023	HCCLAIMPMT ZP NETWORKME400 TRN* 1* 400693471* 1954472349\	\$1,550.00
09/28/2023	HCCLAIMPMT WPS-TMEP CONTRAC TRN* 1* 2407006923* 1391268299* WPSTDEFIC\	\$1,600.00
09/28/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105120839* 1341858379\	\$1,758.12
09/28/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105120836* 1341858379\	\$10,661.01
09/28/2023	HCCLAIMPMT HEALTH NET COMMU TRN* 1* 0826456638* 1542174068\	\$13,106.84
09/28/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105120838* 1341858379\	\$15,941.87
09/28/2023	HCCLAIMPMT CENTRAL HEALTH P TRN* 1* 26367660* 1912155938~	\$18,255.22
09/28/2023	EFT Paymen HealthCare Partn TRN* 1* 222631506* 1330219954\	\$25,626.86
09/28/2023	EFT Paymen OPTUM TRN* 1* 1688141* 1330219954\	\$68,120.61
09/28/2023	EFT Paymen OPTUM TRN* 1* 6746315* 1330219954\	\$105,675.91
09/29/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 4013508* 1954310407\	\$101.46
09/29/2023	HCCLAIMPMT EMANATE CITRUS V TRN* 1* 7708491* 1956006469\	\$268.51
09/29/2023	HCCLAIMPMT DIGNITY HEALTH TRN* 1* 2043511* 1954310407\	\$863.12
09/29/2023	HCCLAIMPMT LACAREHEALTHPLAN TRN* 1* 946000644256* 1954518790~	\$1,221.41
09/29/2023	EFT Paymen OPTUM CARE NETWO TRN* 1* 8123597* 1330219954\	\$2,717.61
09/29/2023	HCCLAIMPMT AHP CA CLAIM TRN* 1* 1420097* 1465596242\	\$2,816.18
09/29/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105349501* 1341858379\	\$3,089.25
09/29/2023	EFT Paymen HealthCare Partn TRN* 1* 222633589* 1330219954\	\$5,880.00
09/29/2023	HCCLAIMPMT HNB - ECHO TRN* 1* 1105349502* 1341858379\	\$10,456.70

Date	Amount	Date	Amount	Date	Amount
09/01/2023	\$500,000.00	09/06/2023	\$498,510.74	09/08/2023	\$499,870.73
09/05/2023	\$499,868.95	09/07/2023	\$499,151.88	09/11/2023	\$496,531.70

Business Checking - Analysis-XXXXXXXXX0595 (continued)






Daily Balances (continued)

Date	Amount	Date	Amount	Date	Amount
09/12/2023	\$496,761.70	09/19/2023	\$500,000.00	09/26/2023	\$496,600.29
09/13/2023	\$498,957.98	09/20/2023	\$500,000.00	09/27/2023	\$494,083.13
09/14/2023	\$500,000.00	09/21/2023	\$499,778.90	09/28/2023	\$499,002.76
09/15/2023	\$497,580.46	09/22/2023	\$500,000.00	09/29/2023	\$484,705.54
09/18/2023	\$500,000.00	09/25/2023	\$496,155.41		

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXXX0617	\$0.00

Business Checking - Analysis-XXXXXXXXX0617

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	4 Credit(s) This Period	\$579.89
	6 Debit(s) This Period	\$579.89
09/29/2023	Ending Balance	\$0.00

Other Credits

Date	Description	Amount
09/06/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$281.10
09/21/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$145.87
09/26/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$123.07
09/27/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$29.85

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
11340	09/06/2023	\$93.70	11356*	09/06/2023	\$93.70	11360*	09/26/2023	\$123.07
11346*	09/06/2023	\$93.70	11358*	09/21/2023	\$145.87	11362*	09/27/2023	\$29.85

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount
09/06/2023	\$0.00	09/26/2023	\$0.00
09/21/2023	\$0.00	09/27/2023	\$0.00

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

Please report any errors or omissions within 30 days. Otherwise the statement will be considered correct and checks genuine. All deposits and credits are subject to final payment.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

Telephone or write us at the number or address shown on the front of this statement as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. If you have a question concerning your statement, please be prepared to:

- Tell us your name and account number.
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 days (5 business days if involving a VISA transaction, 20 business days if involving a new account) after we hear from you and will correct any error promptly.

If we need more time, however, we may take up to 45 days (90 days involving a new account, point-of-sale, or foreign-initiated transaction) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days (5 business days if involving a VISA transaction, 20 business days involving a new account) for the amount you think is in error, so that you will have the use of the money during the time that it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. Your account is considered a new account for the first 30 days after the first deposit is made, unless each of you already has an established account with us before this account was opened.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY





A hold for uncollected funds may be placed on funds deposited by check or similar instruments. This could delay your ability to withdraw such funds. The delay, if any, would not exceed the period of time permitted by law. For a complete copy of our Funds Availability Policy, please contact your branch or write us at: Hanmi Bank, 3660 Wilshire Blvd., Penthouse Suite A, Los Angeles, CA 90010.

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXXX0625	\$0.00

Business Checking - Analysis-XXXXXXXXX0625

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	13 Credit(s) This Period	\$41,730.67
	51 Debit(s) This Period	\$41,730.67
09/29/2023	Ending Balance	\$0.00

Other Credits

Date	Description	Amount
09/05/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$131.05
09/06/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$1,208.16
09/07/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$848.12
09/11/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$3,468.30
09/12/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$3,238.30
09/13/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$1,042.02
09/15/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$2,419.54
09/21/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$75.23
09/25/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$3,844.59
09/26/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$3,276.64
09/27/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$5,887.02
09/28/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$997.24
09/29/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$15,294.46

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
15458	09/06/2023	\$151.47	15497	09/07/2023	\$232.68	15507	09/25/2023	\$3,238.30
15464*	09/07/2023	\$173.79	15498	09/13/2023	\$1,042.02	15508	09/25/2023	\$9.60
15477*	09/07/2023	\$200.27	15499	09/12/2023	\$3,238.30	15509	09/25/2023	\$530.39
15478	09/06/2023	\$14.67	15500	09/11/2023	\$3,238.30	15510	09/26/2023	\$7.20
15489*	09/06/2023	\$1,042.02	15502*	09/15/2023	\$2,419.54	15511	09/26/2023	\$1,696.26
15493*	09/05/2023	\$3.60	15503	09/21/2023	\$1.20	15512	09/27/2023	\$119.75
15494	09/05/2023	\$127.45	15504	09/26/2023	\$40.29	15513	09/27/2023	\$126.88
15495	09/07/2023	\$241.38	15505	09/21/2023	\$74.03	15514	09/27/2023	\$230.00
15496	09/11/2023	\$230.00	15506	09/27/2023	\$1,042.02	15515	09/26/2023	\$31.48

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>• Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>• Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>• Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	• Verified debit card purchases?	• Computed cancelled checks to check stubs?	• Verified additions and subtractions?	• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?	BALANCE
• Accounted for bank charges?	• Verified debit card purchases?												
• Computed cancelled checks to check stubs?	• Verified additions and subtractions?												
• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?												

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IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

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Business Checking - Analysis-XXXXXXXX0625 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
15516	09/27/2023	\$2,622.04	15524	09/28/2023	\$158.05	15536*	09/26/2023	\$886.71
15517	09/27/2023	\$1,132.51	15525	09/26/2023	\$159.70	15537	09/27/2023	\$123.11
15518	09/26/2023	\$455.00	15528*	09/28/2023	\$172.00	15538	09/27/2023	\$23.14
15519	09/25/2023	\$28.54	15529	09/28/2023	\$242.38	15539	09/28/2023	\$2.40
15520	09/25/2023	\$37.76	15530	09/29/2023	\$2,292.50	15540	09/29/2023	\$12,774.81
15521	09/28/2023	\$151.47	15531	09/28/2023	\$135.47	15545*	09/29/2023	\$165.00
15522	09/27/2023	\$151.47	15533*	09/28/2023	\$135.47	15546	09/29/2023	\$2.40
15523	09/27/2023	\$158.05	15534	09/27/2023	\$158.05	15547	09/29/2023	\$59.75

* Indicates skipped check number






Daily Balances

Date	Amount	Date	Amount	Date	Amount
09/05/2023	\$0.00	09/13/2023	\$0.00	09/27/2023	\$0.00
09/06/2023	\$0.00	09/15/2023	\$0.00	09/28/2023	\$0.00
09/07/2023	\$0.00	09/21/2023	\$0.00	09/29/2023	\$0.00
09/11/2023	\$0.00	09/25/2023	\$0.00		
09/12/2023	\$0.00	09/26/2023	\$0.00		

RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0633	\$0.00

Business Checking - Analysis-XXXXXXXX0633

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$0.00

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

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INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 REFUND ACCOUNT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0641	\$19,932.64

Business Checking - Analysis-XXXXXXXX0641

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$19,932.64
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$19,932.64

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>• Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>• Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>• Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	• Verified debit card purchases?	• Computed cancelled checks to check stubs?	• Verified additions and subtractions?	• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?	BALANCE
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• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?												

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 NON MEDI-CAL RECEIPT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0668	\$0.30

Business Checking - Analysis-XXXXXXXX0668

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.30
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$0.30

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 MMKT FUNDED DEPRECIATION ACCT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Money Market	XXXXXXXX0676	\$250,020.30

Business Money Market-XXXXXXXX0676

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$249,901.17
	1 Credit(s) This Period	\$119.13
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$250,020.30

Interest Summary

Description	Amount
Interest Earned From 09/01/2023 Through 09/29/2023	
Annual Percentage Yield Earned	0.60%
Interest Days	29
Interest Earned	\$119.13
Interest Paid This Period	\$119.13
Interest Paid Year-to-Date	\$4,425.61
Average Ledger Balance	\$249,901.17

Other Credits

Date	Description	Amount
09/29/2023	INTEREST	\$119.13

Daily Balances

Date	Amount
09/29/2023	\$250,020.30

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

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IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 GENERAL RESERVE ACCOUNT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXXX0684	\$0.00

Business Checking - Analysis-XXXXXXXXX0684

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$0.00

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 AHC HEALTH NET CAPITATION ACCT
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0692	\$91,925.41

Business Checking - Analysis-XXXXXXXX0692

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$91,925.41
	0 Credit(s) This Period	\$0.00
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$91,925.41

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX0706	\$0.00

Business Checking - Analysis-XXXXXXXX0706

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$1,511,933.13
	0 Credit(s) This Period	\$0.00
	1 Debit(s) This Period	\$1,511,933.13
09/29/2023	Ending Balance	\$0.00

Other Debits

Date	Description	Amount
09/05/2023	248364 Internet Transfer to 500290552 on 9/05/23 AT 12:23 Requested by Alice Che	\$1,511,933.13

Daily Balances

Date	Amount
09/05/2023	\$0.00

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX1486	\$267,253.48

Business Checking - Analysis-XXXXXXXX1486

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$261,662.80
	1 Credit(s) This Period	\$7,415.50
	5 Debit(s) This Period	\$1,824.82
09/29/2023	Ending Balance	\$267,253.48

Electronic Credits

Date	Description	Amount
09/20/2023	MOLINA HEALTHCAR MOLINAACH 01221650	\$7,415.50

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
365	09/08/2023	\$1,166.69	367	09/18/2023	\$333.34	1773	09/25/2023	\$69.72
366	09/13/2023	\$198.72	1772*	09/29/2023	\$56.35			

* Indicates skipped check number

Daily Balances

Date	Amount	Date	Amount	Date	Amount
09/08/2023	\$260,496.11	09/18/2023	\$259,964.05	09/25/2023	\$267,309.83
09/13/2023	\$260,297.39	09/20/2023	\$267,379.55	09/29/2023	\$267,253.48

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>• Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>• Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>• Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	• Verified debit card purchases?	• Computed cancelled checks to check stubs?	• Verified additions and subtractions?	• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?	BALANCE
• Accounted for bank charges?	• Verified debit card purchases?												
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• Verified ATM withdrawals and fees?	• Computed deposit amount on statement to your checkbook?												

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX4870	\$0.00

Business Checking - Analysis-XXXXXXXX4870

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	1 Credit(s) This Period	\$129.27
	1 Debit(s) This Period	\$129.27
09/29/2023	Ending Balance	\$0.00

Other Credits

Date	Description	Amount
09/08/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXX0595	\$129.27

Checks Cleared

Check Nbr	Date	Amount
421	09/08/2023	\$129.27

* Indicates skipped check number

Daily Balances

Date	Amount
09/08/2023	\$0.00

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

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 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX5079	\$599,228.10

Business Checking - Analysis-XXXXXXXX5079

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$0.00
	1 Credit(s) This Period	\$599,228.10
	0 Debit(s) This Period	\$0.00
09/29/2023	Ending Balance	\$599,228.10

Electronic Credits

Date	Description	Amount
09/15/2023	ACH HN Community Sol RMR* IV* 0000017737* * 0599228.10\	\$599,228.10

Daily Balances

Date	Amount
09/15/2023	\$599,228.10

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
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Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX5095	\$1,592,585.27

Business Checking - Analysis-XXXXXXXX5095

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$3,263,957.23
	0 Credit(s) This Period	\$0.00
	132 Debit(s) This Period	\$1,671,371.96
09/29/2023	Ending Balance	\$1,592,585.27

Checks Cleared

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
17984	09/19/2023	\$55.04	18070	09/08/2023	\$2,257.91	18093	09/15/2023	\$339.07
17995*	09/01/2023	\$136.87	18071	09/05/2023	\$173.72	18094	09/14/2023	\$194.08
17996	09/01/2023	\$6,200.00	18072	09/07/2023	\$246.31	18095	09/18/2023	\$193.71
18026*	09/07/2023	\$366.60	18073	09/06/2023	\$17,437.27	18096	09/18/2023	\$16,720.38
18045*	09/05/2023	\$2,130.88	18074	09/06/2023	\$429.46	18097	09/15/2023	\$17,773.99
18052*	09/06/2023	\$11,690.28	18075	09/06/2023	\$362.66	18098	09/14/2023	\$99.20
18053	09/05/2023	\$23,380.56	18076	09/06/2023	\$1,725.14	18099	09/14/2023	\$49.60
18054	09/07/2023	\$555.72	18077	09/06/2023	\$126.93	18100	09/15/2023	\$8,791.22
18055	09/19/2023	\$1,510.00	18078	09/19/2023	\$1,937.91	18101	09/14/2023	\$463.83
18056	09/07/2023	\$15.36	18079	09/06/2023	\$162.28	18102	09/18/2023	\$59.60
18057	09/13/2023	\$171.16	18080	09/05/2023	\$424.06	18103	09/14/2023	\$49.60
18058	09/08/2023	\$73,201.91	18081	09/05/2023	\$860.39	18104	09/18/2023	\$1,081.49
18059	09/07/2023	\$3,910.07	18082	09/06/2023	\$239.02	18105	09/15/2023	\$404.59
18060	09/05/2023	\$161.29	18083	09/06/2023	\$9,016.67	18106	09/15/2023	\$13,864.69
18061	09/06/2023	\$63.64	18084	09/06/2023	\$181,412.48	18107	09/18/2023	\$14,923.30
18062	09/06/2023	\$427.82	18085	09/07/2023	\$272,118.72	18108	09/15/2023	\$49.60
18063	09/08/2023	\$10,512.90	18086	09/06/2023	\$147,196.93	18109	09/13/2023	\$281.30
18064	09/06/2023	\$922.33	18087	09/06/2023	\$177,928.18	18110	09/13/2023	\$3.32
18065	09/06/2023	\$106.05	18088	09/07/2023	\$220,795.40	18111	09/14/2023	\$185.82
18066	09/05/2023	\$6,126.56	18089	09/07/2023	\$266,892.27	18112	09/15/2023	\$397.08
18067	09/06/2023	\$49.60	18090	09/14/2023	\$69.09	18113	09/14/2023	\$170.78
18068	09/05/2023	\$978.41	18091	09/14/2023	\$80.68	18114	09/18/2023	\$1,821.24
18069	09/05/2023	\$99.20	18092	09/21/2023	\$3,561.94	18115	09/26/2023	\$3,267.84

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
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Business Checking - Analysis-XXXXXXX5095 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
18116	09/25/2023	\$91.69	18137	09/18/2023	\$278.60	18158	09/27/2023	\$161.44
18117	09/19/2023	\$7,315.47	18138	09/20/2023	\$145.16	18159	09/26/2023	\$109.42
18118	09/20/2023	\$98.41	18139	09/20/2023	\$808.15	18160	09/27/2023	\$623.02
18119	09/22/2023	\$443.17	18140	09/25/2023	\$2,247.32	18161	09/28/2023	\$97.58
18120	09/19/2023	\$120.59	18141	09/18/2023	\$124.96	18162	09/26/2023	\$8,256.06
18121	09/21/2023	\$98.05	18142	09/18/2023	\$491.64	18164*	09/27/2023	\$712.25
18122	09/20/2023	\$245.41	18143	09/20/2023	\$548.23	18165	09/26/2023	\$199.40
18123	09/20/2023	\$2,714.29	18144	09/18/2023	\$192.75	18166	09/28/2023	\$283.29
18124	09/20/2023	\$743.24	18145	09/20/2023	\$392.88	18167	09/28/2023	\$391.22
18125	09/20/2023	\$264.36	18146	09/20/2023	\$338.74	18168	09/28/2023	\$851.25
18126	09/19/2023	\$119.31	18147	09/19/2023	\$8,186.23	18169	09/26/2023	\$416.96
18127	09/20/2023	\$298.52	18148	09/20/2023	\$376.64	18170	09/25/2023	\$395.08
18128	09/18/2023	\$49.60	18149	09/19/2023	\$418.47	18171	09/25/2023	\$80.70
18129	09/20/2023	\$1,131.57	18150	09/26/2023	\$182.39	18172	09/29/2023	\$5,678.14
18130	09/19/2023	\$358.55	18151	09/28/2023	\$49.60	18173	09/26/2023	\$324.76
18131	09/21/2023	\$1,369.82	18152	09/26/2023	\$325.67	18174	09/25/2023	\$13,028.37
18132	09/21/2023	\$793.01	18153	09/27/2023	\$42.91	18175	09/26/2023	\$49.60
18133	09/18/2023	\$37,453.75	18154	09/28/2023	\$152.39	18176	09/26/2023	\$348.40
18134	09/19/2023	\$239.92	18155	09/26/2023	\$243.09	18177	09/28/2023	\$511.94
18135	09/19/2023	\$13,009.62	18156	09/27/2023	\$1,983.89	18179*	09/27/2023	\$23,969.12
18136	09/19/2023	\$455.41	18157	09/27/2023	\$122.32	18180	09/27/2023	\$405.17

* Indicates skipped check number

Daily Balances






Date	Amount	Date	Amount	Date	Amount
09/01/2023	\$3,257,620.36	09/14/2023	\$1,821,296.92	09/22/2023	\$1,658,187.55
09/05/2023	\$3,223,285.29	09/15/2023	\$1,779,676.68	09/25/2023	\$1,642,344.39
09/06/2023	\$2,673,988.55	09/18/2023	\$1,706,285.66	09/26/2023	\$1,628,620.80
09/07/2023	\$1,909,088.10	09/19/2023	\$1,672,559.14	09/27/2023	\$1,600,600.68
09/08/2023	\$1,823,115.38	09/20/2023	\$1,664,453.54	09/28/2023	\$1,598,263.41
09/13/2023	\$1,822,659.60	09/21/2023	\$1,658,630.72	09/29/2023	\$1,592,585.27

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
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Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX5767	\$207,918.81

Business Checking - Analysis-XXXXXXXX5767

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$231,000.00
	0 Credit(s) This Period	\$0.00
	1 Debit(s) This Period	\$23,081.19
09/29/2023	Ending Balance	\$207,918.81

Other Debits

Date	Description	Amount
09/08/2023	Outgoing Wire 378449 Constellation New Energy-Gas	\$23,081.19

Daily Balances

Date	Amount
09/08/2023	\$207,918.81

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
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INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX8764	\$3,778,410.25

Business Checking - Analysis-XXXXXXXX8764

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$2,758,156.30
	28 Credit(s) This Period	\$8,015,106.29
	110 Debit(s) This Period	\$6,994,852.34
09/29/2023	Ending Balance	\$3,778,410.25

Electronic Credits

Date	Description	Amount
09/12/2023	Incoming Wire 69010341 BEVERLY COMMUNITY HOSPITAL ASSOCIAT 230912153235497	\$251,400.29
09/12/2023	Incoming Wire 69017750 BEVERLY COMMUNITY HOSPITAL ASSOCIAT	\$850,000.00

Other Credits

Date	Description	Amount
09/01/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$313,026.63
09/05/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$270,750.03
09/06/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$1,581,982.02
09/07/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$496,411.37
09/08/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$214,820.45
09/11/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$186,835.23
09/12/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$226,963.23
09/13/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$355,464.41
09/14/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$333,677.56
09/15/2023	DEBIT REVERSE FICTITIOUS CK#29463	\$3,975.80
09/15/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$168,706.81
09/18/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$764,661.35
09/19/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$237,295.68
09/20/2023	DEBIT REVERSE FICTITIOUS CK#2043	\$2,950.56
09/20/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$166,632.72
09/21/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$425,605.48
09/22/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$209,363.62
09/25/2023	DEBIT REVERSE FICTITIOUS CK#2060	\$2,950.56
09/25/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$179,674.33
09/26/2023	TRANSFER FROM Analyzed Bus Ckg ACCOUNT XXXXXXXXXXXXXXXXXXXXXXXX0595	\$72,450.37

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION	
Date or #	Amount	Date or #	Amount	Date or #	Amount		
						ENTER	
						BALANCE STATEMENT	
						ADD	
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT	
						SUBTOTAL	
						SUBTRACT	
						TOTAL CHECKS OUTSTANDING	
Total Checks Outstanding							
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you • Accounted for bank charges? • Verified debit card purchases? • Computed cancelled checks to check stubs? • Verified additions and subtractions? • Verified ATM withdrawals and fees? • Computed deposit amount on statement to your checkbook?							BALANCE

Please report any errors or omissions within 30 days. Otherwise the statement will be considered correct and checks genuine. All deposits and credits are subject to final payment.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFER

Telephone or write us at the number or address shown on the front of this statement as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on this statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. If you have a question concerning your statement, please be prepared to:

- Tell us your name and account number.
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

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INFORMATION ABOUT OUR FUNDS AVAILABILITY POLICY

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Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
132	09/05/2023	\$4,750.00	941*	09/08/2023	\$640.00	1017	09/06/2023	\$6,000.00
220*	09/05/2023	\$5,000.00	943*	09/06/2023	\$15,000.00	1018	09/14/2023	\$14,700.00
603*	09/01/2023	\$2,000.00	983*	09/01/2023	\$9,038.98	1019	09/08/2023	\$1,470.72
612*	09/05/2023	\$500.00	986*	09/05/2023	\$3,113.23	1020	09/12/2023	\$8,040.00
620*	09/07/2023	\$2,000.00	990*	09/06/2023	\$126,328.75	1021	09/19/2023	\$77,500.00
635*	09/27/2023	\$121.45	994*	09/05/2023	\$36.97	1023*	09/19/2023	\$7,000.00
644*	09/05/2023	\$230.52	995	09/06/2023	\$1.03	1024	09/11/2023	\$155.69
674*	09/13/2023	\$200.00	997*	09/01/2023	\$10,840.78	1025	09/12/2023	\$27,381.47
713*	09/05/2023	\$5,500.00	1000*	09/05/2023	\$464.51	1026	09/08/2023	\$70,879.16
714	09/18/2023	\$500.00	1004*	09/06/2023	\$6,770.00	1028*	09/01/2023	\$1,200.00
766*	09/01/2023	\$204.91	1009*	09/13/2023	\$9,500.00	1029	09/13/2023	\$200.00
801*	09/15/2023	\$975.71	1010	09/13/2023	\$7,000.00	1030	09/05/2023	\$275.54
819*	09/01/2023	\$1,340.00	1011	09/08/2023	\$7,500.00	1031	09/05/2023	\$610.00
885*	09/15/2023	\$275.63	1013*	09/12/2023	\$10,727.84	1032	09/07/2023	\$3,780.00
896*	09/01/2023	\$229.05	1014	09/18/2023	\$5,000.00	1033	09/13/2023	\$7,500.00
908*	09/05/2023	\$54,470.01	1015	09/15/2023	\$17,140.00	1034	09/22/2023	\$500.00
916*	09/29/2023	\$335.00	1016	09/11/2023	\$9,451.93	1035	09/13/2023	\$2,000.00

Business Checking - Analysis-XXXXXXXXX8764 (continued)

Checks Cleared (continued)

Check Nbr	Date	Amount	Check Nbr	Date	Amount	Check Nbr	Date	Amount
1036	09/08/2023	\$17,085.00	1071	09/19/2023	\$23,005.44	1087	09/19/2023	\$2,890.00
1037	09/08/2023	\$162,787.00	1072	09/20/2023	\$44,855.89	1088	09/13/2023	\$6,785.57
1038	09/12/2023	\$4,200.00	1073	09/20/2023	\$40,578.44	1095*	09/15/2023	\$16,093.54
1039	09/08/2023	\$6,000.00	1074	09/20/2023	\$49,000.00	1100*	09/25/2023	\$1,539.40
1040	09/15/2023	\$2,400.00	1075	09/20/2023	\$37,971.06	1104*	09/12/2023	\$5,956.77
1041	09/19/2023	\$3,500.00	1076	09/20/2023	\$45,000.00	1106*	09/18/2023	\$273.29
1042	09/08/2023	\$23,820.00	1077	09/20/2023	\$37,048.18	2043*	09/19/2023	\$2,950.56
1043	09/05/2023	\$5,000.00	1078	09/20/2023	\$45,000.00	2060*	09/22/2023	\$2,950.56
1044	09/12/2023	\$2,000.00	1079	09/20/2023	\$37,048.18	2083*	09/26/2023	\$2,950.56
1045	09/11/2023	\$5,000.00	1080	09/20/2023	\$49,000.00	2084	09/27/2023	\$2,980.56
1048*	09/07/2023	\$8,565.12	1081	09/20/2023	\$33,048.18	29463*	09/14/2023	\$3,975.80
1061*	09/14/2023	\$899.40	1085*	09/21/2023	\$45,000.00	29464	09/26/2023	\$3,975.80
1070*	09/19/2023	\$32,790.86	1086	09/21/2023	\$16,054.99			

* Indicates skipped check number

Daily Balances






Date	Amount	Date	Amount	Date	Amount
09/01/2023	\$2,776,013.69	09/13/2023	\$3,807,344.46	09/22/2023	\$4,498,853.46
09/05/2023	\$2,966,812.94	09/14/2023	\$3,322,265.73	09/25/2023	\$4,463,083.03
09/06/2023	\$4,394,695.18	09/15/2023	\$3,447,823.68	09/26/2023	\$4,528,607.04
09/07/2023	\$3,993,920.95	09/18/2023	\$4,206,711.74	09/27/2023	\$3,693,066.06
09/08/2023	\$3,918,559.52	09/19/2023	\$4,294,370.56	09/28/2023	\$3,532,556.19
09/11/2023	\$4,090,787.13	09/20/2023	\$4,045,403.91	09/29/2023	\$3,778,410.25
09/12/2023	\$5,360,844.57	09/21/2023	\$4,292,940.40		

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RETURN SERVICE REQUESTED

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
 DEBTOR-IN-POSSESSION
 CASE # 2:23-BK-12359-SK
 309 W BEVERLY BLVD
 MONTEBELLO CA 90640-4308

Managing Your Accounts

	Branch Name	Headquarters
	Mailing Address	3660 Wilshire Blvd., Ste PH-A Los Angeles, CA 90010
	Call Center (9AM-6PM, M-F)	(855) 773-8778
	Online Banking	www.Hanmi.com
	Mobile Banking	Hanmi Mobile Banking App

Summary of Accounts

Account Type	Account Number	Ending Balance
Business Checking - Analysis	XXXXXXXX8953	\$364.97

Business Checking - Analysis-XXXXXXXX8953

Account Summary

Date	Description	Amount
09/01/2023	Beginning Balance	\$394.93
	0 Credit(s) This Period	\$0.00
	1 Debit(s) This Period	\$29.96
09/29/2023	Ending Balance	\$364.97

Checks Cleared

Check Nbr	Date	Amount
13	09/22/2023	\$29.96

* Indicates skipped check number

Daily Balances

Date	Amount
09/22/2023	\$364.97

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION							
Date or #	Amount	Date or #	Amount	Date or #	Amount								
						ENTER							
						BALANCE STATEMENT							
						ADD							
						RECENT DEPOSITS NOT CREDITED ON THIS STATEMENT							
						SUBTOTAL							
						SUBTRACT							
						TOTAL CHECKS OUTSTANDING							
Total Checks Outstanding													
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest -ADD Overdraft -Deduct Automatic Payment -Deduct Service Charge -Deduct If your checkbook and statement do not balance, have you <table border="0"> <tr> <td>• Accounted for bank charges?</td> <td>▪ Verified debit card purchases?</td> </tr> <tr> <td>• Computed cancelled checks to check stubs?</td> <td>▪ Verified additions and subtractions?</td> </tr> <tr> <td>• Verified ATM withdrawals and fees?</td> <td>▪ Computed deposit amount on statement to your checkbook?</td> </tr> </table>							• Accounted for bank charges?	▪ Verified debit card purchases?	• Computed cancelled checks to check stubs?	▪ Verified additions and subtractions?	• Verified ATM withdrawals and fees?	▪ Computed deposit amount on statement to your checkbook?	BALANCE
• Accounted for bank charges?	▪ Verified debit card purchases?												
• Computed cancelled checks to check stubs?	▪ Verified additions and subtractions?												
• Verified ATM withdrawals and fees?	▪ Computed deposit amount on statement to your checkbook?												

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Member FDIC

PO Box 26237 • Las Vegas, NV 89126-0237

Return Service Requested

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
CH. 11 DIP CASE 2:23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Last statement: August 31, 2023
This statement: September 30, 2023
Total days in statement period: 30

Page 1 of 2
XXXXXX0265
(0)

Direct inquiries to:
877-476-2265

Western Alliance Bank
450 B Street Ste 150
San Diego CA 92101

THANK YOU FOR BANKING WITH US!

Analyzed Business Checking

Account number	XXXXXX0265	Beginning balance	\$8,484.28
Low balance	\$6,262.02	Total additions	.00
Average balance	\$6,469.65	Total subtractions	2,222.26
Avg collected balance	\$6,469	Ending balance	\$6,262.02

DEBITS

Date	Description	Subtractions
09-01	' POS Purchase POS PURCHASE TERMINAL 00000000 AMAZON.COM*T38T199 61 SEATTLE WA XXXXXXXXXXXXX0314 08-25-23 10:52 AM	1,249.54
09-01	' POS Purchase MERCHANT PURCHASE TERMINAL 469216 IN ANYBATTERY IN C 651 24864 MN XXXXXXXXXXXXX0314 08-31-23	50.45
09-05	' POS Purchase MERCHANT PURCHASE TERMINAL 446634 GOOGLE CLOUD VP2B WW 650 25300 CA XXXXXXXXXXXXX0306 09-01-23	75.71
09-08	' POS Purchase MERCHANT PURCHASE TERMINAL 494301 THE HOME DEPOT 23 04 MONTEREY CA XXXXXXXXXXXXX0330 09-06-23	137.47
09-08	' POS Purchase MERCHANT PURCHASE TERMINAL 401134 ISCREAM MINES PRE SS HTTPSWWW NY XXXXXXXXXXXXX0322 09-07-23	193.59
09-08	' POS Purchase MERCHANT PURCHASE TERMINAL 478930 STRECK LABORATORIE S 402 69174 NE XXXXXXXXXXXXX0314 09-07-23	515.50

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
September 30, 2023

Page 2 of 2
XXXXXX0265

DAILY BALANCES

<u>Date</u>	<u>Amount</u>	<u>Date</u>	<u>Amount</u>	<u>Date</u>	<u>Amount</u>
08-31	8,484.28	09-05	7,108.58		
09-01	7,184.29	09-08	6,262.02		

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Thank you for banking with Western Alliance Bank



Member FDIC

PO Box 26237 • Las Vegas, NV 89126-0237

Return Service Requested

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
DBA BEVERLY HOSPITAL
CH. 11 DIP CASE 2:23-BK-12359-SK
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Last statement: August 31, 2023
This statement: September 30, 2023
Total days in statement period: 30

Page 1 of 2
XXXXXX0520
(0)

Direct inquiries to:
877-476-2265

Western Alliance Bank
450 B Street Ste 150
San Diego CA 92101

THANK YOU FOR BANKING WITH US!

Analyzed Business Checking

Account number	XXXXXX0520	Beginning balance	\$251,400.29
Low balance	\$251,400.29	Total additions	14,300,267.96
Average balance	\$12,005,781.96	Total subtractions	251,400.29
Avg collected balance	\$12,005,781	Ending balance	\$14,300,267.96

DEBITS

Date	Description	Subtractions
09-12	' Wire Dr O/L Usd WIRE OUT;BNF-BEVERLY HOSPITAL;OBI-Not Provided	251,400.29

CREDITS

Date	Description	Additions
09-06	' Wire Cr-Usd WIRE IN;ORG-FIRST AMERICAN TITLE INSURANCE COMP;OBI-BE VERLY COMMUNITY HOSPITAL ASSOC. DBA	14,292,047.67
09-18	' Remote Deposit	8,220.29

DAILY BALANCES

Date	Amount	Date	Amount	Date	Amount
08-31	251,400.29	09-12	14,292,047.67		
09-06	14,543,447.96	09-18	14,300,267.96		

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
September 30, 2023

Page 2 of 2
XXXXXX0520

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

Thank you for banking with Western Alliance Bank

THIS FORM IS PROVIDED TO HELP YOU BALANCE YOUR STATEMENT

WITHDRAWALS OUTSTANDING NOT CHARGED TO ACCOUNT

BEFORE YOU START

PLEASE BE SURE YOU HAVE ENTERED IN YOUR REGISTER ALL AUTOMATIC
TRANSACTIONS SHOWN ON THE FRONT OF YOUR STATEMENT.

No.	\$

YOU SHOULD HAVE ADDED
IF ANY OCCURRED:

YOU SHOULD HAVE SUB-
TRACTED IF ANY OCCURRED:

1. Loan Advances

1. Automatic loan payments.

2. Credit Memos

2. Automatic Savings transfers.

3. Other Automatic Deposits

3. Service charges.

4. Interest Paid

4. Debit memos.

5. Other automatic deductions and
payments.

BALANCE SHOWN
ON THIS STATEMENT \$

ADD

DEPOSITS NOT SHOWN
ON THIS STATEMENT
(IF ANY) \$

TOTAL

SUBTRACT

WITHDRAWALS
OUTSTANDING

BALANCE \$

SHOULD AGREE WITH YOUR REGISTER
BALANCE AFTER DEDUCTING SERVICE CHARGE
(IF ANY) SHOWN ON THIS STATEMENT.

TOTAL \$

Please examine immediately and report if incorrect. If no reply is received within 30 days the account will be considered correct.

The following notice regarding Electronic Transfers applies to Consumer Accounts only.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Telephone or write us at the telephone number or address located on the front of this statement as soon as you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared. In your letter:

- (1) Tell us your name and account number (if any).
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

YOUR DEMAND DEPOSIT LOAN ACCOUNT SUMMARY OF RIGHTS IS OUTLINED BELOW

This is a summary of your rights: a full statement of your rights and our responsibilities under the Federal Fair Credit Billing Act will be sent to you both upon request and in response to a billing error notice.

Your Demand Deposit Loan Account is operated in conjunction with your Demand Deposit Account. Any charges for your checking account will be made to the Demand Deposit Account and they will be the same charges as are made for Demand Deposit Accounts not operated in conjunction with Demand Deposit Loan Accounts. The following information thus applies only to loans made to you under your Demand Deposit Account line of credit.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR DEMAND DEPOSIT LOAN

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at the address located on the front of this bill as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

- (1) Your name and account number.
- (2) The dollar amount of the suspected error.
- (3) Describe the error and explain, if you can, why you believe there is an error. If you need more information describe the item you are unsure about.

You do not have to pay any money in question while we are investigating, but are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

We figure a portion of the FINANCE CHARGE on your Demand Deposit Loan Account by applying the daily periodic rate(s) to the "Daily Balance" of your account for the billing cycle. To get the "Daily Balance" we take the beginning balance of your account each day, add any new advances and subtract any payments or credits and unpaid FINANCE CHARGES. This gives us the daily balance.

The minimum periodic payment required is shown on the front of this bill. You may pay off your Demand Deposit Loan Account loan balance at any time, or make voluntary additional payments. Payments shall be applied, first to any unpaid FINANCE CHARGES, and second the principal loan balance outstanding in your Demand Deposit Loan Account. Periodic statements may be sent to you at the end of each billing cycle showing your Demand Deposit Loan Account loan transactions.

Send payments and inquiries to the address shown on the front of this bill.

NOTE: Payments received after close of business shall be deemed received on the following business day for purposes of crediting your account.

BMO



P.O. Box 4320
Carol Stream, Illinois 60197-4320

BMO BANK N.A.
P.O. BOX 94033
PALATINE, IL 60094-4033

109950

ACCOUNT NUMBER: [REDACTED] 7284

318267

01 05710

BEVERLY COMMUNITY HOSPITAL ASSOCIATION
GENERAL CHECKING ACCOUNT
309 W BEVERLY BLVD
MONTEBELLO CA 90640-4308

Statement Period
09/05/23 TO 09/30/23
IM0099002900000000

PAGE 1 OF 6

0000

EFFECTIVE 9/4/2023: WE WILL NO LONGER CHARGE A \$5 DEBIT OR ATM CARD REPLACEMENT FEE.

FOR CLARIFICATION, THIS ACCOUNT IS A DEMAND DEPOSIT ACCOUNT. AS SUCH, OUR RIGHT TO REQUIRE WRITTEN NOTICE PRIOR TO ANY WITHDRAWAL OR TRANSFER UNDER SECTION II.7.F OF THE DEPOSIT ACCOUNT AGREEMENT FOR PERSONAL AND BUSINESS ACCOUNTS DOES NOT APPLY TO THIS ACCOUNT.

WE CHANGED OUR LEGAL NAME FROM BMO HARRIS BANK N.A. TO BMO BANK N.A. ALL REFERENCES TO BMO HARRIS BANK N.A. IN YOUR AGREEMENTS WITH US WERE CHANGED TO BMO BANK N.A. THIS CHANGE HAS NO EFFECT ON YOUR ACCOUNTS OR YOUR RIGHTS UNDER YOUR AGREEMENTS WITH US.

IF YOU HAVE QUESTIONS ABOUT ANY OF YOUR BMO ACCOUNTS, PLEASE CALL US TOLL-FREE AT 1-888-340-2265. BMO BANK N.A. MEMBER FDIC
EQUAL HOUSING LENDER. NMLS 401052 VISIT US ONLINE AT WWW.BMO.COM

CHECKING ACCOUNTS

SMALL BUS INTEREST CKG
ACCOUNT NUMBER 0687027284 (Checking) BEVERLY COMMUNITY HOSPITAL ASSOCIATION

Interest Paid YTD 107.56

DEPOSIT ACCOUNT SUMMARY

Previous Balance as of September 04, 2023	782,435.77
119 Deposits (Plus)	511,951.62
2 Withdrawals (Minus)	852,380.11
Interest Paid (Plus)	3.32
Ending Balance as of September 30, 2023	442,010.60

Deposits and Other Credits

Date	Amount	Description	
Sep 05	74.30	EDI/EFT CCD+ CREDIT	
		CCD BSC Promise	HCCLAIMPMT
Sep 05	136.32	EDI/EFT CCD+ CREDIT	
		CCD UMR	HCCLAIMPMT
Sep 05	200.00	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	

For overdraft credit plans with a variable Annual Percentage Rate:

The periodic rate and corresponding Annual Percentage Rate for this plan is a variable rate which can change monthly. (See your account agreement for details on how the Annual Percentage Rate is determined.)

CALCULATION OF BALANCE SUBJECT TO INTEREST RATE FOR CONSUMER OVERDRAFT CREDIT LINE ACCOUNTS

We figure the interest charge on your account by applying the periodic rate to the "daily balance" of your account for each day in the billing cycle. To get the "daily balance" we take the beginning balance of your account each day, add any new advances, and subtract any payments or credits. This gives us the daily balance.

The interest charge begins to accrue on the date an advance is posted to the account. The interest charge continues to accrue on the unpaid principal balance after the statement has been printed and mailed to you. There is no "grace period" or "free ride period" which would allow you to avoid an interest charge.

WHAT TO DO IF YOU THINK YOU FIND A MISTAKE ON YOUR CONSUMER OVERDRAFT CREDIT LINE ACCOUNT STATEMENT

If you think there is an error on your statement, write to us at: BMO Bank N.A., Attn: Billing Department, P.O. Box 365, Arlington Heights, IL 60006

In your letter, give us the following information:

- *Account information:* Your name and account number.
- *Dollar amount:* The dollar amount of the suspected error.
- *Description of Problem:* If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement.

You must notify us of any potential errors *in writing*. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

Credit Information

Credit information
We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR CONSUMER ELECTRONIC TRANSFERS AND CARD TRANSACTIONS

Call us at 1-888-340-2265 for errors or questions involving Card transactions or electronic transfers, or write to BMO, P.O. Box 94019, Palatine, IL 60094-4019, as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than 60 days after we sent you the first statement on which the problem or error appeared. This is the information we will need in order to help resolve the problem:

1. Tell us your name, account number, and Card number (if applicable).
2. Describe the error or the transaction and the date of the transaction you are unsure about, and explain why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you also send us your complaint or question in writing within ten Business Days.

We will determine whether an error occurred within 10* Business Days after we hear from you and we will correct any error promptly. If we need more time, however, by law we may take up to 45* days to investigate your complaint or question. If we decide to do this, we will provisionally credit your account within 10* Business Days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If you fail to give us the required written confirmation of your complaint or question, then we may not credit your account or we may revoke the provisional credit we previously gave to you.

We will tell you the results of our investigation within three Business Days after completing our investigation.

*These time periods may be extended as follows. The applicable time is 20 Business Days in place of 10 Business Days for new accounts if the notice of the error involves a transfer to or from the account within the first 30 days your account is open. The applicable time is 90 days in place of 45 days if the notice of error involves a transfer that either (1) was initiated outside the U.S., (2) resulted from a Point-of-Sale transaction, or (3) occurred within the first 30 days your account is open.

TO RECONCILE YOUR CHECKING ACCOUNT

- 1 List and Total all outstanding checks including those still outstanding from previous statements.
- 2 Enter the "Ending Balance" shown on this statement.
- 3 Add deposits and other credits not shown on this statement.
- 4 Total
- 5 Subtract the total of outstanding checks as determined in Step 1 above.
- 6 This figure should be your checkbook balance. If it does not agree, review the above steps and if necessary, review your checkbook entries.

[illegible][illegible]

Date: 09/2023

BMOBMO BANK N.A.
P.O. BOX 94033
PALATINE, IL 60094-4033

109951

ACCOUNT NUMBER: [REDACTED] 7284

01 05710

Statement Period
09/05/23 TO 09/30/23
IM0099002900000000

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

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Sep 05	1,170.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Sep 05	1,418.21	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Sep 05	1,600.00	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5F HCCLAIMPMT
Sep 05	14,927.69	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Sep 06	50.00	CURRENCY DEPOSIT CURRENCY DEPOSIT 2268009913 LOC 0000000000
Sep 06	290.00	CURRENCY DEPOSIT CURRENCY DEPOSIT 2268009914 LOC 0000000000
Sep 06	651.21	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Sep 06	660.17	EDI/EFT CCD+ CREDIT CCD BSC Promise HCCLAIMPMT
Sep 06	1,743.58	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5F HCCLAIMPMT
Sep 06	3,596.52	EDI/EFT CCD+ CREDIT CCD UnitedHealthcare HCCLAIMPMT
Sep 06	8,038.92	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Sep 06	13,588.18	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Sep 06	20,883.46	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Sep 06	21,011.21	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Sep 07	80.25	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Sep 07	91.55	EDI/EFT CCD+ CREDIT CCD BSC Promise HCCLAIMPMT
Sep 07	180.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Sep 07	217.98	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Sep 07	314.43	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5F HCCLAIMPMT
Sep 07	886.19	EDI/EFT CCD+ CREDIT CCD UnitedHealthcare HCCLAIMPMT
Sep 07	3,410.00	EDI/EFT CCD+ CREDIT CCD UnitedHealthcare HCCLAIMPMT
Sep 07	5,329.47	EDI/EFT CCD+ CREDIT CCD BLUE CROSS CA5C HCCLAIMPMT
Sep 08	22.92	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Sep 08	111.64	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT
Sep 08	150.00	EDI/EFT CCD+ CREDIT CCD MERCHANT SERVICE MERCH DEP
Sep 08	670.79	EDI/EFT CCD+ CREDIT CCD UnitedHealthcare HCCLAIMPMT
Sep 08	862.42	EDI/EFT CCD+ CREDIT CCD BLUE SHIELD CA HCCLAIMPMT

BMO BANK N.A.
P.O. BOX 94033
PALATINE, IL 60094-4033

109951

ACCOUNT NUMBER: [REDACTED] 7284

01 05710

Statement Period
09/05/23 TO 09/30/23
IM0099002900000000

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

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Sep 08	4,984.27	EDI/EFT CCD+ CREDIT	
		CCD BSC Promise	HCCLAIMPMT
Sep 11	25.19	EDI/EFT CCD+ CREDIT	
		CCD ABC PLATINUM	HCCLAIMPMT
Sep 11	86.25	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	
Sep 11	105.00	CURRENCY DEPOSIT	
		CURRENCY DEPOSIT 2278012371 LOC 0000000000	
Sep 11	120.00	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	
Sep 11	173.55	CURRENCY DEPOSIT	
		CURRENCY DEPOSIT 2278012370 LOC 0000000000	
Sep 11	207.68	EDI/EFT CCD+ CREDIT	
		CCD ABC GOLD	HCCLAIMPMT
Sep 11	250.00	CURRENCY DEPOSIT	
		CURRENCY DEPOSIT 2278012372 LOC 0000000000	
Sep 11	333.72	EDI/EFT CCD+ CREDIT	
		CCD UMR	HCCLAIMPMT
Sep 11	591.28	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	
Sep 11	763.03	EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 11	1,513.00	EDI/EFT CCD+ CREDIT	
		CCD ABC PLATINUM	HCCLAIMPMT
Sep 11	5,525.69	EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 11	8,437.90	EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 12	6.28	EDI/EFT CCD+ CREDIT	
		CCD BLUE CROSS CA5C	HCCLAIMPMT
Sep 12	800.00	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	
Sep 12	1,172.00	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	
Sep 12	15,286.22	EDI/EFT CCD+ CREDIT	
		CCD BLUE CROSS CA5C	HCCLAIMPMT
Sep 12	21,862.57	EDI/EFT CCD+ CREDIT	
		CCD BLUE CROSS CA5C	HCCLAIMPMT
Sep 12	26,813.04	EDI/EFT CCD+ CREDIT	
		CCD BLUE CROSS CA5C	HCCLAIMPMT
Sep 13	49.10	EDI/EFT CCD+ CREDIT	
		CCD BSC Promise	HCCLAIMPMT
Sep 13	69.36	EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 13	71.32	EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 13	265.00	EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE MERCH DEP	
Sep 13	1,046.46	EDI/EFT CCD+ CREDIT	
		CCD BLUE CROSS CA5F	HCCLAIMPMT
Sep 13	1,111.86	EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 13	1,427.13	EDI/EFT CCD+ CREDIT	
		CCD UnitedHealthcare	HCCLAIMPMT

BMOBMO BANK N.A.
P.O. BOX 94033
PALATINE, IL 60094-4033

109952

ACCOUNT NUMBER: [REDACTED] 7284

01 05710

Statement Period
09/05/23 TO 09/30/23
IM0099002900000000

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

PAGE 4 OF 6

Sep 13	21,511.63	EDI/EFT CCD+ CREDIT	
Sep 14	28.48	CCD UnitedHealthcare	HCCLAIMPMT
Sep 14	250.00	EDI/EFT CCD+ CREDIT	
Sep 14	957.98	CCD BSC Promise	HCCLAIMPMT
Sep 14	1,020.38	EDI/EFT CCD+ CREDIT	
Sep 14	2,205.60	CCD MERCHANT SERVICE	MERCH DEP
Sep 14	2,484.00	EDI/EFT CCD+ CREDIT	
Sep 14	6,375.18	CCD BLUE CROSS CA5C	HCCLAIMPMT
Sep 14	17,453.33	EDI/EFT CCD+ CREDIT	
Sep 14	32,509.63	CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 15	1,076.00	EDI/EFT CCD+ CREDIT	
Sep 15	2,154.89	CCD UHC Benefits Pla	HCCLAIMPMT
Sep 15	6,050.94	EDI/EFT CCD+ CREDIT	
Sep 18	15.38	CCD UNITEDHEALTHCARE	HCCLAIMPMT
Sep 18	17.69	EDI/EFT CCD+ CREDIT	
Sep 18	20.61	CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 18	239.30	EDI/EFT CCD+ CREDIT	
Sep 18	250.49	CCD UnitedHealthcare	HCCLAIMPMT
Sep 18	958.42	EDI/EFT CCD+ CREDIT	
Sep 18	1,532.14	CCD MERCHANT SERVICE	MERCH DEP
Sep 18	22,746.67	EDI/EFT CCD+ CREDIT	
Sep 19	405.36	CCD MERCHANT SERVICE	MERCH DEP
Sep 19	722.00	EDI/EFT CCD+ CREDIT	
Sep 19	1,600.00	CCD ANTHEM BLUE CROS	HCCLAIMPMT
Sep 19	2,144.80	EDI/EFT CCD+ CREDIT	
Sep 19	4,413.62	CCD BLUE SHIELD CA	HCCLAIMPMT
Sep 19	7,723.28	EDI/EFT CCD+ CREDIT	
		CCD BLUE CROSS CA5C	HCCLAIMPMT
		EDI/EFT CCD+ CREDIT	
		CCD BSC Promise	HCCLAIMPMT

BMO BANK N.A.
P.O. BOX 94033
PALATINE, IL 60094-4033

109952

ACCOUNT NUMBER: [REDACTED] 7284

Statement Period
09/05/23 TO 09/30/23
IM0099002900000000

01 05710

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

PAGE 5 OF 6

Sep 20	56.98	EDI/EFT CCD+ CREDIT CCD BSC Promise	HCCLAIMPMT
Sep 20	120.00	CURRENCY DEPOSIT	
Sep 20	293.43	CURRENCY DEPOSIT 2258019931 LOC 0000000000 EDI/EFT CCD+ CREDIT	
Sep 20	1,628.80	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 20	11,388.97	CCD BLUE SHIELD CA EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 21	175.00	CCD BLUE SHIELD CA EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 21	884.00	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 21	942.21	CCD UNITEDHEALTHCARE EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 21	8,257.81	CCD UnitedHealthcare EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 21	17,771.74	CCD BLUE CROSS CA5C EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 22	125.00	CCD BSC Promise CURRENCY DEPOSIT	HCCLAIMPMT
Sep 22	1,419.83	CURRENCY DEPOSIT 2281020110 LOC 0000000000 EDI/EFT CCD+ CREDIT	
Sep 22	87,502.67	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 25	57.74	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 25	130.00	CCD BLUE SHIELD CA EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 25	200.00	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 25	305.00	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 25	598.00	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 25	651.14	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 26	202.09	CCD ABC PLATINUM EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 26	365.14	CCD MERCHANT SERVICE MERCH DEP EDI/EFT CCD+ CREDIT	
Sep 26	6,058.70	CCD BLUE CROSS CA5C EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 26	8,858.90	CCD BSC Promise EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 26	15,859.90	CCD BLUE CROSS CA5C EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 27	74.30	CCD BLUE CROSS CA5C EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 27	288.57	CCD BSC Promise EDI/EFT CCD+ CREDIT	HCCLAIMPMT
Sep 27	387.76	CCD UnitedHealthcare EDI/EFT CCD+ CREDIT	HCCLAIMPMT
		CCD MERCHANT SERVICE MERCH DEP	

BMO



BMO BANK N.A.
P.O. BOX 94033
PALATINE, IL 60094-4033

109953

ACCOUNT NUMBER: XXXXXXXXXX 7284

01 05710

Statement Period
09/05/23 TO 09/30/23
IM0099002900000000

BEVERLY COMMUNITY HOSPITAL ASSOCIATION

PAGE 6 OF 6

Sep 27	1,600.00	EDI/EFT CCD+ CREDIT	
Sep 28	57.86	CCD BLUE CROSS CA5F	HCCLAIMPMT
Sep 28	182.10	EDI/EFT CCD+ CREDIT	
Sep 28	422.17	CCD UMR USNAS	HCCLAIMPMT
Sep 28	1,010.52	EDI/EFT CCD+ CREDIT	
Sep 29	621.20	CCD BLUE CROSS CA5F	HCCLAIMPMT
Sep 29	1,424.85	EDI/EFT CCD+ CREDIT	
Sep 29	9,697.13	CCD MERCHANT SERVICE	MERCH DEP
Sep 29	3.32	EDI/EFT CCD+ CREDIT	
		CCD BSC Promise	HCCLAIMPMT
		CCD MERCHANT SERVICE	MERCH DEP
		EDI/EFT CCD+ CREDIT	
		CCD MERCHANT SERVICE	MERCH DEP
		EDI/EFT CCD+ CREDIT	
		CCD BLUE SHIELD CA	HCCLAIMPMT
		INTEREST PAID	

Withdrawals and Other Debits

Date	Amount	Description
Sep 12	850,000.00	OUTGOING WIRE
Sep 20	2,380.11	FED WIRE TRANSFER DEBIT 230912581975 ACCT ANALYSIS SERV CHG

Daily Balance Summary

Date	Balance	Date	Balance
Sep 04	782,435.77	Sep 18	247,758.82
Sep 05	801,962.29	Sep 19	264,767.88
Sep 06	872,475.54	Sep 20	275,875.95
Sep 07	882,985.41	Sep 21	303,906.71
Sep 08	889,787.45	Sep 22	392,954.21
Sep 11	907,919.74	Sep 25	394,896.09
Sep 12	123,859.85	Sep 26	426,240.82
Sep 13	149,411.71	Sep 27	428,591.45
Sep 14	212,696.29	Sep 28	430,264.10
Sep 15	221,978.12	Sep 29	442,010.60

Statement Period Rates

Effective	Sep 05, 2023	Balance	Rate
		ZERO to 99,999,999,999	0.010 %

PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is 1875 Century Park East, Suite 1900, Los Angeles, CA 90067.

A true and correct copy of the foregoing document entitled (*specify*): MONTHLY OPERATING REPORT will be served or was served **(a)** on the judge in chambers in the form and manner required by LBR 5005-2(d); and **(b)** in the manner stated below:

1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On (*date*) November 29, 2023 I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below:

Megan M Adeyemo on behalf of Creditor Aya Healthcare, Inc.
madeyemo@grsm.com, asoto@grsm.com

David E Ahdoot on behalf of Creditor United Nurses Associations of California/Union of Health Care Professionals
dahdoot@bushgottlieb.com, kprestegard@bushgottlieb.com

David E Ahdoot on behalf of Interested Party Courtesy NEF
dahdoot@bushgottlieb.com, kprestegard@bushgottlieb.com

Joseph M Ammar on behalf of Creditor Stryker Corporation
ammar@millercanfield.com

Scott E Blakeley on behalf of Creditor Baxter Healthcare Corporation
seb@blakeleyllp.com, ecf@blakeleyllp.com

Joseph P Buchman on behalf of Creditor Montebello Land and Water Company
jbuchman@bwslaw.com, gmittchell@bwslaw.com

Adrian Butler on behalf of Interested Party Courtesy NEF
abutler@bushgottlieb.com

Augustus Curtis on behalf of Creditor United States of America, on behalf of HHS and CMS
augustus.t.curtis@usdoj.gov

Howard M Ehrenberg (TR)
ehrenbergtrustee@gmlaw.com,
ca25@ecfcbis.com;C123@ecfcbis.com;howard.ehrenberg@ecf.courtdrive.com;Karen.Files@gmlaw.com

David K Eldan on behalf of Interested Party Attorney General of California
David.Eldan@doj.ca.gov

Amanda N Ferns on behalf of Creditor DEXT CAPITAL, LLC
afernslaw@fernslaw.com, mmakalintal@fernslaw.com

Amanda N Ferns on behalf of Interested Party Courtesy NEF
afernslaw@fernslaw.com, mmakalintal@fernslaw.com

Alan W Forsley on behalf of Interested Party Courtesy NEF
alan.forsley@flpllp.com, awf@fklawfirm.com,awf@fl-lawyers.net,addy@flpllp.com

John-Patrick M Fritz on behalf of Interested Party Courtesy NEF
jpf@lnbyg.com, JPF.LNBYB@ecf.inforuptcy.com

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California.

Evelina Gentry on behalf of Creditor Advantis Medical Staffing
evelina.gentry@akerman.com, rob.diwa@akerman.com

Evan Gershbein on behalf of Other Professional Kurtzman Carson Consultants LLC
ECFpleadings@kccllc.com

Faisal Gill on behalf of Other Professional Cal-Med Health Center
fgill@glawoffice.com

Steven T Gubner on behalf of Interested Party Courtesy NEF
sgubner@bg.law, ecf@bg.law

Melissa Hamill on behalf of Interested Party Attorney General For The State Of Ca
melissa.hamill@doj.ca.gov

Hallie Dale Hannah on behalf of Creditor Harbor Pointe Air Conditioning & Control Systems, Inc.
hallie@hannahlaw.com

Brian T Harvey on behalf of Creditor T.R.L. Systems Incorporated
bharvey@buchalter.com, IFS_filing@buchalter.com;dbodkin@buchalter.com

Stella A Havkin on behalf of Creditor Lung Chung M.D.
stella@havkinandshrago.com, shavkinesq@gmail.com

Robert M Hirsh on behalf of Interested Party Medline Industries, LP
rhirsh@lowenstein.com

Mark S Horoupian on behalf of Interested Party Courtesy NEF
mark.horoupian@gmlaw.com, mhoroupian@ecf.courtdrive.com;cheryl.caldwell@gmlaw.com;karen.files@gmlaw.com

Mark S Horoupian on behalf of Trustee Howard M Ehrenberg (TR)
mark.horoupian@gmlaw.com, mhoroupian@ecf.courtdrive.com;cheryl.caldwell@gmlaw.com;karen.files@gmlaw.com

Darryl Jay Horowitt, ESQ on behalf of Other Professional The Huntington National Bank
dhorowitt@ch-law.com, bkasst@ch-law.com

David I Horowitz on behalf of Interested Party Kirkland & Ellis LLP
david.horowitz@kirkland.com,
keith.catuara@kirkland.com;terry.ellis@kirkland.com;elsa.banuelos@kirkland.com;ivon.granados@kirkland.com

David I Horowitz on behalf of Other Professional Triple P Securities, LLC and Triple P RTS, LLC
david.horowitz@kirkland.com,
keith.catuara@kirkland.com;terry.ellis@kirkland.com;elsa.banuelos@kirkland.com;ivon.granados@kirkland.com

Sonja Hourany on behalf of Creditor Quinn Company
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☐ Service information continued on attached page.

2. SERVED BY UNITED STATES MAIL:

On (date) _____, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed.

☐ Service information continued on attached page.

3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (state method for each person or entity served): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on (date) _____, I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed.

☐ Service information continued on attached page.

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

November 29, 2023	Denise Walker	/s/ Denise Walker
<u>Date</u>	<u>Printed Name</u>	<u>Signature</u>