

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

	)	
In re:	)	Chapter 11
	)	
CENTER CITY HEALTHCARE, LLC d/b/a	)	Case No. 19-11466 (KG)
HAHNEMANN UNIVERSITY HOSPITAL, <i>et</i>	)	
<i>al.</i> , <sup>1</sup>	)	Jointly Administered
	)	
Debtors.	)	
	)	

**GLOBAL NOTES AND STATEMENT OF LIMITATIONS,  
METHODOLOGY, AND DISCLAIMER REGARDING  
DEBTORS’ SCHEDULES AND STATEMENTS**

The Schedules of Assets and Liabilities (the “**Schedules**”) and Statements of Financial Affairs (the “**Statements**”) filed by Center City Healthcare, LLC d/b/a Hahnemann University Hospital and its affiliated debtors and debtors in possession (together, the “**Debtors**”) in the United States Bankruptcy Court for the District of Delaware (the “**Bankruptcy Court**”) were prepared pursuant to section 521 of title 11 of the United States Code, 11 U.S.C. 101 – 1532 (the “**Bankruptcy Code**”) and Federal Rule of Bankruptcy Procedure 1007 by the Debtors’ management, under the supervision of the Debtors’ chief restructuring officer (the “**CRO**”), and are unaudited. While the members of management responsible for the preparation of the Schedules and Statements have made a reasonable effort to ensure that the Schedules and Statements are accurate and complete based on information known to them at the time of preparation and after reasonable inquiries, inadvertent errors may exist and/or the subsequent receipt of information may result in material changes to financial and other data contained in the Schedules and Statements that may warrant amendment of the same.<sup>2</sup> Moreover, because the Schedules and Statements contain unaudited information that is subject to further review and potential adjustment, there can be no assurance that these Schedules and Statements are complete or accurate.

These Global Notes and Statement of Limitations, Methodology, and Disclaimer

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<sup>1</sup> The Debtors in these cases, along with the last four digits of each Debtor’s federal tax identification number, are: Center City Healthcare, LLC (3341), Philadelphia Academic Health System, LLC (8681), St. Christopher’s Healthcare, LLC (8395), Philadelphia Academic Medical Associates, LLC (8165), HPS of PA, L.L.C. (1617), SCHC Pediatric Associates, L.L.C. (0527), St. Christopher’s Pediatric Urgent Care Center, L.L.C. (6447), SCHC Pediatric Anesthesia Associates, L.L.C. (2326), StChris Care at Northeast Pediatrics, L.L.C. (4056), TPS of PA, L.L.C. (4862), TPS II of PA, L.L.C. (5534), TPS III of PA, L.L.C. (5536), TPS IV of PA, L.L.C. (5537), and TPS V of PA, L.L.C. (5540). The Debtors’ mailing address is 230 North Broad Street, Philadelphia, Pennsylvania 19102.

<sup>2</sup> Since the acquisition of the hospitals in January 2018, there has been significant turnover in the accounting and finance function.

Regarding Debtors' Schedules and Statements (the "**Global Notes**") pertain to, are incorporated by reference in, and comprise an integral part of, the Debtors' Schedules and Statements. In the event of any inconsistency between the Global Notes and the Schedules and Statements, the Global Notes shall control and govern.

The Schedules and Statements have been signed by an authorized representative of the Debtors. In reviewing and signing the Schedules and Statements, this representative relied upon the efforts, statements and representations of the Debtors' other personnel and professionals. The representative has not (and could not have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors and their addresses.

1. **Case.** On June 30, 2019 or July 1, 2019 (the "**Petition Date**"), the Debtors filed voluntary petitions for relief under chapter 11 of the Bankruptcy Code. Unless otherwise indicated, the information provided is as of the close of business on June 30, 2019.

2. **Amendments.** The Debtors reserve the right to amend the Schedules and Statements in all respects at any time as may be necessary or appropriate, including, without limitation, the right to dispute or to assert offsets or defenses to any claim reflected on the Schedules and Statements as to amount, liability, or classification, or to otherwise subsequently designate any claim as "disputed," "contingent," or "unliquidated." Any failure to designate a claim as "contingent," "unliquidated," or "disputed" does not constitute an admission by the Debtors that such claim is not "contingent," "unliquidated," or "disputed."

3. **Estimates and Assumptions.** The preparation of the Schedules and Statements requires the Debtors to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosures of contingent assets and liabilities on the date of the Schedules and Statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

4. **Unknown Amounts.** Some of the scheduled liabilities are unknown and unliquidated at this time. In such cases, the amounts are listed as "Unknown." Because certain scheduled liabilities are unknown and unliquidated, the Schedules and the Statements do not accurately reflect the aggregate amount of the Debtors' liabilities.

5. **Pre-Petition vs. Post-Petition.** The Debtors have sought to allocate liabilities between the pre-petition and post-petition periods based on the information derived from research and investigation conducted during the preparation of these Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between pre-petition and post-petition periods may change. The liabilities listed on the Schedules do not reflect any analysis of claims under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtors reserve all rights to dispute or challenge the validity of any asserted claims under section 503(b)(9) of the Bankruptcy Code or the characterization of the structure of any such transaction or any document or instrument related to any creditor's claim.

6. **GAAP.** Given the difference between the information requested in the Schedules and Statements, and the financial information utilized under generally accepted accounting

principles in the United States (“GAAP”), the aggregate asset values and claim amounts set forth in the Schedules and Statements do not necessarily reflect the amounts that would be set forth in a balance sheet prepared in accordance with GAAP.

7. **Asset Values.** It would be prohibitively expensive, unduly burdensome, inefficient, and time-consuming to obtain additional market valuations of the Debtors’ property interests. Accordingly, to the extent any asset value is listed herein, and unless otherwise noted therein, net book values rather than current market values of the Debtors’ property interests are reflected in the applicable Schedule. As applicable, assets that have been fully depreciated or were expensed for accounting purposes have no net book value. Unless otherwise indicated, all asset amounts and claim amounts are listed as of June 30, 2019. The Debtors reserve the right to amend or adjust the value of each asset or liability as set forth herein.

8. **Setoff or Recoupment Rights.** The Debtors have not included on Schedule D parties that may believe their claims are secured through setoff rights, deposits posted by or on behalf of the Debtors, or inchoate statutory lien rights. Such counterparties, if any, have been listed on Schedule F.

9. **Co-Obligors.** No claim set forth on the Schedules and Statements of the Debtors is intended to acknowledge claims of creditors that are otherwise satisfied or discharged by another party.

10. **Causes of Action.** The Debtors reserve all of their causes of action. Neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such cause of action. Likewise, the failure to list a cause of action in question 74 of Schedule B or SOFA question 7 shall not be deemed a waiver of any such cause of action. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of rights with respect to these Chapter 11 Cases, equitable subordination, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and other relevant nonbankruptcy laws to recover assets or avoid transfers.

11. **Insiders.** In those circumstances where the Schedules and Statements require information regarding insiders and/or officers and directors, included therein are the Debtors’ (a) directors and (b) employees that are, or were during the relevant period, officers. The listing of a party as an insider is not intended to be, nor should it be, construed as a legal characterization of such party as an insider and does not act as an admission of any fact, claim, right, or defense, and all such rights, claims, and defenses are hereby expressly reserved. Further, employees have been included in this disclosure for informational purposes only and should not be deemed to be “insiders” in terms of control of the Debtors, management responsibilities or functions, decision-making or corporate authority and/or as otherwise defined by applicable law, including, without limitation, the federal securities laws, or with respect to any theories of liability or for any other purpose.

12. **Intellectual Property.** The exclusion of any intellectual property shall not be construed as an admission that such intellectual property rights have been abandoned, terminated, assigned, expired by their terms, or otherwise transferred. Conversely, inclusion of

certain intellectual property shall not be construed to be an admission that such intellectual property rights have not been abandoned, terminated, assigned, expired by their terms, or otherwise transferred. The Debtors reserve all rights with respect to the legal status of any and all such intellectual property rights.

13. **Fiscal Year**. The Debtors' fiscal year ends on December 31.
14. **Currency**. All amounts are reflected in U.S. dollars.
15. **Summary of Significant Reporting Policies and Practices**. The following conventions were adopted by the Debtors in preparation of the Schedules and Statements:
  - (a) **Fair Market Value; Book Value**. Unless otherwise noted therein, the Schedules and Statements reflect the carrying value of the liabilities as listed in the Debtors' books and records. Where the current market value of assets is unknown, the Debtors have based their valuation on book values net of depreciation. The Debtors reserve the right to amend or adjust the value of each asset or liability set forth herein.
  - (b) **Inventories**. Inventories are valued in the Schedules and Statements at the values indicated on the Debtors' books and records.
  - (c) **Leased Real and Personal Property**. In the ordinary course of their businesses, the Debtors lease real property and various articles of personal property, including, without limitation, certain equipment, from certain third-party lessors. The Debtors believe that all such leases are set forth in the Schedules and Statements. The property subject to the leases is not reflected in the Schedules and Statements as either owned property or assets of the Debtors or property or assets of third-parties within the control of the Debtors. Nothing in the Schedules or Statements is or shall be construed as an admission or determination as to legal status of any lease (including whether to assume and assign or reject such lease or whether it is a true lease or a financing arrangement), and the Debtors reserve all rights with respect to all such issues.
  - (d) **Disputed, Contingent and/or Unliquidated Claims**. Schedules D, E, and F permit the Debtors to designate a claim as disputed, contingent, and/or unliquidated. A failure to designate a claim on any of these Schedules and Statements as disputed, contingent, and/or unliquidated does not constitute an admission that such claim is not subject to objection. The Debtors reserve the right to dispute, or assert offsets or defenses to, any claim reflected on these Schedules and Statements as to amount, liability, or status.
  - (e) **Payments Made within 90 Days prior to the Petition Date and Payments to Insiders within One Year of Petition Date**. Payments made in the

ordinary course of the Debtors' business to employees for salaries, wages, bonuses, commissions, and employee benefits, payroll taxes and sales taxes were omitted from the SOFA question 3. Payments to insiders within one year of the Petition Date, including transfers within 90 days of the Petition Date, are listed in response to SOFA question 4 and, with certain exceptions, are not separately set forth in response to SOFA question 3. In preparing their responses to SOFA question 4, and in the interest of full disclosure, the Debtors used an expansive interpretation of the term "insider". Inclusion or omission of a creditor as an "insider" on the Debtors' response to SOFA question 4 is not determinative as to whether creditor is actually an "insider," as such term is defined in the Bankruptcy Code and the Debtors reserve all of their rights with respect to such characterization. Moreover, payments are listed in response to SOFA questions 3 and 4 without regard as to whether such payments were made on account of antecedent debt, and the Debtors reserve all of their rights with respect to such issue.

- (f) Statement of Financial Affairs – Payments to Insiders. Both questions 4 and 30 in the SOFAs request information regarding payments to insiders, and all such information is provided in response to question 4. The Debtors reserve all rights with respect to the characterization of payments listed in response to questions 4 and 30.
- (g) Statement of Financial Affairs – Suits and Administration Proceedings. Although the Debtors have attempted to list in question 7 all known claimants with pending suits or administrative proceedings, certain actions may have been inadvertently omitted. The Debtors reserve all of their rights with respect to any such claims or causes of action they may have and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such causes of action.

16. Schedule D. Although the Debtors may have scheduled claims of various creditors as secured claims, the Debtors reserve all rights to dispute or challenge the secured nature of any such creditor's claim or the recharacterization of the structure of any such transaction or any document or instrument related to such creditor's claim except as otherwise agreed to pursuant to a stipulation or an agreed order or any other order entered by the Bankruptcy Court. No claim set forth on Schedule D is intended to acknowledge claims of creditors that are otherwise satisfied or discharged by other entities. The descriptions provided in Schedule D are intended only as a summary. Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent and priority of any liens. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements. The Debtors reserve all rights to amend Schedule D to the extent that the Debtors determine that any claims associated with such agreements should be reported on Schedule D. Nothing herein shall be construed as an admission by the Debtors of the legal rights of a claimant or a waiver of the Debtors' rights to recharacterize or reclassify a claim or contract.

17. **Schedule E/F.** The Debtors' analysis of potential priority claims is ongoing, and any amounts listed as priority claims on Schedule E/F remain subject to such analysis. Amendments will be made to Schedule E/F as necessary. Although reasonable efforts have been made to identify the date of incurrence of each claim, determining the date upon which each claim on Schedule E/F was incurred or arose would be unduly burdensome and cost prohibitive, and therefore, the Debtors do not list a date for each claim on Schedule E/F.

Schedule E/F may contain potential claims on account of pending litigation involving the Debtors. Each potential claim associated with any such pending litigation is marked as contingent, unliquidated and disputed in the Schedules and Statements. Some of the potential litigation listed on Schedule E/F may be subject to subordination pursuant to section 510 of the Bankruptcy Code. In addition, workers' compensation claims that are covered in full under the Debtors' insurance policies are not included on Schedule E/F. Any information contained in Schedule E/F with respect to pending or potential litigation shall not be a binding representation of the Debtors' liabilities with respect to any of the potential suits and proceedings included therein.

Schedule E/F reflects prepetition amounts owing to counterparties to executory contracts and unexpired leases. Such prepetition amounts, however, may be paid in connection with the assumption, or assumption and assignment, of executory contracts and unexpired leases. Schedule E/F does not include potential rejection damage claims, if any, of the counterparties to executory contracts and unexpired leases that may be rejected in the future.

Pursuant to the *Final Order (I) Authorizing the Debtors to (A) Pay Certain Prepetition Wages, Benefits and Other Compensation, and (B) Continue Employee Compensation and Employee Benefits Programs, and (II) Granting Related Relief* [Docket No. 291] (the "**Wage Order**"), the Debtors were authorized to pay, and did pay, certain pre-petition claims for employee wages and other related obligations. As such, while the Debtors have listed such pre-petition wage and related employee claims in Schedule E/F, the Debtors have marked such claims as "contingent" and "unliquidated" because they have already been paid in accordance with the Wage Order.

19. **Schedule G.** Although reasonable efforts have been made to ensure the accuracy of Schedule G, inadvertent errors may have occurred. Certain information, such as the contact information of the counter-party, may not be included where such information could not be obtained using reasonable efforts. The Debtors have only scheduled claims and executory contracts for which the Debtors may be contractually and/or directly liable. Listing a contract or agreement on Schedule G does not constitute an admission that such contract or agreement was an executory contract or unexpired lease as of the Petition Date, or that it is valid or enforceable. The Debtors hereby reserve all rights to dispute or challenge the validity, status or enforceability of any contracts, agreements or leases set forth on Schedule G, including contracts, agreements or leases that may have expired or may have been modified, amended, and supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters and other documents that may not be listed on Schedule G, and to amend or supplement Schedule G as necessary. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, indemnifications, options to purchase, rights of first

refusal and other miscellaneous rights. Such rights, powers, duties and obligations are not set forth separately on Schedule G. The Debtors reserve all rights with respect to such agreements.

Certain of the contracts and agreements listed on Schedule G may consist of several parts, including but not limited to, purchase orders, amendments, restatements, waivers, letters and other documents that may not be listed on Schedule G or that may be listed as a single entry. In some cases, the same vendor or provider may appear multiple times on Schedule G. This multiple listing is intended to reflect distinct agreements between the applicable Debtor and such supplier or provider. The Debtors expressly reserve their rights to challenge whether such related materials constitute an executory contract, a single contract, or multiple, severable or separate contracts. Certain of the executory agreements may not have been memorialized in writing and could be subject to dispute. In addition, the Debtors may have entered into various other types of agreements in the ordinary course of its business, such as subordination agreements, supplemental agreements, settlement agreements, amendments/letter agreements, and confidentiality agreements. Such documents may not be set forth on Schedule G. The Debtors also reserve all rights to dispute or challenge the characterization of the structure of any transaction, or any document or instrument related to a creditor's claim. Further, the Debtors reserve all rights to later amend the Schedules and Statements to the extent that additional information regarding the Debtor obligor to an executory contract becomes available.

Omission of a contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. The Debtors' rights under the Bankruptcy Code with respect to any such omitted contracts or agreements are not impaired by the omission. Any and all of the Debtors' rights, claims, and causes of action regarding the contracts and agreements listed on Schedule G are reserved and preserved. Schedule G may be amended at any time to add any omitted contract, agreement or lease.

20. **Schedule H.** The Debtors may not have identified certain guarantees associated with the Debtors' executory contracts, unexpired leases, secured financings, debt instruments and other such agreements. The Debtors reserve all rights to amend the Schedules to the extent that additional guarantees are identified or such guarantees are discovered to have expired or be unenforceable.

Neither the Debtors, their agents, nor their attorneys guarantee or warrant the accuracy, the completeness, or correctness of the data that is provided herein or in the Schedules and Statements, and neither are they liable for any loss or injury arising out of, or caused in whole or in part by, the acts, errors or omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating or delivering the information herein. While every effort has been made to provide accurate and complete information herein, inadvertent errors or omissions may exist. The Debtors and their agents, attorneys and advisors expressly do not undertake any obligation to update, modify, revise or re-categorize the information provided herein, or to notify any third party should the information be updated, modified, revised or re-categorized. In no event shall the Debtors or their agents, attorneys and advisors be liable to any third party for any direct, indirect, incidental, consequential or special damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtors or damages to business reputation, lost business or lost profits), whether foreseeable or not, and

however caused, even if the Debtors or their agents, attorneys and advisors are advised of the possibility of such damages.



Debtor Name **Philadelphia Academic Health System, LLC**  
**United States Bankruptcy Court for the District of Delaware**  
 Case number (if known): **19-11467**

Check if this is an amended filing

Official Form 206Sum  
**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

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

**1a. Real property:**

Copy line 88 from *Schedule A/B*..... \$0.00

**1b. Total personal property:**

Copy line 91A from *Schedule A/B*..... \$6,907,670.58

**1c. Total of all property:**

Copyline 92 from *Schedule A/B*..... \$6,907,670.58

**Part 2: Summary of Liabilities**

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

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$57,456,342.37

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

**3a. Total of amounts of priority unsecured claims:**

Copy the total claims from Part 1 from the line 5a of *Schedule E/F*..... \$0.00

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

Copy the total amount of claims from Part 2 from line 5b of *Schedule E/F*..... + \$13,311,191.05

**4. Total liabilities** .....

Lines 2 + 3a + 3b \$70,767,533.42

Debtor Name **Philadelphia Academic Health System, LLC**  
**United States Bankruptcy Court for the District of Delaware**  
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Check if this is an amended filing

Official Form 206A/B

**Schedule A/B: Assets - Real and Personal Property**

12/15

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

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

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

**Part 1: Cash and cash equivalents**

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

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

**All cash of cash equivalents owned or controlled by the debtor**

**Current value of debtor's interest**

2. **Cash on hand**

Restricted & Unrestricted cash

3. **Checking, savings, money market, or financial brokerage accounts**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1 Wells Fargo Bank, N.A.	Commercial DDA	4834	\$20,628.43
3.2 Wells Fargo Bank, N.A.	Commercial DDA	6063	\$1,519,857.05
3.3 Wells Fargo Bank, N.A.	Commercial DDA	6021	\$3,172,477.40
3.4 Wells Fargo Bank, N.A.	Commercial DDA	6030	\$820,335.79
3.5 Wells Fargo Bank, N.A.	Commercial DDA	6048	\$50,000.00
3.6 Wells Fargo Bank, N.A.	Commercial DDA	5202	\$470,433.23

4. **Other cash equivalents**

5. **Total of Part 1**

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

**\$6,053,731.90**

**Part 2: Deposits and prepayments**

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

6. Does the debtor have any deposits or prepayments?

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

**Current value of debtor's interest**

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

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

Description, including name of holder of prepayment

8.1	Altus Group	\$2,500.00
8.2	Bio-Optronics	\$22,467.50
8.3	Echo Inc	\$39,022.75
8.4	Essential Cons	\$11,250.00
8.5	Everbridge	\$2,940.15
8.6	Everbridge Inc	\$13,904.61
8.7	Healthstream	\$53,950.00
8.8	Healthstrem	\$124,674.20
8.9	Ingenious Med, Inc.	\$23,085.00
8.10	Intralinks Inc	\$6,012.90
8.11	Lockton	\$50,000.00
8.12	Navex Global	\$21,562.50
8.13	NG 1500 Market St	\$105,420.48
8.14	Quantros	\$87,481.92
8.15	Sector Financial	\$250,000.00
8.16	Staywell	\$39,666.67

9. Total of Part 2

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

<b>\$853,938.68</b>
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**Part 3: Accounts Receivable**

10. Does the debtor have any accounts receivable?

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

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

**Current value of debtor's interest**

**11. Accounts receivable**

11a. 90 days old or less:		-		=
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:		-		=
	face amount		doubtful or uncollectible accounts	

**12. Total of Part 3**

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

**Part 4: Investments**

**13. Does the debtor own any investments?**

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

**Valuation method used for current value      Current value of debtor's interest**

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

Name of fund or stock:

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

Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

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

Describe:

**17. Total of Part 4**

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

**Part 5: Inventory, excluding agricultural assets**

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

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

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
19. <b>Raw Materials</b>				
20. <b>Work in progress</b>				
21. <b>Finished goods, including goods held for resale</b>				
22. <b>Other inventory or supplies</b>				
22.1 Office Supplies	N/A		Net book value	Unknown
23. <b>Total of Part 5</b> Add lines 19 through 22. Copy the total to line 84.				

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

- No.
- Yes.

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

- No.
- Yes. Book Value \$ \_\_\_\_\_ Valuation Method \_\_\_\_\_ Current Value \$ \_\_\_\_\_

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

- No.
- Yes.

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

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

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

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
28. <b>Crops - either planted or harvested</b>			
29. <b>Farm animals</b> Examples: Livestock, poultry, farm-raised fish			
30. <b>Farm machinery and equipment</b> (Other than titled motor vehicles)			
31. <b>Farm and fishing supplies, chemicals, and feed</b>			
32. <b>Other farming and fishing-related property not already listed in Part 6</b>			
33. <b>Total of Part 6</b> Add lines 28 through 32. Copy the total to line 85.			

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

- No.
- Yes.

**Is any of the debtor's property stored at the cooperative?**

- No.
- Yes.

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

- No.
- Yes. Book Value \$ \_\_\_\_\_ Valuation Method \_\_\_\_\_ Current Value \$ \_\_\_\_\_

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

- No.
- Yes.

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

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

- No.
- Yes.

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

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

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

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
<b>39. Office furniture</b>			
39.1 Office Desks, Office Chairs, Filing Cabinets, Bookcases, Appliances, Benches, Couches, Tables	Unknown	N/A	Unknown
<b>40. Office fixtures</b>			
<b>41. Office equipment, including all computer equipment and communication systems equipment and software</b>			
41.1 Medical equipment, desktop computers, laptop computers, computer keyboards, computer mice, monitors, television screens, projecting equipment, various cabling, etc.	Unknown	N/A	Unknown
<b>42. Collectibles</b> Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 Various paintings, city maps, photography and other artwork	Unknown	N/A	Unknown

43. Total of Part 7.

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

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

- No.
- Yes.

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

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

- No.
- Yes.

**Part 8: Machinery, equipment, and vehicles**

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

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

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, or titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			

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

- No.
- Yes.

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



Debtor Philadelphia Academic Health System, LLC

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- No.
- Yes.

**Part 9: Real property**

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

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

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

55.1 Please see list of non-residential real property leases reflected in Debtor's Schedule G

56. Total of Part 9.

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

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

- No.
- Yes.

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

- No.
- Yes.

**Part 10: Intangibles and intellectual property**

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

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

Debtor Philadelphia Academic Health System, LLC

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General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, or trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			
65. Goodwill			
66. <b>Total of Part 10.</b> Add lines 60 through 65. Copy the total to line 89.			
67. <b>Do your lists or records include personally identifiable information of customers?</b>  <input type="checkbox"/> No. <input type="checkbox"/> Yes.			
68. <b>Is there an amortization or other similar schedule available for any of the property listed in Part 10?</b>  <input type="checkbox"/> No. <input type="checkbox"/> Yes.			
69. <b>Has any of the property listed in Part 10 been appraised by a professional within the last year?</b>  <input type="checkbox"/> No. <input type="checkbox"/> Yes.			

Debtor Philadelphia Academic Health System, LLC

Case Number (if known) 19-11467

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

- No. Go to Part 12.
- Yes. Fill in the information below.

**Current value of debtor's interest**

71. **Notes receivable**

Description (include name of obligor)

	-		=
Total face amount		Doubtful or uncollectible amount	

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

Unknown

**Nature of claim** See attached Schedule A/B Exhibit 74

**Amount Requested**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

**Nature of claim**

**Amount Requested**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed**

Examples: Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

Debtor Philadelphia Academic Health System, LLC

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79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No.
- Yes.

**Part 12: Summary**

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1.</i>	<b>\$6,053,731.90</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$853,938.68</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>		
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>		
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>		
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>		
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>		
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>		
88. <b>Real Property.</b> <i>Copy line 56, Part 9.</i>		
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>		
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>		
91. <b>Total.</b> Add lines 80 through 90 for each column.	91a. <b>\$6,907,670.58</b>	+ 91b. <b>\$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Lines 91a + 91b = 92.....	<b>\$6,907,670.58</b>	

**SCHEDULES OF ASSETS AND LIABILITIES**

**EXHIBIT FOR SCHEDULE AB**

**PART 11, QUESTION 74**

**CAUSES OF ACTION AGAINST THIRD PARTIES**

**Schedule AB 74 : Causes of action against third parties**

Nature of Claim	Current value
The Debtor may maintain rights to assert causes of action against third parties, including causes of action relating to any litigation or proceedings reflected in response to question 7 of the Debtor's Statement of Financial Affairs.	Unknown

Debtor Name **Philadelphia Academic Health System, LLC**  
**United States Bankruptcy Court for the District of Delaware**  
 Case number (if known): **19-11467**

Check if this is an amended filing

**Official Form 206D**

**Schedule D - Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible

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

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

**Part 1: List Creditors Who Have Secured Claims**

**2. List in alphabetical order all creditors who have secured claims** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Amount of Claim <small>Do not deduct the value of collateral</small>	Value of collateral that supports this claim	
<b>2.1</b>	<p><b>Creditor's name</b> MIDCAP FUNDING IV TRUST</p> <p><b>Creditor's mailing address</b> 7255 WOODMONT AVE, STE 200 BETHESDA, MD 20814</p> <p><b>Creditor's email address, if known</b> _____</p> <p><b>Date debt was incurred</b> 1/11/2018</p> <p><b>Last four digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.</p>	<p><b>Describe debtor's property that is subject to a lien</b> SUBSTANTIALLY ALL DEBTOR'S ASSETS</p> <p><b>Describe the lien</b> Revolving and term loans</p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$57,456,342.37</p>	<p>Unknown</p>

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.** \$57,456,342.37

Debtor Name **Philadelphia Academic Health System, LLC**

**United States Bankruptcy Court for the District of Delaware**

Case number (if known): **19-11467**

Check if this is an amended filing

**Official Form 206E/F**

**Schedule E/F - Creditors Who Have Claims Unsecured Claims**

12/15

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

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims?

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

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

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (            )		



Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.1</b> Nonpriority creditor's name and mailing address</p> <p>3M 2807 PAYSHERE CIRCLE CHICAGO, IL 60674</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$399,930.52</b></p>
<p><b>3.2</b> Nonpriority creditor's name and mailing address</p> <p>50 WORDS LLC 1915 WAYNE DR NORRISTOWN, PA 19403</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$23,125.00</b></p>
<p><b>3.3</b> Nonpriority creditor's name and mailing address</p> <p>ADP INC P.O. BOX 842875 BOSTON, MA 02284-2875</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$173,443.25</b></p>
<p><b>3.4</b> Nonpriority creditor's name and mailing address</p> <p>ADVISORY BOARD CO, THE P.O. BOX 79461 BALTIMORE, MD 21279-0461</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$85,550.00</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.5</b> Nonpriority creditor's name and mailing address</p> <p>AMER MEDICAL ASSOC P.O. BOX 74008935 CHICAGO, IL 60674-8935</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$69,263.64</b></p>
<p><b>3.6</b> Nonpriority creditor's name and mailing address</p> <p>AMER REGISTRY FOR INTERNET P.O. BOX 232290 CENTREVILLE, VA 20120</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$300.00</b></p>
<p><b>3.7</b> Nonpriority creditor's name and mailing address</p> <p>APRIL COOPER C/O HALMON BANKS, ESQ. 100 N 18TH ST, STE 1910 PHILADELPHIA, PA 19103-2707</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>UNKNOWN</b></p>
<p><b>3.8</b> Nonpriority creditor's name and mailing address</p> <p>ARAMARK FOOD &amp; SUPPORT SVCS CORP 1351 METROPOLITAN AVE WEST DEPTFORD, NJ 08066</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$3,861.27</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.9</b> Nonpriority creditor's name and mailing address</p> <p>AVIACODE INC DEPT CH 19787 PALATINE, IL 60055-9787</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$19,710.00</b></p>
<p><b>3.10</b> Nonpriority creditor's name and mailing address</p> <p>BARATZ &amp; ASSOCIATES PA 7 EVES DR, STE 100 MARLTON, NJ 08053</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$6,814.00</b></p>
<p><b>3.11</b> Nonpriority creditor's name and mailing address</p> <p>BELLEVUE STRATEGIES LLC 200 S BROAD ST, STE 410 PHILADELPHIA, PA 19102</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$10,421.17</b></p>
<p><b>3.12</b> Nonpriority creditor's name and mailing address</p> <p>BUREAU OF WORKERS COMPENSATION P.O. BOX 15698 COLUMBUS, OH 43515-0698</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$307.00</b></p>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.13</b> Nonpriority creditor's name and mailing address</p> <p>BURKE, DANIEL R 364 NEW CASTLE LN SWEDESBORO, NJ 08085</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,400.00</p>
<p><b>3.14</b> Nonpriority creditor's name and mailing address</p> <p>CENTER SQUARE VENTURES II LLC P.O. BOX 780830 PHILADELPHIA, PA 19178-0830</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$44,006.03</p>
<p><b>3.15</b> Nonpriority creditor's name and mailing address</p> <p>CERNER CORP ATTN: IAN WILSON 2800 ROCKCREEK PKWY KANSAS CITY, MO 64117</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p>\$3,786,672.00</p>
<p><b>3.16</b> Nonpriority creditor's name and mailing address</p> <p>CONCUR TECHNOLOGIES INC 62157 COLLECTIONS CTR DR CHICAGO, IL 60693</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$45,490.50</p>

Debtor Name **Philadelphia Academic Health System, LLC**

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.17</b> Nonpriority creditor's name and mailing address</p> <p>CONIFER PATIENT COMMUNICATIONS ATTN: PETRA WILLEY 140 FOUNTAIN PKWY, STE 500 ST PETERSBURG, FL 33716</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p><b>\$18,085.10</b></p>
<p><b>3.18</b> Nonpriority creditor's name and mailing address</p> <p>CROWELL &amp; MORING LLP 1001 PENNSYLVANIA AVE NW WASHINGTON, DC 20004-2595</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$30,222.00</b></p>
<p><b>3.19</b> Nonpriority creditor's name and mailing address</p> <p>CUSHMAN &amp; WAKEFIELD OF CT INC 107 ELM ST STAMFORD, CT 06902</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$9,250.00</b></p>
<p><b>3.20</b> Nonpriority creditor's name and mailing address</p> <p>CVS PHARMACY P.O. BOX 848001 DALLAS, TX 75207</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,713.18</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.21</b> Nonpriority creditor's name and mailing address</p> <p>DIXON HUGHES GOODMAN LLP P.O. BOX 602828 CHARLOTTE, NC 28260-2828</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$25,000.00</b></p>
<p><b>3.22</b> Nonpriority creditor's name and mailing address</p> <p>DREXEL UNIVERSITY C/O STEVE COZEN, FRED JACOBY ONE LIBERTY PL 1650 MARKET ST, STE 2800 PHILADELPHIA, PA 19103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> LITIGATION INJUNCTION TO PROHIBIT HUH'S CLOSURE</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p><b>UNKNOWN</b></p>
<p><b>3.23</b> Nonpriority creditor's name and mailing address</p> <p>DUFF &amp; PHELPS CORPORATION 12595 COLLECTION CTR DR CHICAGO, IL 60693</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$70,865.26</b></p>
<p><b>3.24</b> Nonpriority creditor's name and mailing address</p> <p>ECHO INC P.O. BOX 1171130 ATLANTA, GA 30368-7113</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$1,240.00</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

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**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.25</b> Nonpriority creditor's name and mailing address</p> <p>ENSEMBLE RCM LLC ATTN: JOHN ERICKSON 13620 REESE BLVD, STE 200 HUNTERSVILLE, NC 28078</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,451,983.18</p>
<p><b>3.26</b> Nonpriority creditor's name and mailing address</p> <p>ERNST &amp; YOUNG LLP C/O ERNST &amp; YOUNG US LLP ATTN: AMY DORFMEISTER PITTSBURG NATL BANK 640382 1 PPG PL, 2100 PITTSBURGH, PA 15264</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$439,189.60</p>
<p><b>3.27</b> Nonpriority creditor's name and mailing address</p> <p>ESSENTIAL CONSULTING LLC 6401 ROLLING MEADOW CT SAN JOSE, CA 95135</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$15,000.00</p>
<p><b>3.28</b> Nonpriority creditor's name and mailing address</p> <p>ETTAIN GROUP INC P.O. BOX 60070 CHARLOTTE, NC 28260-0070</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$200,620.24</p>

Debtor Name Philadelphia Academic Health System, LLC

Case number (if known): 19-11467

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

Amount of claim

**3.29** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: UNKNOWN

FUTURE IT ADVISORS, INC.  
C/O GRIESING LAW, LLC  
ATTN: EDWARD FISHER, FRANCINE GRIESING  
1880 JFK BLVD, STE 1800  
PHILADELPHIA, PA 19103

Date or dates debt was incurred

Last 4 digits of account number

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
LITIGATION  
COMMERCIAL DISPUTE CONCERNING IT SERVICES

Is the claim subject to offset?  
 No  
 Yes

**3.30** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$23,625.00

GENOVA GROUP LLC  
7 GREAT OAKS DR  
GLEN MILLS, PA 19342

Date or dates debt was incurred

Last 4 digits of account number

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Is the claim subject to offset?  
 No  
 Yes

**3.31** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$10,000.00

GERMAIN & CO  
10552 SUCCESS LN, STE A  
DAYTON, OH 45458

Date or dates debt was incurred

Last 4 digits of account number

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Is the claim subject to offset?  
 No  
 Yes

**3.32** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$12,900.00

GLASS, JOSEPH  
2123 ORCHARD CREEK DR  
TOLEDO, OH 43615

Date or dates debt was incurred

Last 4 digits of account number

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Is the claim subject to offset?  
 No  
 Yes



Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.33</b> Nonpriority creditor's name and mailing address</p> <p>GREGORY DIAZ C/O LAW OFFICES OF MICHAEL ETKIN &amp; ASSOC ATTN: JENNIFER ETKIN, ESQ. 4961 OXFORD AVE PHILADELPHIA, PA 19124</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>UNKNOWN</p>
<p><b>3.34</b> Nonpriority creditor's name and mailing address</p> <p>HEALTH SCIENCES LAW GROUP LLC 7670 NORTH PORT WASHINGTON RD MILWAUKEE, WI 53217</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$19,845.00</p>
<p><b>3.35</b> Nonpriority creditor's name and mailing address</p> <p>HEALTHCARE PERFORMANCE GROUP INC P.O. BOX 588 SPRING HILLS, KS 66083</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$96,442.66</p>
<p><b>3.36</b> Nonpriority creditor's name and mailing address</p> <p>HEALTHSHARE EXCHANGE OF SO PA 1801 MARKET ST, STE 750 PHILADELPHIA, PA 19103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$72,545.00</p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.37</b> Nonpriority creditor's name and mailing address</p> <p>HEALTHSTREAM INC P.O. BOX 102817 ATLANTA, GA 30368-2817</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$225,753.30</b></p>
<p><b>3.38</b> Nonpriority creditor's name and mailing address</p> <p>HOLLAND SQUARE GROUP LLC 200 BRICKSTONE SQ, STE 503 ANDOVER, MA 01810</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$538,436.50</b></p>
<p><b>3.39</b> Nonpriority creditor's name and mailing address</p> <p>INFOR NW7418 P.O. BOX 1450 MINNEAPOLIS, MN 55485-7418</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$216,605.04</b></p>
<p><b>3.40</b> Nonpriority creditor's name and mailing address</p> <p>INTRALINKS INC 10017 685 3RD AVE, FL 9 NEW YORK, NY 10017</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$7,215.48</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.41</b> Nonpriority creditor's name and mailing address</p> <p>IRON MOUNTAIN P.O. BOX 27128 NEW YORK, NY 10087-7128</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$837.83</b></p>
<p><b>3.42</b> Nonpriority creditor's name and mailing address</p> <p>IRON MOUNTAIN INFORMATION MANAGEMENT, LLC 1101 ENTERPRISE DR ROYERSFORD, PA 19468</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$4,189.15</b></p>
<p><b>3.43</b> Nonpriority creditor's name and mailing address</p> <p>JOHN MASTRANGELO C/O POND LEHOCKY ATTN: DAVID STERN, ESQ. ONE COMMERCE SQ 2005 MARKET ST, 18TH FL PHILADELPHIA, PA 19103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>UNKNOWN</b></p>
<p><b>3.44</b> Nonpriority creditor's name and mailing address</p> <p>JONES LANG LASALLE AMERICAS INC 33832 TREASURY CTR CHICAGO, IL 60694-3800</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$11,025.00</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

**3.45** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: **\$46,170.00**

K&C STRATEGIC POLICY GROUP LLC  
21351 GENTRY DR, STE 210  
STERLING, VA 20166

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**

No  
 Yes

**3.46** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: **UNKNOWN**

KENNETH BOYD  
C/O BISHOP DORFMAN KROUPA & BISHOP PC  
ATTN: WILLIAM BISHOP, ESQ.  
1617 JFK BLVD, STE 1290  
PHILADELPHIA, PA 19103-1811

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
LITIGATION  
WORKERS' COMPENSATION

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**

No  
 Yes

**3.47** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: **\$7,239.56**

LAW OFFICES OF SUZANNE N  
319 W FRONT ST  
MEDIA, PA 19063

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**

No  
 Yes

**3.48** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: **\$227,427.00**

LOCKTON COMPANIES LLC  
DEPT LA 23878  
PASADENA, CA 91185-3878

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**

No  
 Yes

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.49</b> Nonpriority creditor's name and mailing address</p> <p>MARQUITA ROGERS C/O POND LEHOCKY ATTN: ALEXIS HANDRICH ONE COMMERCE SQ 2005 MARKET ST, 18TH FL PHILADELPHIA, PA 19103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>UNKNOWN</p>
<p><b>3.50</b> Nonpriority creditor's name and mailing address</p> <p>MARY ANTONY C/O FREEDMAN AND LORRY, PC ATTN: PAUL HIMMEL, ESQ. 1601 MARKET ST, STE 1500 PHILADELPHIA, PA 19103-2327</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>UNKNOWN</p>
<p><b>3.51</b> Nonpriority creditor's name and mailing address</p> <p>MELISSA EARLEY C/O CHRISTOPHER C CARA ONE COMMERCE SQ 2005 MARKET ST, 18TH FL PHILADELPHIA, PA 19103-7042</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>UNKNOWN</p>
<p><b>3.52</b> Nonpriority creditor's name and mailing address</p> <p>METTEL P.O. BOX 9660 MANCHESTER, NH 03108-9660</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$3,408.73</p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.53</b> Nonpriority creditor's name and mailing address</p> <p>MHC SOFTWARE INC 2000 PORTLAND AVE SOUTH, STE 230 BURNSVILLE, MN 55337</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$12,250.00</b></p>
<p><b>3.54</b> Nonpriority creditor's name and mailing address</p> <p>MISYS HEALTHCARE SYS P.O. BOX 75214 CHARLOTTE, NC 28275-0214</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,376.00</b></p>
<p><b>3.55</b> Nonpriority creditor's name and mailing address</p> <p>MJR TECHNOLOGIES INC 6211 KELLERS CHURCH RD PIPERSVILLE, PA 18947</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,703.00</b></p>
<p><b>3.56</b> Nonpriority creditor's name and mailing address</p> <p>MM USA HOLDINGS INC P.O. BOX 90477 CHICAGO, IL 60696-0477</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$68,000.00</b></p>

Debtor Name Philadelphia Academic Health System, LLC

Case number (if known): 19-11467

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

Amount of claim

**3.57** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$5,637.00

NEFF ASSOCIATES INC  
13 S 3RD ST, 4TH FL  
PHILADELPHIA, PA 19106

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**  
 No  
 Yes

**3.58** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$138,769.16

NTHRIVE INC  
ATTN: KAY ENNIS  
200 NORTH POINT CTR E, STE 600  
ALPHARETTA, GA 30022

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**  
 No  
 Yes

**3.59** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$2,976,070.29

NTT DATA SERVICES LLC  
ATTN: SUBBARAO PUSHADAPU  
7950 LEGACY DR, STE 900  
PLANO, TX 75024

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**  
 No  
 Yes

**3.60** Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: \$1,080.00

ONX USA LLC  
4842 SOLUTION CTR  
CHICAGO, IL 60677-4008

Contingent  
 Unliquidated  
 Disputed

**Basis for the claim:**  
TRADE PAYABLE

Date or dates debt was incurred

Last 4 digits of account number **Is the claim subject to offset?**  
 No  
 Yes

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

			Amount of claim
<p><b>3.61</b></p> <p><b>Nonpriority creditor's name and mailing address</b>                      OPTUM/ADVISORY BOARD                      DEPT CH 10335                      PALATINE, IL 60055-0335</p> <p><b>Date or dates debt was incurred</b></p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b>                      TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>\$109,009.00</b></p>	
<p><b>3.62</b></p> <p><b>Nonpriority creditor's name and mailing address</b>                      PALADIN HEALTHCARE                      222 N PACIFIC COAST HIGHWAY, STE 900                      EL SEGUNDO, CA 90245</p> <p><b>Date or dates debt was incurred</b></p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b>                      TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes</p>	<p><b>\$550,000.00</b></p>	
<p><b>3.63</b></p> <p><b>Nonpriority creditor's name and mailing address</b>                      PAM SEACHOW                      C/O BELL &amp; BELL, LLP                      ATTN: JENNIFER BELL, CHRISTOPHER MACEY                      1617 JFK BLVD, STE 1254                      PHILADELPHIA, PA 19103</p> <p><b>Date or dates debt was incurred</b></p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b></p> <p><input checked="" type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b>                      LITIGATION                      EMPLOYMENT CLAIM</p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>UNKNOWN</b></p>	
<p><b>3.64</b></p> <p><b>Nonpriority creditor's name and mailing address</b>                      PENN ENVIRONMENTAL &amp; REMEDIATION                      400 OLD DUBLIN PK                      DOYLESTOWN, PA 18901</p> <p><b>Date or dates debt was incurred</b></p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b>                      TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>\$55,069.51</b></p>	



**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.65</b> Nonpriority creditor's name and mailing address</p> <p>PENNONI ASSOCIATES INC P.O. BOX 827328 PHILADELPHIA, PA 19182-7328</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$22,900.00</p>
<p><b>3.66</b> Nonpriority creditor's name and mailing address</p> <p>PERIGEN INC P.O. BOX 200893 PITTSBURGH, PA 15251-0893</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$36,120.00</p>
<p><b>3.67</b> Nonpriority creditor's name and mailing address</p> <p>PREMIER HEALTHCARE SOLUTIONS ATTN: KELLEY MASKERI 5882 COLLECTIONS CTR DR CHICAGO, IL 60693</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$194,622.10</p>
<p><b>3.68</b> Nonpriority creditor's name and mailing address</p> <p>SCHERISE BELL C/O POND LEHOCKY ATTN: ALEXIS HANDRICH ONE COMMERCE SQ 2005 MARKET ST, 18TH FL PHILADELPHIA, PA 19103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>UNKNOWN</p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.69</b> Nonpriority creditor's name and mailing address</p> <p>SESSER, MEREDITH J 16030 VENTURA BLVD, STE 320 ENCINO, CA 91436</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,500.00</b></p>
<p><b>3.70</b> Nonpriority creditor's name and mailing address</p> <p>SHARAE SMITH 620 ROCKLEDGE AVE ROCKLEDGE, PA 19046</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>UNKNOWN</b></p>
<p><b>3.71</b> Nonpriority creditor's name and mailing address</p> <p>SMR HEALTHCARE MANAGEMENT INC 4525 DEAN MARTIN DR UNIT 2308 LAS VEGAS, NV 89103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$239,250.34</b></p>
<p><b>3.72</b> Nonpriority creditor's name and mailing address</p> <p>TENET BUSINESS SERVICES CORPORATION, INC. C/O POTTER ANDERSON &amp; CORROON LLP ATTN: JOHN A. SENSING 1313 N MARKET ST, HERCULES PLZ, 6TH FL P.O. BOX 951 WILMINGTON, DE 19801</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> LITIGATION COMMERCIAL DISPUTE</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>	<p><b>UNKNOWN</b></p>

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.73</b> Nonpriority creditor's name and mailing address</p> <p>TRANSAMERICA P.O. BOX 20781 LEHIGH VALLEY, PA 18002-0781</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$17,511.00</p>
<p><b>3.74</b> Nonpriority creditor's name and mailing address</p> <p>TYRON HARRELL C/O MARTIN LLC ATTN: MATTHEW WILSON, ESQ. 1818 MARKET ST, FL 35 PHILADELPHIA, PA 19103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LITIGATION WORKERS' COMPENSATION</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>UNKNOWN</p>
<p><b>3.75</b> Nonpriority creditor's name and mailing address</p> <p>VP-MA HEALTH SOLUTIONS JAMES S KENNEDY MD CCS 110 FRANCES KING DR SMYRNA, TN 37167-5352</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$175,119.21</p>
<p><b>3.76</b> Nonpriority creditor's name and mailing address</p> <p>WATTS RESTORATION CO INC 1704 BUSTLETON PIKE FEASTERVILLE, PA 19053</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is:</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$223,915.50</p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

		Amount of claim
<p><b>3.77</b></p> <p><b>Nonpriority creditor's name and mailing address</b></p> <p>WEST HEALTH ADVOCATE SOLUTIONS                      P.O. BOX 561509                      DENVER, CO 80256-1509</p> <p><b>Date or dates debt was incurred</b></p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b>                      TRADE PAYABLE</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>\$19,160.75</b></p>

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

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

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

<b>5a. Total claims from Part 1</b>	<input type="text" value="\$0.00"/>
<b>5b. Total claims from Part 2</b>	<input type="text" value="\$13,311,191.05"/>
<b>5c. Total claims of Parts 1 and 2</b> Lines 5a + 5b = 5c	<input type="text" value="\$13,311,191.05"/>

Debtor Name **Philadelphia Academic Health System, LLC**  
**United States Bankruptcy Court for the District of Delaware**  
 Case number (if known): **19-11467**

Check if this is an amended filing

**Official Form 206G**

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

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

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

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

**2. List all contracts and unexpired leases**

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

2.1	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>LICENSE AGREEMENT</b>	<b>3M HEALTH INFORMATION SYSTEMS, INC.</b> ATTN: LEGAL 575 WEST MURRAY BLVD MURRAY, UT 84123
2.2	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>50 WORDS, LLC</b> ATTN: LINDA MCDONOUGH 1915 WAYNE DR WEST NORRITON, PA 19403
2.3	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT</b>	<b>AARGON AGENCY, INC.</b> 8668 SPRING MOUNTAIN RD LAS VEGAS, NV 89117
2.4	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>LICENSE AGREEMENT</b>	<b>ACCRUENT, LLC</b> 11500 ALTERRA PKWY, STE 110 AUSTIN, TX 78758
2.5	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>PAYROLL, BENEFITS, &amp; TALENT MGT SOLUTIONS</b>	<b>ADP, LLC</b> ATTN: LEGAL DEPT 5800 WINDWARD PKWY ALPHARETTA, GA 30005

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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

List all contracts and unexpired leases

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

2.6	State what the contract or lease is for and the nature of the debtor's interest	<b>APPLICATION SERVICE PROVIDER HOSTING &amp; SUPPORT AGREEMENT</b>	<b>ADVANCED TECHNOLOGIES GROUP, INC. 377 EAST BUTTERFIELD RD, STE 900 LOMBARD, IL 60148</b>
	State the term remaining List the contract number of any government contract		
2.7	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR EXTERNAL PEER REVIEW SERVICES</b>	<b>ALLMED HEALTHCARE MANAGEMENT, INC. ATTN: CEO 11 SW 5TH AVE, STE 1400 PORTLAND, OR 97204</b>
	State the term remaining List the contract number of any government contract		
2.8	State what the contract or lease is for and the nature of the debtor's interest	<b>CUSTOMER AGREEMENT</b>	<b>AMERICAN MESSAGING SERVICES, LLC ATTN: CONTRACT SUPPORT GROUP 1720 LAKEPOINTE DR, STE 100 LEWISVILLE, TX 75057</b>
	State the term remaining List the contract number of any government contract		
2.9	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>AUGUSTA HEALTHCARE, INC. ATTN: STEPHEN F. RIGO, PRESIDENT 255 GOLFVIEW RD ARDMORE, PA 19003</b>
	State the term remaining List the contract number of any government contract		
2.10	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PHYSICIAN CODING AUDITS</b>	<b>AVIACODE, INC. 257 E 200 S, STE 700 SALT LAKE CITY, UT 84111</b>
	State the term remaining List the contract number of any government contract		
2.11	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>BARATZ &amp; ASSOCIATES, PA ATTN: CLIFF SIMMONS, CPA, CVA 7 EVES DR, STE 100 MARLTON, NJ 08053</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.12	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR CONVERSION OF BLOOD BANK DATA TO CERNER</b>	<b>BC SOLUTIONS LLC 16815 S DESERT FOOTHILLS PKWY STE 130 PHOENIX, AZ 85048</b>
	State the term remaining List the contract number of any government contract		
2.13	State what the contract or lease is for and the nature of the debtor's interest	<b>PRICING AGREEMENT</b>	<b>BEEKLEY CORPORATION 1 PRESTIGE LANE BRISTOL, CT 06010</b>
	State the term remaining List the contract number of any government contract		
2.14	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR GOVERNMENT RELATIONS SERVICES</b>	<b>BELLEVUE STRATEGIES, LLC ATTN: PRESIDENT 200 SOUTH BROAD ST, STE 410 PHILADELPHIA, PA 19102</b>
	State the term remaining List the contract number of any government contract		
2.15	State what the contract or lease is for and the nature of the debtor's interest	<b>PRICING AGREEMENT</b>	<b>BIOCOMPATIBLES, INC. ATTN: LEGAL DEPT 300 CONSHOHOCKEN STATE RD, STE 380 WEST CONSHOHOCKEN, PA 19428</b>
	State the term remaining List the contract number of any government contract		
2.16	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR SOFTWARE FOR CLINICAL TRIALS</b>	<b>BIO-OPTRONICS, INC. ATTN: PRESIDENT 1890 WINTON RD S, STE 190 ROCHESTER, NY 14618</b>
	State the term remaining List the contract number of any government contract		
2.17	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>BLANK ROME LLP ATTN: CHRISTOPHER A. LEWIS 130 NORTH 18TH ST ONE LOGAN SQUARE PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		



Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.18	State what the contract or lease is for and the nature of the debtor's interest	PRICING AGREEMENT	BOSTON SCIENTIFIC CORPORATION ATTN: BUSINESS OPERATIONS MANAGER 4100 HAMLINE AVE N ARDEN HILLS, MN 55112
	State the term remaining List the contract number of any government contract		
2.19	State what the contract or lease is for and the nature of the debtor's interest	LICENSE AGREEMENT	BROADCAST MUSIC INC. ATTN: VP, GENERAL LICENSING DEPT 10 MUSIC SQUARE E NASHVILLE, TN 37203
	State the term remaining List the contract number of any government contract		
2.20	State what the contract or lease is for and the nature of the debtor's interest	ENGAGEMENT LETTER	BRUCKER & MORRA, PC ATTN: MEREDITH J. SESSER 10866 WILSHIRE BLVD, 10TH FL LOS ANGELES, CA 90024
	State the term remaining List the contract number of any government contract		
2.21	State what the contract or lease is for and the nature of the debtor's interest	ENGAGEMENT LETTER	BURNS WHITE LLC ATTN: KIRSTEN B. HARE 1001 CONSHOHOCKEN STATE RD, STE 515 WEST CONSHOHOCKEN, PA 19428
	State the term remaining List the contract number of any government contract		
2.22	State what the contract or lease is for and the nature of the debtor's interest	AGREEMENT FOR INTERIM CMIO SERVICES	CALYX PARTNERS, LLC ATTN: DAVID K. BUTLER, MD 2795 EAST BIDWELL ST, STE 100 FOLSOM, CA 95630
	State the term remaining List the contract number of any government contract		
2.23	State what the contract or lease is for and the nature of the debtor's interest	AGREEMENT FOR RENTAL OF FEEDING PUMPS	CARDINAL HEALTH 200, LLC ATTN: REGION DIR, NE SPECIALTY PRODUCTS SALES 7000 CARDINAL PL DUBLIN, OH 43017
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.24	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR SOFTWARE MGT SYSTEM</b>	<b>CAREFUSION SOLUTIONS, LLC 3750 TORREY VIEW COURT SAN DIEGO, CA 92130</b>
	State the term remaining List the contract number of any government contract		
2.25	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR RECRUITING SERVICES</b>	<b>CARTERPIERCE, LLC ATTN: JILL PIERCE 244 MADISON AVE, STE 1510 NEW YORK, NY 10016</b>
	State the term remaining List the contract number of any government contract		
2.26	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR WORK ORDERS &amp; SCHEDULES FOR SOFTWARE &amp; SERVICES</b>	<b>CERNER CORPORATION ATTN: PRESIDENT 2800 ROCKCREEK PKWY KANSAS CITY, MO 64117</b>
	State the term remaining List the contract number of any government contract		
2.27	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ENERGY UTILITY FOR THE FACILITIES</b>	<b>CHAMPION ENERGY SERVICES, LLC 1500 RANKIN RD, STE 200 HOUSTON, TX 77073</b>
	State the term remaining List the contract number of any government contract		
2.28	State what the contract or lease is for and the nature of the debtor's interest	<b>CONTRACT SUPPLEMENT TO LICENSE AGREEMENT</b>	<b>CHANGE HEALTHCARE TECHNOLOGIES, LLC ATTN: GENERAL COUNSEL 5995 WINDWARD PKWY ALPHARETTA, GA 30005</b>
	State the term remaining List the contract number of any government contract		
2.29	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PHYSICIAN COVERAGE</b>	<b>CHG COMPANIES, INC. DBA COMPHEALTH 7259 SOUTH BINGHAM JUNCTION BLVD MIDVALE, UT 84047</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.30	State what the contract or lease is for and the nature of the debtor's interest	<b>RISK MGT CONSULTING SERVICES AGREEMENT</b>	<b>CL RISK SOLUTIONS, LLC ATTN: CHRISTINE LOCH, PRESIDENT 3370 N HAYDEN RD, #123-556 SCOTTSDALE, AZ 85251</b>
	State the term remaining List the contract number of any government contract		
2.31	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>COHNREZNICK LLP ATTN: KIMBERLY BRANDLEY, CPA, PARTNER 23 CHRISTOPHER WAY EATONTOWN, NJ 07724</b>
	State the term remaining List the contract number of any government contract		
2.32	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>COLEMAN NOURIAN SEARCH LLC ATTN: ROBERT B. NOURIAN, MANAGING PRINCIPAL TWO PENN CENTER, STE 430 PHILADELPHIA, PA 19102</b>
	State the term remaining List the contract number of any government contract		
2.33	State what the contract or lease is for and the nature of the debtor's interest	<b>SERVICE AGREEMENT</b>	<b>COMPHEALTH CHG COMPANIES, INC 7259 S BINGHAM JUNCTION BLVD MIDVALE, UT 84047</b>
	State the term remaining List the contract number of any government contract		
2.34	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR REGISTRATION &amp; REVENUE CYCLE SERVICES</b>	<b>CONIFER REVENUE CYCLE SOLUTIONS, LLC ATTN: PRESIDENT 3560 DALLAS PKWY FRISCO, TX 75034</b>
	State the term remaining List the contract number of any government contract		
2.35	State what the contract or lease is for and the nature of the debtor's interest	<b>STATEMENT OF WORK</b>	<b>CONIFER REVENUE CYCLE SOLUTIONS, LLC ATTN: PRESIDENT 3560 DALLAS PKWY FRISCO, TX 75034</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.36	State what the contract or lease is for and the nature of the debtor's interest	<b>EXHIBIT B-2 STATEMENT OF WORK</b>	<b>CONIFER REVENUE CYCLE SOLUTIONS, LLC ATTN: PRESIDENT 3560 DALLAS PKWY FRISCO, TX 75034</b>
	State the term remaining List the contract number of any government contract		
2.37	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>CONNOLLY GALLAGHER LLP ATTN: RYAN P. NEWELL 1201 NORTH MARKET ST, 20TH FL WILMINGTON, DE 19801</b>
	State the term remaining List the contract number of any government contract		
2.38	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>CONRAD O'BRIEN PC ATTN: KEVIN DOOLEY KENT 1500 MARKET ST, STE 3900, WEST TOWER PHILADELPHIA, PA 19102</b>
	State the term remaining List the contract number of any government contract		
2.39	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER ORDER AGREEMENT</b>	<b>CONVERGEONE SYSTEMS INTEGRATION, INC. ATTN: CONTRACT ADMIN 1820 PRESTON PARK BLVD, STE 2800 PLANO, TX 75093</b>
	State the term remaining List the contract number of any government contract		
2.40	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>CORONA PARTNERS ATTN: CHRISTOPHER STROM, FOUNDER 3025 MARKET ST, STE 140 PHILADELPHIA, PA 19104</b>
	State the term remaining List the contract number of any government contract		
2.41	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR UNEMPLOYMENT COMPENSATION MGT SERVICES</b>	<b>CORPORATE COST CONTROL, INC. 50 NASHUA RD LONDONDERRY, NH 03053</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.42	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ENVIRONMENTAL SERVICES</b>	<b>CROTHALL HEALTHCARE, INC.</b> <b>ATTN: LEGAL DEPT</b> <b>1500 LIBERTY RIDGE DR, STE 210</b> <b>WAYNE, PA 19087</b>
	State the term remaining List the contract number of any government contract		
2.43	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>CROWELL &amp; MORING LLP</b> <b>ATTN: CLAUD V.S. ELEY</b> <b>1001 PENNSYLVANIA AVE, NW</b> <b>WASHINGTON, DC 2004-2595</b>
	State the term remaining List the contract number of any government contract		
2.44	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ASSESSMENT OF MARKET RENT</b>	<b>CUSHMAN &amp; WAKEFIELD OF PHILADELPHIA, INC.</b> <b>1650 MARKET ST, 33RD FL</b> <b>PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		
2.45	State what the contract or lease is for and the nature of the debtor's interest	<b>MANAGED CARE CONSULTING SERVICES AGREEMENT</b>	<b>DAVID SMALL</b> <b>ATTN: DAVID SMALL</b> <b>12415 BRENTLEYWOOD LANE</b> <b>HOUSTON, TX 77070</b>
	State the term remaining List the contract number of any government contract		
2.46	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR DENTAL BENEFIT PLAN</b>	<b>DELTA DENTAL OF PENNSYLVANIA</b> <b>ONE DELTA DR</b> <b>MECHANICSBURG, PA 17055-6999</b>
	State the term remaining List the contract number of any government contract		
2.47	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PROPOSAL</b>	<b>DIAGNOSS INC.</b> <b>ATTN: LEGAL DEPT</b> <b>2560 BANCROFT WAY</b> <b>BERKELEY, CA 94704</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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2.48	State what the contract or lease is for and the nature of the debtor's interest	<b>SOW AGREEMENT</b>	<b>DIXON HUGHES GOODMAN LLP ATTN: DAVID HALL, PARTNER 4350 CONGRESS ST, STE 900 CHARLOTTE, NC 28209</b>
	State the term remaining List the contract number of any government contract		
2.49	State what the contract or lease is for and the nature of the debtor's interest	<b>SOW AGREEMENT</b>	<b>DIXON HUGHES GOODMAN LLP ATTN: DAVID HALL, PARTNER 4350 CONGRESS ST, STE 900 CHARLOTTE, NC 28209</b>
	State the term remaining List the contract number of any government contract		
2.50	State what the contract or lease is for and the nature of the debtor's interest	<b>RESTATED RESEARCH MANAGEMENT SERVICES AGREEMENT</b>	<b>DREXEL UNIVERSITY COLLEGE OF MEDICINE ATTN: DEAN 245 N 15TH ST, MS400 PHILADELPHIA, PA 19102</b>
	State the term remaining List the contract number of any government contract		
2.51	State what the contract or lease is for and the nature of the debtor's interest	<b>AMENDED AND RESTATED ACADEMIC AFFILIATION AGREEMENT</b>	<b>DREXEL UNIVERSITY, FOR ITS COLLEGE OF MEDICINE ATTN: PRESIDENT 3141 CHESTNUT ST PHILADELPHIA, PA 19104</b>
	State the term remaining List the contract number of any government contract		
2.52	State what the contract or lease is for and the nature of the debtor's interest	<b>SUPPLEMENTAL ACADEMIC AFFILIATION AGREEMENT - PEDIATRIC MEDICINE</b>	<b>DREXEL UNIVERSITY, FOR ITS COLLEGE OF MEDICINE ATTN: DEAN 245 N 15TH ST, 19TH FL PHILADELPHIA, PA 19102</b>
	State the term remaining List the contract number of any government contract		
2.53	State what the contract or lease is for and the nature of the debtor's interest	<b>ESTIMATION AGREEMENT</b>	<b>DUFF &amp; PHELPS, LLC ATTN: MANAGING DIR 411 EAST WISCONSIN AVE, STE 1900 MILWAUKEE, WI 53202</b>
	State the term remaining List the contract number of any government contract		

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

2.54	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR IT CONSULTANTS</b>	<b>E4 SERVICES, LLC ATTN: MIKE BRENSINGER 411 GREEN VALLEY RD SINKING SPRING, PA 19608</b>
	State the term remaining List the contract number of any government contract		
2.55	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR CREDENTIALING &amp; LICENSING APPS</b>	<b>ECHO, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.56	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER SERVICES AGREEMENT</b>	<b>ECHO, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.57	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER FORM ORD-0555530</b>	<b>ECHO, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.58	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER FORM ORD-0559699</b>	<b>ECHO, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.59	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER FORM ORD-0574520</b>	<b>ECHO, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		

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2.60	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ORDER FORM ORD-0576228</b>	<b>ECHO, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
2.61	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>ECKERT SEAMANS CHERIN &amp; MELLOTT, LLC ATTN: MICHAEL D. JONES 50 S 16TH ST, 22ND FL PHILADELPHIA, PA 19102</b>
2.62	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR ASSISTANCE WITH RACP FILING</b>	<b>ECONSULT SOLUTIONS, INC. ATTN: PRESIDENT 1435 WALNUT ST, 4TH FL PHILADELPHIA, PA 19102</b>
2.63	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>EISNERAMPER LLP ATTN: LEGAL DEPT 1 LANDMARK SQUARE, 6TH FL, STE 618 STAMFORD, CT 06901</b>
2.64	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SOWS AGREEMENT</b>	<b>EISNERAMPER LLP ATTN: LEGAL DEPT 750 3RD AVE NEW YORK, NY 10017</b>
2.65	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER AGREEMENT</b>	<b>EISNERAMPER LLP ATTN: LEGAL DEPT 750 THIRD AVE NEW YORK, NY 10017</b>



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2.66	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>EISNERAMPER LLP ATTN: LEGAL DEPT 750 THIRD AVE NEW YORK, NY 10017</b>
	State the term remaining List the contract number of any government contract		
2.67	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>EISNERAMPER LLP ATTN: LEGAL DEPT 750 THIRD AVE NEW YORK, NY 10017</b>
	State the term remaining List the contract number of any government contract		
2.68	State what the contract or lease is for and the nature of the debtor's interest	<b>EPX MERCHANT AGREEMENT</b>	<b>ELECTRONIC PAYMENT EXCHANGE 1201 N MARKET ST, STE 701 WILMINGTON, DE 19801</b>
	State the term remaining List the contract number of any government contract		
2.69	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR EMPLOYMENT TAX CONSULTING SERVICES</b>	<b>EMPLOYMENT TAX SERVICING CORP DBA EMPTECH 2377 CENSHAW BLVD, STE 200 TORRANCE, CA 90501</b>
	State the term remaining List the contract number of any government contract		
2.70	State what the contract or lease is for and the nature of the debtor's interest	<b>SOWS AGREEMENT</b>	<b>ENSEMBLE RCM LLC DBA ENSEMBLE HEALTH PARTNERS ATTN: JUDSON IVY, CEO 13620 REESE BLVD, STE 200 HUNTERSVILLE, NC 28078</b>
	State the term remaining List the contract number of any government contract		
2.71	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE LICENSE AGREEMENT</b>	<b>ESSENTIAL CONSULTING LLC 6401 ROLLING MEADOW COURT SAN JOSE, CA 95135</b>
	State the term remaining List the contract number of any government contract		

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2.72	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR IT CONSULTANTS</b>	<b>ETTAIN GROUP, INC. ATTN: CONTRACT COMPLIANCE 127 W WORTHINGTON AVE, STE 100 CHARLOTTE, NC 28203</b>
	State the term remaining List the contract number of any government contract		
2.73	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR SERVICES FOR MASS NOTIFICATIONS</b>	<b>EVERBRIDGE, INC. ATTN: LEGAL DEPT 25 CORPORATE DR BURLINGTON, MA 01803</b>
	State the term remaining List the contract number of any government contract		
2.74	State what the contract or lease is for and the nature of the debtor's interest	<b>QUOTE # Q-08937</b>	<b>EVERBRIDGE, INC. ATTN: LEGAL DEPARTMENT 25 CORPORATE DR BURLINGTON, MA 01803</b>
	State the term remaining List the contract number of any government contract		
2.75	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR DENIED ACCOUNT REVIEW &amp; GAP ANALYSIS SERVICE</b>	<b>FIRM REVENUE CYCLE MANAGEMENT SERVICES, INC. ATTN: NANCY MOMCILOVIC, PRESIDENT 5590 SOUTH FORT APACHE RD LAS VEGAS, NV 89148</b>
	State the term remaining List the contract number of any government contract		
2.76	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR DESIGN WORK FOR RACP FILING</b>	<b>FRANCIS CAUFFMAN, INC. ATTN: PRINCIPAL, HEALTHCARE 2000 MARKET ST, STE 600 PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		
2.77	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR FACILITIES CONDITION ASSESSMENT</b>	<b>FRANCIS CAUFFMAN, INC. ATTN: ARAN A. MCCARTHY, PRINCIPAL IN CHARGE 2000 MARKET ST, STE 600 PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		

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2.78	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR IT CONSULTANTS</b>	<b>FUTURE IT ADVISORS, LLC ATTN: LEGAL DEPT 3610 RED OAK DR MONTGOMERY, TX 77316</b>
2.79	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>CONSULTING AGREEMENT FOR MARKETING SERVICES</b>	<b>GARY FRAZIER 2357 CEDAR AVE LONG BEACH, CA 90806</b>
2.80	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR WORK ORDERS</b>	<b>GEBBS HEALTHCARE SOLUTIONS, INC. ATTN: CEO 600 CORPORATE POINTE, STE 1250 CULVER CITY, CA 90230</b>
2.81	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER SERVICES AGREEMENT</b>	<b>GEBBS HEALTHCARE SOLUTIONS, INC. ATTN: CEO 600 CORPORATE POINTE, STE 1250 CULVER CITY, CA 90230</b>
2.82	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR TEMPORARY &amp; CONTRACT STAFFING PROVIDER</b>	<b>GENERAL HEALTHCARE RESOURCES, LLC ATTN: LAURA MAGNER, COO 2250 HICKORY RD, STE 240 PLYMOUTH MEETING, PA 19462</b>
2.83	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR TEMPORARY &amp; CONTRACT STAFFING PROVIDER</b>	<b>GENERAL HEALTHCARE RESOURCES, LLC ATTN: LAURA MAGNER, COO 2250 HICKORY RD, STE 240 PLYMOUTH MEETING, PA 19462</b>

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2.84	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR EVALUATION OF FINANCES</b>	<b>GERMANE &amp; CO, INC. DBA GERMANE SOLUTIONS ATTN: LEGAL DEPT 10552 SUCCESS LANE, STE A-2 DAYTON, OH 45458</b>
	State the term remaining List the contract number of any government contract		
2.85	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR HIGH LEVEL GME ASSESSMENT</b>	<b>GERMANE &amp; CO, INC. DBA GERMANE SOLUTIONS ATTN: LEGAL DEPT 10552 SUCCESS LANE, STE A-2 DAYTON, OH 45458</b>
	State the term remaining List the contract number of any government contract		
2.86	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER AGREEMENT</b>	<b>GLASSRATNER ADVISORY &amp; CAPITAL GROUP, LLC ATTN: CAROL FOX 200 EAST BROWARD BLVD, STE 1010 FORT LAUDERDALE, FL 33301</b>
	State the term remaining List the contract number of any government contract		
2.87	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ACCESS TO GYM MEMBERSHIPS</b>	<b>GLOBAL AFFILIATES, INC. ATTN: ANTHONY FRICK 1880 JFK BLVD, STE 1910 PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		
2.88	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ELECTRONIC DATA EXCHANGE</b>	<b>GLOBAL HEALTHCARE EXCHANGE, LLC ATTN: CUSTOMER CONTRACTS 1315 W CENTURY DR, STE 100 LOUISVILLE, CO 80027</b>
	State the term remaining List the contract number of any government contract		
2.89	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER SERVICE AGREEMENT</b>	<b>GTT AMERICAS, LLC ATTN: GENERAL COUNSEL 7900 TYSONS ONE PL, STE 1450 MCLEAN, VA 22102</b>
	State the term remaining List the contract number of any government contract		

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2.90	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SERVICE AGREEMENT</b>	<b>HAYES HEALTHCARE 6700 N ANDREWS AVE, STE 600 FORT LAUDERDALE, FL 33309</b>
2.91	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>PHYSICIAN LOCUM TENENS COVERAGE AGREEMENT</b>	<b>HAYES HEALTHCARE, LLC 6700 NORTH ANDREWS AVE, STE 600 FORT LAUDERDALE, FL 33309</b>
2.92	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR COLLECTIONS SERVICES</b>	<b>HBO &amp; RECOVERIES, LLC ATTN: KENNETH WHEELER 415 W 16 ST UPLAND, CA 91784</b>
2.93	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>HEALTH SCIENCES LAW GROUP LLC ATTN: ROBYN SHAPIRO 7670 N PORT WASHINGTON RD, STE 201 FOX POINT, WI 53217</b>
2.94	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR IT CONSULTANTS</b>	<b>HEALTHCARE PERFORMANCE GROUP, INC. ATTN: LEGAL DEPT 23419 WEST 215TH ST SPRING HILL, KS 66083</b>
2.95	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>CONSULTING AGREEMENT</b>	<b>HEALTHCARE RECEIVABLE SPECIALISTS, INC. ATTN: CLIENT DEVELOPMENT 10 N INDEPENDENCE MALL W, STE 5NW PHILADELPHIA, PA 19106</b>

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2.96	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ONLINE TRAINING FOR EMPLOYEES</b>	<b>HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.97	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER SERVICES AGREEMENT</b>	<b>HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.98	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER NUMBER ORD-0560031</b>	<b>HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.99	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER NUMBER ORD-0575567</b>	<b>HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.100	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER NUMBER ORD-0602617</b>	<b>HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.101	State what the contract or lease is for and the nature of the debtor's interest	<b>ORDER NUMBER ORD-0602493</b>	<b>HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		

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2.102	State what the contract or lease is for and the nature of the debtor's interest	ORDER NUMBER ORD-0614509	HEALTHSTREAM, INC. ATTN: LEGAL DEPT 209 10TH AVE S, STE 450 NASHVILLE, TN 37203
	State the term remaining List the contract number of any government contract		
2.103	State what the contract or lease is for and the nature of the debtor's interest	TRANSITION AGREEMENT	HEALTHTRUST PURCHASING GROUP, L.P. ATTN: CHIEF LEGAL OFFICER 1100 CHARLOTTE AVE, STE 1100 NASHVILLE, TN 37203
	State the term remaining List the contract number of any government contract		
2.104	State what the contract or lease is for and the nature of the debtor's interest	AGREEMENT FOR PHYSICIAN CODING AUDITS	HMI LLC ATTN: CLIENT SERVICES MANAGER 214 OVERLOOK CIR, STE 253 BRENTWOOD, TN 37027
	State the term remaining List the contract number of any government contract		
2.105	State what the contract or lease is for and the nature of the debtor's interest	AGREEMENT FOR IT CONSULTANTS	HOLLAND SQUARE GROUP, LLC 302 INNOVATION DR, STE 120 FRANKLIN, TN 37067
	State the term remaining List the contract number of any government contract		
2.106	State what the contract or lease is for and the nature of the debtor's interest	AGREEMENT FOR COLLECTIONS SERVICES	HOLLIS COBB ASSOCIATES, INC. ATTN: GREG HOCUTT 3175 SATELLITE BLVD BUILDING 600, STE 400 DULUTH, GA 30096
	State the term remaining List the contract number of any government contract		
2.107	State what the contract or lease is for and the nature of the debtor's interest	SYSTEM PRODUCT PRICING AGREEMENT	HOWMEDICA OSTEONICS CORP. 325 CORPORATE DR MAHWAH, NJ 07430
	State the term remaining List the contract number of any government contract		

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2.108	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>HURON CONSULTING SERVICES LLC ATTN: JONATHAN SAYLORS, MANAGING DIR 550 W VAN BUREN ST CHICAGO, IL 60607</b>
	State the term remaining List the contract number of any government contract		
2.109	State what the contract or lease is for and the nature of the debtor's interest	<b>SOWS AGREEMENT</b>	<b>IMPEMENTATION MANGEMENT ASSISTANCE, LLC DBA REVINT SOLUTIONS ATTN: CEO 6 HILLMAN DR, STE 100 CHADDS FORD, PA 19317</b>
	State the term remaining List the contract number of any government contract		
2.110	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER SERVICES AGREEMENT</b>	<b>IMPEMENTATION MANGEMENT ASSISTANCE, LLC DBA REVINT SOLUTIONS ATTN: CEO 6 HILLMAN DR, STE 100 CHADDS FORD, PA 19317</b>
	State the term remaining List the contract number of any government contract		
2.111	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR WORK ORDER FOR IMPLEMENTATION</b>	<b>INFOR (US), INC. ATTN: GREGORY M GIANGIORDANO 641 AVE OF THE AMERICAS NEW YORK, NY 10011</b>
	State the term remaining List the contract number of any government contract		
2.112	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE SUBSCRIPTION LICENSE &amp; SERVICES AGREEMENT</b>	<b>INFOR (US), INC. ATTN: GREGORY M GIANGIORDANO 641 AVE OF THE AMERICAS NEW YORK, NY 10011</b>
	State the term remaining List the contract number of any government contract		
2.113	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE SERVICES AGREEMENT</b>	<b>INFOR (US), INC. ATTN: GREGORY M GIANGIORDANO 641 AVE OF THE AMERICAS NEW YORK, NY 10011</b>
	State the term remaining List the contract number of any government contract		



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2.114	State what the contract or lease is for and the nature of the debtor's interest	<b>FIXED FEE SERVICES WORK ORDER</b>	<b>INFOR (US), INC. ATTN: GREGORY M GIANGIORDANO 641 AVE OF THE AMERICAS NEW YORK, NY 10011</b>
	State the term remaining List the contract number of any government contract		
2.115	State what the contract or lease is for and the nature of the debtor's interest	<b>SAAS ORDER FORM</b>	<b>INFOR (US), INC. ATTN: GREGORY M GIANGIORDANO 641 AVE OF THE AMERICAS NEW YORK, NY 10011</b>
	State the term remaining List the contract number of any government contract		
2.116	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE LICENSE AGREEMENT</b>	<b>INGENIOUS MED, INC. ATTN: GEO 400 GALLERIA PKWY, STE 1600 ATLANTA, GA 30339</b>
	State the term remaining List the contract number of any government contract		
2.117	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER SERVICES AGREEMENT</b>	<b>INGENIOUS MED, INC. ATTN: CEO 400 GALLERIA PKWY, STE 1600 ATLANTA, GA 30339</b>
	State the term remaining List the contract number of any government contract		
2.118	State what the contract or lease is for and the nature of the debtor's interest	<b>STATEMENT OF WORK #1</b>	<b>INGENIOUS MED, INC. ATTN: CEO 400 GALLERIA PKWY, STE 1600 ATLANTA, GA 30339</b>
	State the term remaining List the contract number of any government contract		
2.119	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PHYSICIAN RECRUITING &amp; SEARCH SERVICES</b>	<b>INTEGRITY HEALTHCARE, LLC 9785 SOUTH MAROON CIR, STE G102 ENGLEWOOD, CO 80112</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.120	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR DATA ROOM</b>	<b>INTRALINKS, INC. ATTN: GENERAL COUNSEL 685 3RD AVE, 9TH FL NEW YORK, NY 10017</b>
2.121	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>WORK ORDER</b>	<b>INTRALINKS, INC. ATTN: GENERAL COUNSEL 685 THIRD AVE, 9TH FL NEW YORK, NY 10017</b>
2.122	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR RECORDS MGT</b>	<b>IRON MOUNTAIN INFORMATION MANAGEMENT, LLC 1101 ENTERPRISE DR ROYERSFORD, PA 19468</b>
2.123	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>JACKSON LEWIS P.C. ATTN: EILEEN K. KEEFE 1601 CHERRY ST, STE 1350 PHILADELPHIA, PA 19102</b>
2.124	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>JAY M. YANOFF, EDD 1608 SQUIRE DR MAPLE GLEN, PA 19002</b>
2.125	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SOFTWARE LICENSE AGREEMENT</b>	<b>JDI NET SYSTEMS ATTN: IVAN LEE, OWNER 4000 PIMLICO DR PLEASANTON, CA 94588</b>

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

2.126	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>CONSULTING SERVICES AGREEMENT</b>	<b>JOHN DOWDLE 9772 POWDER HALL RD PERRY HALL, MD 21128</b>
2.127	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>PRICING AGREEMENT</b>	<b>JOHNSON &amp; JOHNSON HEALTH CARE SYSTEMS INC. ATTN: MANAGER, CONTRACT ADMIN STRATEGIC ACCTS HIGHWAY 22 N SOMERVILLE, NJ 08876-1051</b>
2.128	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>JP ZIMMERMAN PCS LLC 37 STREAM BANK DR FREEHOLD, NJ 07728</b>
2.129	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR GOVERNMENT RELATIONS &amp; CONSULTING SERVICES</b>	<b>K&amp;C STRATEGIC POLICY GROUP, LLC DBA DEBRUNNER &amp; ASSOCIATES ATTN: ELLEN KUGLER, MGING PTNR, FED AFFAIRS 112 WALNUT ST HARRISBURG, PA 17101</b>
2.130	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>KLEHR HARRISON HARVEY BRANZBURG LLP ATTN: GREGORY GOSFIELD 1835 MARKET ST PHILADELPHIA, PA 19103</b>
2.131	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>LAULETTA BIRNBAUM, LLC ATTN: LLOYD C. BIRNBAUM, ESQ. 591 MANUTA BLVD, STE 200 SEWELL, NJ 08080</b>

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

2.132	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER (UNSIGNED BY PAHS)</b>	<b>LAW OFFICES OF SUZANNE N. PRITCHARD, P.C. ATTN: SUZANNE N PRITCHARD, ESQ. 319 WEST FRONT ST MEDIA, PA 19063</b>
	State the term remaining List the contract number of any government contract		
2.133	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>LITCHFIELD CAVO LLP ATTN: ANDREW S KESSLER 1515 MARKET ST, STE 1220 PHILADELPHIA, PA 19102-1903</b>
	State the term remaining List the contract number of any government contract		
2.134	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR BENEFITS ADMIN SERVICES</b>	<b>LOCKTON-DUNNING SERIES OF LOCKTON COMPANIES, LLC 2100 ROSS AVE, STE 1200 DALLAS, TX 75201</b>
	State the term remaining List the contract number of any government contract		
2.135	State what the contract or lease is for and the nature of the debtor's interest	<b>SERVICE AGREEMENT</b>	<b>LOCUMTENENS 2655 NORTHWINDS PKWY ALPHARETTA, GA 30009</b>
	State the term remaining List the contract number of any government contract		
2.136	State what the contract or lease is for and the nature of the debtor's interest	<b>CLIENT CONTRACT &amp; ADDENDUM</b>	<b>LOCUMTENENS.COM, LLC 2655 NORTHWINDS PKWY ALPHARETTA, GA 30009</b>
	State the term remaining List the contract number of any government contract		
2.137	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PHONE SERVICES</b>	<b>MANHATTAN TELECOMMUNICATIONS CORPORATION DBA METROPOLITAN TELECOMMUNICATIONS AKA METTEL 55 WATER ST, 32ND FL NEW YORK, NY 10041</b>
	State the term remaining List the contract number of any government contract		

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2.138	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>MARCUM LLP ATTN: DAVID H. GLUSMAN 1600 MARKET ST, 32ND FL PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		
2.139	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>MARSHALL DENNEHEY WARNER COLEMAN @ GOGGIN, P.C. ATTN: RAPHAEL M. DURAN 2000 MARKET ST, STE 2300 PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		
2.140	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER AGREEMENT FOR LAUNDRY PROCESSING AND RENTAL SERVICES</b>	<b>MAYFLOWER LAUNDRY AND TEXTILE SERVICES LLC 2601 W LEXINGTON ST BALTIMORE, MD 21223</b>
	State the term remaining List the contract number of any government contract		
2.141	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR COMPLIANCE &amp; EDUCATION MATERIALS</b>	<b>MEDIALAB, INC. 242 SOUTH CULVER ST, STE 300 LAWRENCEVILLE, GA 30046</b>
	State the term remaining List the contract number of any government contract		
2.142	State what the contract or lease is for and the nature of the debtor's interest	<b>SERVICE AGREEMENT</b>	<b>MEDICAL DOCTOR ASSOCIATES 4775 PEACHTREE INDUSTRIAL BLVD, STE 300 BERKELEY LAKE, GA 30092</b>
	State the term remaining List the contract number of any government contract		
2.143	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR SUPPLIES PURCHASING PROGRAM</b>	<b>MEDLINE INDUSTRIES HOLDINGS, L.P ATTN: LEGAL DEPT THREE LAKES DR NORTHFIELD, IL 60093</b>
	State the term remaining List the contract number of any government contract		

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2.144	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR INSURANCE/PAYER IDENTIFICATION SERVICES</b>	<b>MEDLYTIX, LLC ATTN: CEO 675 MANSELL RD, STE 100 ROSWELL, GA 30076</b>
2.145	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>PRICING AGREEMENT</b>	<b>MEDTRONIC USA, INC. 8200 CORAL SEA ST NE MOUNDS VIEW, MN 55112</b>
2.146	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SOFTWARE LICENSE AGREEMENT</b>	<b>MHC SOFTWARE, LLC ATTN: CATHERIE BEATTIE 12000 PORTLAND AVE S, STE 230 BURNSVILLE, MN 55337</b>
2.147	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>MINDFIGURE CONSULTING ATTN: CHRISTOPHER OCHNER 1200 WEST AVE, #1226 MIAMI BEACH, FL 33139</b>
2.148	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>CONSULTING SERVICES AGREEMENT</b>	<b>NATHAN FREEDMAN 2100 LOCUST ST PHILADELPHIA, PA 19103</b>
2.149	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR HOTLINE &amp; INCIDENT MGT</b>	<b>NAVEX GLOBAL, INC. ATTN: CHIEF SERVICES OFFICER 550 MEADOWS RD, STE 500 LAKE OSWEGO, OR 97035</b>

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2.150	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ORDER FORM 314646</b>	<b>NAVEX GLOBAL, INC. ATTN: CHIEF SERVICES OFFICER 550 MEADOWS RD, STE 500 LAKE OSWEGO, OR 97035</b>
2.151	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR MARKETING &amp; PR SERVICES</b>	<b>NEFF AND ASSOCIATES, INC. ATTN: PRESIDENT 15 S 3RD ST, 4TH FL PHILADELPHIA, PA 19106</b>
2.152	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR BLOOD SUPPLIES</b>	<b>NEW YORK BLOOD CENTER, INC. ATTN: GENERAL COUNSEL 310 EAST 67TH ST NEW YORK, NY 10065</b>
2.153	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR PROJECT MANAGER</b>	<b>NEXCORE PROPERTIES PA LLC ATTN: DEBORAH WEDDERBURN 1621 18TH ST, STE 250 DENVER, CO 80202</b>
2.154	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONTRACT MGT &amp; MODELING</b>	<b>NTHRIVE REVENUE SYSTEMS, LLC ATTN: LEGAL/CONTRACTING 200 NORTH POINT CENTER EAST, STE 600 ALPHARETTA, GA 30022</b>
2.155	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER AGREEMENT</b>	<b>NTHRIVE REVENUE SYSTEMS, LLC ATTN: LEGAL/CONTRACTING 200 N POINT CENTER E, STE 600 ALPHARETTA, GA 30022</b>

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2.156	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SOWS AGREEMENT</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 WEST PLANO PKWY PLANO, TX 75075</b>
2.157	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>STATEMENT OF WORK #1</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>
2.158	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>STATEMENT OF WORK #2</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>
2.159	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>STATEMENT OF WORK #3</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>
2.160	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>STATEMENT OF WORK #4</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>
2.161	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>STATEMENT OF WORK #5</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>



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2.162	State what the contract or lease is for and the nature of the debtor's interest	<b>STATEMENT OF WORK #7</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>
	State the term remaining List the contract number of any government contract		
2.163	State what the contract or lease is for and the nature of the debtor's interest	<b>STATEMENT OF WORK #8</b>	<b>NTT DATA SERVICES, LLC ATTN: PRESIDENT, HCLS 2300 W PLANO PKWY PLANO, TX 75075</b>
	State the term remaining List the contract number of any government contract		
2.164	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR TRANSCRIPTION SERVICES</b>	<b>NUANCE COMMUNICATIONS, INC. 1 WAYSIDE RD BURLINGTON, MA 01803</b>
	State the term remaining List the contract number of any government contract		
2.165	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>OBERMAYER REBMANN MAXWELL &amp; HIPPEL LLP ATTN: GARY SAMMS 1500 MARKET ST, STE 3400 PHILADELPHIA, PA 19102</b>
	State the term remaining List the contract number of any government contract		
2.166	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>OPTUM360 SOLUTIONS, LLC ATTN: GENERAL COUNSEL 11000 OPTUM CIR EDEN PRAIRIE, MN 55344</b>
	State the term remaining List the contract number of any government contract		
2.167	State what the contract or lease is for and the nature of the debtor's interest	<b>MASTER SERVICES AND LICENSE AGREEMENT</b>	<b>OPTUM360 SOLUTIONS, LLC ATTN: GENERAL COUNSEL 11000 OPTUM CIRCLE EDEN PRAIRIE, MN 55344</b>
	State the term remaining List the contract number of any government contract		

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2.168	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PAYROLL CONSULTING SERVICES</b>	<b>PAYTECH, INC.</b> 7979 E TUFTS AVE, STE 1000 DENVER, CO 80237
	State the term remaining List the contract number of any government contract		
2.169	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR ASSISTANCE WITH RACP FILING</b>	<b>PENNONI ASSOCIATES</b> ATTN: JOSEPH RADAY, PE, CME 1900 MARKET ST, STE 300 PHILADELPHIA, PA 19103
	State the term remaining List the contract number of any government contract		
2.170	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>PEPPER HAMILTON LLP</b> ATTN: KATHRYN P. NORDICK 3000 TWO LOGAN SQUARE 18TH AND ARCH STS PHILADELPHIA, PA 19103-2799
	State the term remaining List the contract number of any government contract		
2.171	State what the contract or lease is for and the nature of the debtor's interest	<b>CONSULTING AGREEMENT FOR IT ADVISORY SERVICES</b>	<b>PERITUS ADVISORS</b> ATTN: CHIEF EXEC OFFICER 22431 ANTONIO PKWY, STE B160-675 RANCHO SANTA MARGARITA, CA 92688
	State the term remaining List the contract number of any government contract		
2.172	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE LICENSE AGREEMENT</b>	<b>PHARMACY ONESOURCE INC.</b> ATTN: CONTRACT MANAGEMENT 525 JUNCTION RD, STE 5000 MADISON, WI 53717
	State the term remaining List the contract number of any government contract		
2.173	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR COLLECTIONS SERVICES</b>	<b>PINNACLE HEALTHCARE RECOVERY PARTNERS, INC.</b> ATTN: PRESIDENT 196A FAIRVIEW RD WOODLYN, PA 19094
	State the term remaining List the contract number of any government contract		

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2.174	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR REGISTRY ACCESS &amp; INFECTION CONTROL SOFTWARE</b>	<b>PREMIER, INC. ATTN: LEGAL DEPT 13034 BALLANTYNE CORPORATE PL CHARLOTTE, NC 28277</b>
	State the term remaining List the contract number of any government contract		
2.175	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR PLACEMENT/RENTAL OF VENDING MACHINES</b>	<b>PRESCIENT LOGISTICS, LLC DBA REPSCRUBS ATTN: CUSTOMER CARE 576 MONROE RD, STE 1304 SANFORD, FL 32771</b>
	State the term remaining List the contract number of any government contract		
2.176	State what the contract or lease is for and the nature of the debtor's interest	<b>SOWS AGREEMENT</b>	<b>PRESS GANEY ASSOCIATES, INC. ATTN: CONTRACTS DEPT 404 COLUMBIA PL SOUTH BEND, IN 46601</b>
	State the term remaining List the contract number of any government contract		
2.177	State what the contract or lease is for and the nature of the debtor's interest	<b>LICENSE &amp; EXCLUSION MONITORING SERVICES AGREEMENT</b>	<b>PROVIDERTRUST, INC. ATTN: MICHAEL ROSEN, ESQ. 2300 CHARLOTTE AVE, STE 104 NASHVILLE, TN 37203</b>
	State the term remaining List the contract number of any government contract		
2.178	State what the contract or lease is for and the nature of the debtor's interest	<b>CONSULTING SERVICES AGREEMENT</b>	<b>PRUETT ROOF 644 VININGS ESTATES DR MABLETON, GA 30126</b>
	State the term remaining List the contract number of any government contract		
2.179	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE LICENSE &amp; MAINTENANCE AGREEMENT</b>	<b>QUANTROS, INC. ATTN: GENERAL COUNSEL 220 NORTH MAIN ST, STE 300 GREENVILLE, SC 29601</b>
	State the term remaining List the contract number of any government contract		

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2.180	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR REFERENCE LAB SERVICES</b>	<b>QUEST DIAGNOSTIC CLINICAL LABORATORIES INC.</b> ATTN: LEGAL DEPT 500 PLAZA DR SECAUCUS, NJ 07094
2.181	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR THIRD-PARTY REVENUE RECOVERY &amp; RELATED SERVICES</b>	<b>R. SMITH INTERNATIONAL, LLC</b> DBA RSOURCE ATTN: GENERAL COUNSEL 433 PLAZA REAL, STE 345 BOCA RATON, FL 33432
2.182	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR ELIGIBILITY VERIFICATION &amp; REVENUE CYCLE SERVICES</b>	<b>REALMED CORPORATION</b> ATTN: LEGAL DEPT 10752 DEERWOOD PARK BLVD S, STE 1100 JACKSONVILLE, FL 32256
2.183	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>REED SMITH LLP</b> ATTN: JAMES M. NEUDECKER 101 2ND ST, STE 1800 SAN FRANCISCO, CA 94105-3659
2.184	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>ROBINSON KIRLEW &amp; ASSOCIATES ATTORNEYS AT LAW</b> ATTN: MYRTLE ROBINSON KIRLEW 7731 BELLE POINT DR GREENBELT, MD 20770
2.185	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR GOVERNMENT RELATIONS &amp; CONSULTING SERVICES</b>	<b>S.R. WOJDAK &amp; ASSOCIATES, LP</b> DBA WOJDAK GOVERNMENT RELATIONS ATTN: TOM FLYNN 200 SOUTH BROAD ST, STE 850 PHILADELPHIA, PA 19102

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2.186	State what the contract or lease is for and the nature of the debtor's interest	<b>SOFTWARE LICENSE AGREEMENT</b>	<b>SAI GLOBAL COMPLIANCE, INC. ATTN: GENERAL COUNSEL 309 WAVERLEY OAKS RD WALTHAM, MA 02452</b>
	State the term remaining List the contract number of any government contract		
2.187	State what the contract or lease is for and the nature of the debtor's interest	<b>CUSTOMER ORDER</b>	<b>SAI GLOBAL COMPLIANCE, INC. ATTN: GENERAL COUNSEL 309 WAVERLEY OAKS RD WALTHAM, MA 02452</b>
	State the term remaining List the contract number of any government contract		
2.188	State what the contract or lease is for and the nature of the debtor's interest	<b>ENGAGEMENT LETTER</b>	<b>SAUL EWING ARNSTEIN &amp; LEHR LLP ATTN: JEFFREY C. HAMPTON 1201 NORTH MARKET ST, STE 2300 WILMINGTON, DE 19801</b>
	State the term remaining List the contract number of any government contract		
2.189	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR SERVICES</b>	<b>SCANSTAT TECHNOLOGIES, LLC ATTN: PRESIDENT 288 S MAIN ST, STE 600 ALPHARETTA, GA 30004</b>
	State the term remaining List the contract number of any government contract		
2.190	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR SCRIBE SERVICES</b>	<b>SCRIBE CARE, INC. ATTN: RAZA SHIRAZIE 10502 HICKORY GLEN DR COLUMBIA, MD 21044</b>
	State the term remaining List the contract number of any government contract		
2.191	State what the contract or lease is for and the nature of the debtor's interest	<b>CONSULTING SERVICES AGREEMENT</b>	<b>SHARONDA BROWN 1921 8TH ST NW, UNIT 304 WASHINGTON, DC 20001</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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

List all contracts and unexpired leases

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

2.192	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR TEMPORARY &amp; CONTRACT STAFFING PROVIDER</b>	<b>SHC SERVICES, INC. DBA SUPPLEMENTAL HEALTHCARE COMPANY 1640 W REDSTONE CENTER DR, STE 200 PARK CITY, UT 84098</b>
2.193	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>CONSULTING AGREEMENT</b>	<b>SMR HEALTHCARE MANAGEMENT, INC. ATTN: SUZANNE RICHARDS, CHIEF EXEC OFFICER 4525 DEAN MARTIN DR, #2308 LAS VEGAS, NV 89103</b>
2.194	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MANAGED CARE CONSULTING SERVICES AGREEMENT</b>	<b>SPECTRUM HEALTH PARTNERS, LLC ATTN: KEN DORAN, PRESIDENT 341 COOL SPRINGS BLVD, STE 305 FRANKLIN, TN 37027</b>
2.195	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>CONSULTING SERVICES AGREEMENT</b>	<b>STANFORD/STERLING GROUP, LLC ATTN: J. STANFORD PARKER, CEO P.O. BOX 25146 HONOLULU, HI 96825</b>
2.196	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR WASTE REMOVAL</b>	<b>STERICYCLE, INC. 28161 N KEITH DR LAKE FOREST, IL 60045</b>
2.197	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER SERVICE AGREEMENT</b>	<b>STERICYCLE, INC. 28161 N KEITH DR LAKE FOREST, IL 60045</b>

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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2.198	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER SERVICE AGREEMENT</b>	<b>STERICYCLE, INC. 28161 N KEITH DR LAKE FOREST, IL 60045</b>
2.199	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER SERVICE AGREEMENT</b>	<b>STERICYCLE, INC. 28161 N KEITH DR LAKE FOREST, IL 60045</b>
2.200	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>HUMAN RESOURCES CONSULTING SERVICES AGREEMENT</b>	<b>TC HUMAN CAPITAL SOLUTIONS, LLC ATTN: THERESA ANGELONE 716 IRON POST RD MOORESTOWN, NJ 08057</b>
2.201	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>TRANSITION SERVICES AGREEMENT</b>	<b>TENET BUSINESS SERVICES CORPORATION ATTN: STEVEN SCHAEFER 1445 ROSS AVE, STE 1400 DALLAS, TX 75202</b>
2.202	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ASSIGNMENT, ASSUMPTION, AMENDMENT LEASE</b>	<b>TENET HEALTHSYSTEM PHILADELPHIA</b>
2.203	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MEMBERSHIP AGREEMENT</b>	<b>THE ADVISORY BOARD COMPANY 2445 M ST NW WASHINGTON, DC 20037</b>

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

2.204	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR BLOOD SUPPLIES</b>	<b>THE AMERICAN NATIONAL RED CROSS, PENN JERSEY REGION ATTN: SENIOR DIR SALES AND MARKETING 700 SPRING GARDEN ST PHILADELPHIA, PA 19123</b>
2.205	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>EPX MERCHANT AGREEMENT</b>	<b>THE BANCORP BANK 405 SILVERSIDE RD, STE 105 WILMINGTON, DE 19809</b>
2.206	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>LICENSE AGREEMENT</b>	<b>THE STAYWELL COMPANY, LLC ATTN: SW SALES SERVICES 800 TOWNSHIP LINE RD YARDLEY, PA 19067</b>
2.207	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>THOMAS, THOMAS &amp; HAFFER LLP ATTN: JOSHUA J. BOVENDER 305 NORTH FRONT ST HARRISBURG, PA 17101</b>
2.208	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR ELEVATOR REPAIR &amp; MAINTENANCE</b>	<b>THYSSENKRUPP ELEVATOR CORPORATION ATTN: NATIONAL ACCOUNTS DEPT 114 TOWNPARK DR NW, STE 300 KENNESAW, GA 30144</b>
2.209	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR ZERO BALANCE AUDIT &amp; RECOVERY</b>	<b>TITAN HEALTH MANAGEMENT SOLUTIONS, INC. ATTN: THOMAS HOEHNER 2500 N PANTANO RD, STE 200 TUCSON, AZ 85715</b>



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

2.210	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>STATEMENT OF WORK 1A</b>	<b>TITAN HEALTH MANAGEMENT SOLUTIONS, INC. ATTN: THOMAS HOEHNER 2500 N PANTANO RD, STE 200 TUCSON, AZ 85715</b>
2.211	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONTRACT MGT SYSTEM</b>	<b>TRACTMANAGER, INC. DBA MEDITRACT 736 MARKET ST, STE 1100 CHATTANOOGA, TN 37402</b>
2.212	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>BUSINESS ASSOCIATE AGREEMENT</b>	<b>TRANS UNION LLC ATTN: HEALTHCARE LEGAL 555 WEST ADAMS ST CHICAGO, IL 60661</b>
2.213	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SERVICES AGREEMENT</b>	<b>TRANSWORLD SYSTEMS INC. ATTN: VP, CORPORATE LEGAL 500 VIRGINIA DR, STE 514 FORT WASHINGTON, PA 19034</b>
2.214	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR SECURITY SERVICES</b>	<b>UNIVERSAL PROTECTION SERVICE, LP DBA ALLIED UNIVERSAL SECURITY SERVICES ATTN: REGIONAL VP 161 WASHINGTON ST, STE 600 CONSOHOCKEN, PA 19428</b>
2.215	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR ADMIN OF ABSENCE &amp; LEAVE FOR EMPLOYEES</b>	<b>UPMC BENEFIT MANAGEMENT SERVICES, INC. DBA WORKPARTNERS ATTN: LINDA CROUSHORE 600 GRANT ST, 8TH FL PITTSBURGH, PA 15219</b>

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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2.216	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SECURITY/PATROL SERVICE AGREEMENT</b>	<b>US SECURITY ASSOCIATES, INC. ATTN: JOSEPH LO BIANCO, NORTH GRP PRES 261 OLD YORK RD, STE 711 JENKINTOWN, PA 19046</b>
2.217	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>PRICING AGREEMENT</b>	<b>VAPOTHERM, INC. 100 DOMAIN DR EXETER, NH 03833</b>
2.218	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>VIE HEALTHCARE, INC. 2111 ROUTE 34 WALL TOWNSHIP, NJ 07719</b>
2.219	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SOWS AGREEMENT</b>	<b>VIZIENT, INC. ATTN: LEGAL DEPT 290 EAST JOHN CARPENTER FWY, 7TH FL IRVING, TX 75062-2710</b>
2.220	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>MASTER SERVICES AGREEMENT</b>	<b>VIZIENT, INC. ATTN: LEGAL DEPARTMENT 290 E JOHN CARPENTER FWY, 7TH FL IRVING, TX 75062-2710</b>
2.221	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>VIZIENT COMMITTED PROGRAM PARTICIPATION ADDENDUM</b>	<b>VIZIENT, INC. ATTN: LEGAL DEPARTMENT 290 E JOHN CARPENTER FWY, 7TH FL IRVING, TX 75062-2710</b>

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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2.222	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>JOINDER AGREEMENT - MID-ATLANTIC PURCHASING COALITION - PHARMACY</b>	<b>VIZIENT, INC. ATTN: LEGAL DEPARTMENT 290 E JOHN CARPENTER FWY, 7TH FL IRVING, TX 75062-2710</b>
2.223	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR PILOT TEST</b>	<b>VOYCE, INC. 12555 ORANGE DR, STE 100A DAVIE, FL 33330</b>
2.224	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR CONSULTING SERVICES</b>	<b>VP-MA HEALTH SOLUTIONS, INC. DBA CDIMD ATTN: PRESIDENT 110 FRANCES KING DR, STE A-2 SMYRNA, TN 37167</b>
2.225	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>SERVICE AGREEMENT</b>	<b>WEATHERBY 6451 N FEDERAL HWY, STE 800 FORT LAUDERDALE, FL 33308</b>
2.226	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>AGREEMENT FOR PHYSICIAN LOCUM TENENS COVERAGE</b>	<b>WEATHERBY LOCUMS, INC. 6451 NORTH FEDERAL HWY, STE 800 FORT LAUDERDALE, FL 33308</b>
2.227	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	<b>ENGAGEMENT LETTER</b>	<b>WEBER GALLAGHER SIMPSON STATPLETON FIRES &amp; NEWBY, LLC ATTN: KENNETH D. POWELL, JR 2000 MARKET ST, STE 1300 PHILADELPHIA, PA 19103</b>

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Executory Contracts or Unexpired Leases**

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List all contracts and unexpired leases

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

2.228	State what the contract or lease is for and the nature of the debtor's interest	<b>SPONSORSHIP AGREEMENT</b>	<b>WELCOME AMERICA, INC. ATTN: JEFF GUARACINO, PRESIDENT AND CEO 1650 MARKET ST, STE 2800 PHILADELPHIA, PA 19103</b>
	State the term remaining List the contract number of any government contract		
2.229	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR HEALTH ADVOCATE SERVICES FOR EMPLOYEES</b>	<b>WEST HEALTH ADVOCATE SOLUTIONS, INC. ATTN: KATHARINE N BEGLEY 3043 WALTON RD PLYMOUTH MEETING, PA 19462</b>
	State the term remaining List the contract number of any government contract		
2.230	State what the contract or lease is for and the nature of the debtor's interest	<b>AGREEMENT FOR CONFERENCE CALL LINES</b>	<b>WEST UNIFIED COMMUNICATIONS SERVICES, INC. ATTN: LEGAL DEPT 8420 W BRYN MAWR AVE, STE 1100 CHICAGO, IL 60631</b>
	State the term remaining List the contract number of any government contract		
2.231	State what the contract or lease is for and the nature of the debtor's interest	<b>CONSULTING AGREEMENT</b>	<b>WHITECAP HEALTH ADVISORS, LLC ATTN: FARZAN BHARUCHA 860 JOHNSON FERRY RD, STE 140 ATLANTA, GA 30342</b>
	State the term remaining List the contract number of any government contract		

Debtor Name **Philadelphia Academic Health System, LLC**

**United States Bankruptcy Court for the District of Delaware**

Case number (if known): **19-11467**

Check if this is an amended filing

**Official Form 206H**

**Schedule H: Codebtors**

**12/15**

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

**1. Does the debtor have any codebtors?**

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

Yes.

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

**Column 1: Codebtor**

**Column 2: Creditor**

	<b>Name</b>	<b>Mailing Address</b>	<b>Name</b>	<b>Check all schedules that apply</b>
2.1	<b>BROAD STREET HEALTHCARE PROPERTIES II, LLC</b>	<b>222 N SEPULVEDA BLVD, STE 900 EL SEGUNDO, CA 90245</b>	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	<b>BROAD STREET HEALTHCARE PROPERTIES III, LLC</b>	<b>222 N SEPULVEDA BLVD, STE 900 EL SEGUNDO, CA 90245</b>	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	<b>BROAD STREET HEALTHCARE PROPERTIES, LLC</b>	<b>222 N SEPULVEDA BLVD, STE 900 EL SEGUNDO, CA 90245</b>	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	<b>CENTER CITY HEALTHCARE, LLC</b>	<b>230 NORTH BROAD ST PHILADELPHIA, PA 19102</b>	Boston Scientific Corporation	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.5	<b>CENTER CITY HEALTHCARE, LLC</b>	<b>230 NORTH BROAD ST PHILADELPHIA, PA 19102</b>	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor Name **Philadelphia Academic Health System, LLC**Case number (if known): **19-11467****Additional Page(s) if Debtor has More Codebtors**

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Column 1: Codebtor		Column 2: Creditor		
Name	Mailing Address	Name		Check all schedules that apply
2.6	HPS OF PA, L.L.C.	230 NORTH BROAD ST PHILADELPHIA, PA 19102	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.7	PHILADELPHIA ACADEMIC HEALTH HOLDINGS, LLC	222 N SEPULVEDA BLVD, STE 900 EL SEGUNDO, CA 90245	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8	PHILADELPHIA ACADEMIC MEDICAL ASSOCIATES, LLC	1500 MARKET ST, STE 2400, WEST TOWER PHILADELPHIA, PA 19102	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.9	PHYSICIAN PERFORMANCE NETWORK OF PHILADELPHIA	C/O CT CORPORATION SYSTEM 1445 ROSS AVE, STE 1400 DALLAS, TX 75202	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10	PHYSICIANS CLINICAL NETWORK, LLC	C/O COGENCY GLOBAL INC. 850 NEW BURTON RD, STE 201 DOVER, DE 19904	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11	SCHC PEDIATRIC ANESTHESIA ASSOCIATES, L.L.C.	160 EAST ERIE AVE PHILADELPHIA, PA 19134	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12	SCHC PEDIATRIC ASSOCIATES, L.L.C.	160 EAST ERIE AVE PHILADELPHIA, PA 19134	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.13	ST CHRISTOPHER'S PEDIATRIC URGENT CARE CENTER	160 EAST ERIE AVE PHILADELPHIA, PA 19134	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor Name **Philadelphia Academic Health System, LLC**

Case number (if known): **19-11467**

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Column 1: Codebtor		Column 2: Creditor		
Name	Mailing Address	Name		Check all schedules that apply
2.14	ST. CHRISTOPHER'S HEALTHCARE, LLC	160 EAST ERIE AVE PHILADELPHIA, PA 19134	HMI LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.15	ST. CHRISTOPHER'S HEALTHCARE, LLC	160 EAST ERIE AVE PHILADELPHIA, PA 19134	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.16	ST. CHRISTOPHER'S HEALTHCARE, LLC	160 EAST ERIE AVE PHILADELPHIA, PA 19134	Pharmacy Onesource Inc.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.17	STCHRIS CARE AT NORTHEAST PEDIATRICS, L.L.C.	160 EAST ERIE AVE PHILADELPHIA, PA 19134	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.18	TPS II OF PA, L.L.C.	230 NORTH BROAD ST PHILADELPHIA, PA 19102	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.19	TPS III OF PA, L.L.C.	230 NORTH BROAD ST PHILADELPHIA, PA 19102	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.20	TPS IV OF PA, L.L.C.	230 NORTH BROAD ST PHILADELPHIA, PA 19102	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.21	TPS OF PA, L.L.C.	230 NORTH BROAD ST PHILADELPHIA, PA 19102	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor Name **Philadelphia Academic Health System, LLC**

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Column 1: Codebtor		Column 2: Creditor		
Name	Mailing Address	Name	<i>Check all schedules that apply</i>	
2.22	TPS V OF PA, L.L.C.	160 EAST ERIE AVE PHILADELPHIA, PA 19134	MidCap Funding IV Trust	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G



<b>Debtor Name</b> Philadelphia Academic Health System, LLC <b>United States Bankruptcy Court for the District of Delaware</b> <b>Case Number:</b> <u>19-11467</u>
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Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors** 12/15

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

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

**Declaration and signature**

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

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

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

I, the Chief Restructuring Officer of the Philadelphia Academic Health System, LLC, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 89 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Executed on: 8/13/2019  
MM / DD / YYYY

Signature *Allen Wilen*  
 Allen Wilen  
 Printed Name  
 Chief Restructuring Officer  
 Title