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Counsel for Debtors and Debtors in Possession

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

In re:

LONG BEACH MEDICAL CENTER, *et al.*

Debtors.

Chapter 11

Case No. 14-70593 (ast)

(Jointly Administered)


**NOTICE OF FILING OF AMENDMENT TO SCHEDULES OF
ASSETS AND LIABILITIES FOR LONG BEACH MEDICAL CENTER**

PLEASE TAKE NOTICE that on March 19, 2014, Long Beach Medical Center (“L BMC”) and Long Beach Memorial Nursing Home, Inc. *dba* The Komanoff Center for Geriatric and Rehabilitative Medicine (“L BMNH”), as debtors and debtors in possession (collectively, the “Debtors”) filed their respective *Schedules of Assets and Liabilities* [Docket Nos. 96, 97, 98 and 99] (collectively, the “Original Schedules”) with the United States Bankruptcy Court for the Eastern District of New York pursuant to section 521 of title 11 of the United States Code and Rule 1007(b) of the Federal Rules of Bankruptcy Procedure.

PLEASE TAKE FURTHER NOTICE that the Debtors hereby amend the Original Schedules of L BMC and L BMNH (the “Amended Schedules”) to remove certain scheduled liabilities (the “Scheduled Liabilities”) that are listed in the Original Schedules. Except as

expressly set forth in the Amended Schedules, the Original Schedules remain in full force and effect. The Amended Schedules for LBMC and LBMNH are attached hereto as Exhibits A and B respectively. A copy of the notice sent to the creditors affected by removal of the Scheduled Liabilities is attached hereto as Exhibit C.

Great Neck, New York
Dated: January 23, 2015



Burton S. Weston
Afsheen A. Shah
Adam T. Berkowitz
GARFUNKEL WILD, P.C.
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Facsimile: (516) 466-5964

Counsel to the Debtors and Debtors in Possession

Except as otherwise provided therein, the Amended Schedules incorporate by reference, and must be considered in connection with, the Original Schedules and the Global Notes, Methodologies and Specific Disclosures Regarding the Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs, attached to the Original Schedules.

EXHIBIT A

Amended Schedules

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re:

Chapter 11

LONG BEACH MEDICAL CENTER, et al.,

Case No. 14 70593 (ast)

Case No. 14-70594 (ast)

Debtors.

(Jointly Administered)

**AMENDED SCHEDULES OF ASSETS AND LIABILITIES
FOR LONG BEACH MEDICAL CENTER**

SUPPLEMENT TO SCHEDULE E¹

¹ These Amended Schedules incorporate by reference and must be considered in connection with the Original Schedules and the Global Notes, Methodologies and Specific Disclosures Regarding the Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs, attached to the Original Schedules [Docket No. 96].

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

In re:

LONG BEACH MEDICAL CENTER., *et al.*,

Debtors.

Chapter 11

Case No. 14-70593 (ast)

Case No. 14-70597 (ast)

(Jointly Administered)

**NOTES, METHODOLOGIES AND SPECIFIC
DISCLOSURES REGARDING THE DEBTORS' AMENDED SCHEDULES OF
ASSETS AND LIABILITIES FOR LONG BEACH MEDICAL CENTER, *et al.***

Long Beach Medical Center and Long Beach Memorial Nursing Home (the "Debtors") submit their Amendments to Schedule E (the "Amendments") of their respective Schedules of Assets and Liabilities (each a "Schedule" and, collectively, the "Schedules") pursuant to section 521 of chapter 11 of the United States Code and Rules 1007 and 1009 of the Federal Rules of Bankruptcy Procedure.

The Amendments remove certain scheduled liabilities and reflect the most recent information available to the Debtors as of January 15, 2015, regarding the Debtors' liabilities as of February 19, 2014.

The Amendments are intended to supplement, not replace, and should therefore be read in conjunction with the Debtors' schedules filed on March 19, 2014. In connection with the filing of the Debtors' Schedules, the Debtors filed general notes with respect to all of the Schedules and specific notes set forth with respect to each Schedule, and all of such notes are incorporated herein by reference.

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re:

Chapter 11

LONG BEACH MEDICAL CENTER, *et al.*,

Case No. 14-70593 (ast)

Debtors.

(Jointly Administered)

AFFIDAVIT PURSUANT TO LOCAL RULE 1009-1(a)

Long Beach Medical Center, undersigned debtor herein, swears as follows:

1. Debtors filed petitions under chapter 11 of the Bankruptcy Code on February 19, 2014.
2. Filed herewith is an amendment to schedule E previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Dated: January 23, 2015

Monica Terrano
Monica Terrano – Chief Restructuring Officer

Sworn to me this 23rd day of
January, 2015

Ellen Huggler
Notary Public, State of New York

ELLEN H. HUGGLER
Notary Public, State of New York
No. 4953364
Qualified in Nassau County
Commission Expires July 10, 2015

In re Long Beach Medical CenterCase No. 14-70593Debtor**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									A M O U N T E N T I T L E D T O P R I O R I T Y
Account No.				2/18/2014					
Alexander, Brandy				Originally Filed in the amount of \$100.28 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Amsterdam, Jacqueline				Originally Filed in the amount of \$2,108.70 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Barnett, Ilene				Originally Filed in the amount of \$1,426.40 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Bifulco, Diane				Originally Filed in the amount of \$602.40 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Blue, Cynthia				Originally Filed in the amount of \$116.10 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Subtotal								0.00	0.00
(Total of this page)								0.00	0.00

Sheet 1 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
								AMOUNT ENTITLED TO PRIORITY	
Account No.			2/18/2014						
Castano, Nicolas			Originally Filed in the amount of \$711.33 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Colon-Nocera, Isabel			Originally Filed in the amount of \$3,332.39 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Conry, Annamae			Originally Filed in the amount of \$3,130.86 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Davis, James			Originally Filed in the amount of \$290.70 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Duverger, Cyntia			Originally Filed in the amount \$260.51 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	
Subtotal								0.00	0.00
(Total of this page)							0.00	0.00	0.00

Sheet 2 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									AMOUNT ENTITLED TO PRIORITY
Account No.				2/18/2014					
Franzese, Therese				Originally Filed in the amount of \$321.43 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Glenn, Murrene				Originally filed in the amount of \$897.75 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Graham, Neesha				Originally Filed in the amount of \$265.88 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Grant, Dolores				Originally Filed in the amount of \$3,368.35 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No.				2/18/2014					
Green, Ann Marie				Originally Filed in the Amount of \$571.81 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00
Subtotal								0.00	0.00
(Total of this page)								0.00	0.00

Sheet **3** of **8** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	AMOUNT ENTITLED TO PRIORITY
Account No. Grey, Gilbert R				2/18/2014 Originally Filed in the amount of \$2,270.10 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No. Guirand, Patricia				2/18/2014 Originally Filed in the amount of \$120.30 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No. Hirschheimer-Breslow, Mandy				2/18/2014 Originally Filed in the amount of \$1,319.80 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No. Kapen, Toni				2/18/2014 Originally Filed in the amount of \$1,215.45 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No. Manolaki, Evangelia				2/18/2014 Originally Filed in the amount of \$891.54 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Subtotal								0.00	0.00	
(Total of this page)								0.00	0.00	

Sheet 4 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									AMOUNT ENTITLED TO PRIORITY
Account No. Martin, Ursula				2/18/2014 Originally Filed in the amount of \$817.02 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. McManus, Maureen				2/18/2014 Originally Filed in the amount of \$312.24 to be reduced to \$0.00 (No ther changes other than to amount)				0.00	0.00
Account No. Ogwuegbu, Ogadinma				2/18/2014 Originally Filed in the Amount of \$244.30 to be reduced to \$0.00. (No other changes other than to amount).				0.00	0.00
Account No. Owens, Ted				2/18/2014 Originally Filed in the amount of \$439.76 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Paqueo, Mariefel				2/18/2014 Originally Filed in the amount of \$886.28 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Subtotal								0.00	0.00
(Total of this page)								0.00	0.00

Sheet 5 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. Pennington III, Prince			2/18/2014 Originally Filed in the amount of \$390.76 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Perez, Rommel			2/18/2014 Originally Filed in the amount of \$410.69 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Persaud, Chandrawattie			2/18/2014 Originally Filed in the amount of \$1,181.70 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Rimpel, Ralph			2/18/2014 Originally Filed in the amount of \$734.00 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Riquelme, Lillian			2/18/2014 Originally Filed in the amount of \$798.13 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Subtotal							0.00	0.00
(Total of this page)							0.00	0.00

Sheet 6 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C D E B I T O R	H W J C	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U R E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
										AMOUNT ENTITLED TO PRIORITY
Account No.				2/18/2014						
Rodriguez, Blanca				Originally Filed in the amount of \$1,328.86 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No.				2/18/2014						
Rodriguez, Jayson				Originally Filed in the amount of \$2,433.90 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No.				2/18/2014						
Rossi, David				Originally Filed in the amount of \$1,661.73 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No.				2/18/2014						
Solis, Esther				Originally Filed in the amount of \$2,341.35 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00
Account No.				2/18/2014						
Terry, Gayle				Originally Filed in the amount of \$263.97 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Subtotal									0.00	0.00
(Total of this page)								0.00		0.00

Sheet 7 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center

Case No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	A M O U N T N O T E N T I T L E D T O P R I O R I T Y, I F A N Y	
									A M O U N T E N T I T L E D T O P R I O R I T Y
Account No. Thomas, Ralph			2/18/2014 Originally Filed in the amount of \$830.70 to be reduced to \$0.00. (No other changes other than to amount.)				0.00	0.00	0.00
Account No. Ugbogbo, Adesuwa			2/18/2014 Originally Filed in the amount of \$612.90 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Washington, Margaret			2/18/2014 Originally Filed in the amount of \$114.60 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00
Account No. Williams, Gwenetta			2/18/2014 Originally Filed in the amount of \$2,592.68 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No.									
Subtotal (Total of this page)							0.00	0.00	0.00
Total (Report on Summary of Schedules)							0.00	0.00	0.00

Sheet 8 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

EXHIBIT B

Amended Schedules

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re:

Chapter 11

LONG BEACH MEDICAL CENTER, et al.,

Case No. 14 70593 (ast)

Case No. 14-70594 (ast)

Debtors.

(Jointly Administered)

**AMENDED SCHEDULES OF ASSETS AND LIABILITIES
FOR LONG BEACH MEMORIAL NURSING HOME, INC. DBA THE KOMANOFF
CENTER FOR GERIATRIC AND REHABILITATIVE MEDICINE**

SUPPLEMENT TO SCHEDULE E¹

¹ These Amended Schedules incorporate by reference and must be considered in connection with the Original Schedules and the Global Notes, Methodologies and Specific Disclosures Regarding the Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs, attached to the Original Schedules [Docket No. 96].

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

In re:

LONG BEACH MEDICAL CENTER., *et al.*,

Debtors.

Chapter 11

Case No. 14-70593 (ast)

Case No. 14-70597 (ast)

(Jointly Administered)

**NOTES, METHODOLOGIES AND SPECIFIC
DISCLOSURES REGARDING THE DEBTORS' AMENDED SCHEDULES OF
ASSETS AND LIABILITIES FOR LONG BEACH MEDICAL CENTER, *et al.***

Long Beach Medical Center and Long Beach Memorial Nursing Home (the "Debtors") submit their Amendments to Schedule E (the "Amendments") of their respective Schedules of Assets and Liabilities (each a "Schedule" and, collectively, the "Schedules") pursuant to section 521 of chapter 11 of the United States Code and Rules 1007 and 1009 of the Federal Rules of Bankruptcy Procedure.

The Amendments remove certain scheduled liabilities and reflect the most recent information available to the Debtors as of January 15, 2015, regarding the Debtors' liabilities as of February 19, 2014.

The Amendments are intended to supplement, not replace, and should therefore be read in conjunction with the Debtors' schedules filed on March 19, 2014. In connection with the filing of the Debtors' Schedules, the Debtors filed general notes with respect to all of the Schedules and specific notes set forth with respect to each Schedule, and all of such notes are incorporated herein by reference.

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re:

Chapter 11

LONG BEACH MEDICAL CENTER, *et al.*,

Case No. 14-70593 (ast)

Debtors.

(Jointly Administered)

AFFIDAVIT PURSUANT TO LOCAL RULE 1009-1(a)

Long Beach Memorial Nursing Home, Inc. dba The Komanoff Center for Geriatric and Rehabilitative Medicine, undersigned debtor herein, swears as follows:

1. Debtors filed petitions under chapter 11 of the Bankruptcy Code on February 19, 2014.
2. Filed herewith is an amendment to schedule E previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.

Dated: January 23, 2015

Monica Terrano
Monica Terrano – Chief Restructuring Officer

Sworn to me this 23rd day of
January, 2015

Ellen Huggler
Notary Public, State of New York

ELLEN H. HUGGLER
Notary Public, State of New York
No. 4953364
Qualified in Nassau County
Commission Expires July 10, 20 15

In re Long Beach Memorial Nursing Home, Inc.Case No. 14-70597

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Memorial Nursing Home, Inc.

Case No. 14-70597

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
								AMOUNT ENTITLED TO PRIORITY	
Account No.			18-Feb-14						
Duhaney, Fareeda			Originally Filed in the amount of \$382.43 to be reduced to \$0.00 (No other changes other than to amount)				0.00		
							0.00	0.00	
Account No.			18-Feb-14						
Eustache, Maurice			Originally Filed in the amount of \$824.10 to be reduced to \$0.00 (No other changes other than the amount)				0.00		
							0.00	0.00	
Account No.			18-Feb-14						
Eustache, Yvonne			Originally Filed in the amount of \$1,706.63 to be reduced to \$0.00 (No other changes other than to amount)				0.00		
							0.00	0.00	
Account No.			18-Feb-14						
Gellecanao, Maribel			Originally Filed in the amoun of \$768.33 to be reduced to \$0.00 (No other changes other than to amount)				0.00		
							0.00	0.00	
Account No.			18-Feb-14						
Jéacoma, Betsy			Originally Filed in the amount of \$4,728.15 to be reduced to \$0.00 (No other changes other than to amount)				0.00		
							0.00	0.00	
Subtotal								0.00	
(Total of this page)							0.00	0.00	0.00

Sheet 1 of 4 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Memorial Nursing Home, Inc.
Debtor.

Case No. 14-70597

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. Joseph, Crystal			18-Feb-14 Originally Filed in the amount of \$2,458.23 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. King-Salmon, Carmela			18-Feb-14 Originally Filed in the amount of \$817.49 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Manalo, Dennis			18-Feb-14 Originally Filed in the amount of \$1,567.80 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Mathew, Bincy			18-Feb-14 Originally Filed in the amount of \$1.97 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Mathew, Namitha Alex			18-Feb-14 Originally Filed in the amount of \$1,422.45 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Subtotal							0.00	0.00
(Total of this page)							0.00	0.00

Sheet 2 of 4 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Memorial Nursing Home, Inc.

Case No. 14-70597

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
									A M O U N T E N T I T L E D T O P R I O R I T Y
Account No. Nappo, David				18-Feb-14 Originally Filed in the amount of \$707.25 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Pope, Tricia				18-Feb-14 Originally Filed in the amount of \$817.49 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Rajan, Lijo				18-Feb-14 Originally filed in the amount of \$849.55 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Speight, Evon				18-Feb-14 Originally Filed in the amount of \$200.74 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Varughese, Thomas				18-Feb-14 Originally Filed in the amount of \$947.58 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Subtotal								0.00	0.00
(Total of this page)								0.00	0.00

Sheet 3 of 4 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Memorial Nursing Home, Inc.

Case No. 14-70597

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D I S P U T E D	U N L I Q U I D A T E D	C O N T I N G E N T	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	AMOUNT ENTITLED TO PRIORITY
Account No.			18-Feb-14						
Vidallon, Marivic			Originally Filed in the amount of \$1,170.00 to be reduced to \$0.00 (No other changes other than to amount)					0.00	
							0.00		0.00
Account No.									
Account No.									
Account No.									
Account No.									
Account No.									
							Subtotal	0.00	
							(Total of this page)	0.00	0.00
							Total	0.00	0.00
							(Report on Summary of Schedules)	0.00	0.00

Sheet 4 of 4 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

(Report on Summary of Schedules)

EXHIBIT C

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re:

Chapter 11

LONG BEACH MEDICAL CENTER, *et al.*,

Case No. 14 70593 (ast)

Case No. 14 70597 (ast)

Debtors.

(Jointly Administered)

**NOTICE OF FILING OF AMENDMENT TO SCHEDULES
OF ASSETS AND LIABILITIES FOR LONG BEACH MEDICAL CENTER, *ET AL.*
AND TIME TO FILE PROOF OF CLAIMS IN RESPONSE THERETO**

You are receiving this notice because the Debtors have identified certain Scheduled Liabilities which do not accurately reflect the information contained in the Debtors' Books and Records and are accordingly amending their Original Schedules¹. Please take notice that your rights may be affected by the filing of these Amended Schedules. Therefore, you are advised to review carefully the information contained in this notice and the Amended Schedules.

PLEASE TAKE NOTICE that on March 19, 2014, Long Beach Medical Center ("LBMC") and Long Beach Memorial Nursing Home, Inc. *dba* The Komanoff Center for Geriatric and Rehabilitative Medicine ("LBMNH"), as debtors and debtors in possession (collectively, the "Debtors") filed their respective *Schedules of Assets and Liabilities* [Docket Nos. 96, 97, 98, and 99] (the "Original Schedules") with the United States Bankruptcy Court for the Eastern District of New York (the "Court") pursuant to section 521 of title 11 of the United States Code (the "Bankruptcy Code") and Rule 1007(b) of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules").

PLEASE TAKE FURTHER NOTICE that the Debtors hereby amend the Original Schedules of LBMC and LBMNH (the "Amended Schedules") to remove certain scheduled liabilities (the "Scheduled Liabilities") that were listed in the Original Schedules. Copies of the Amended Schedules are annexed hereto as Exhibits 1 and 2.

¹ All capitalized terms used shall have the meanings set forth herein.

PLEASE TAKE FURTHER NOTICE that, under the *Order Establishing Deadline for Filing Proofs of Claim and Approving the Form and Manner of Notice Thereof* [Docket No. 41] (the “Bar Date Order”) entered by the Court on February 26, 2014, any claimant affected by any amendment or supplement to the Original Schedules is required to file a proof of claim. Pursuant to the Bar Date Order, the deadline to file proofs of claim related to the Scheduled Liabilities shall be February 23, 2015 at 5:00 p.m., prevailing Eastern Time, which is a date no less than thirty (30) days from the date that notice of the Amended Schedules was given (the “Amended Schedules Bar Date”).

PLEASE TAKE FURTHER NOTICE that the following procedures for the filing of proofs of claim shall apply:

- (a) proofs of claim shall conform substantially to the proof of claim form annexed hereto as **Exhibit 3** which will also be available for download on the website of the Debtors’ noticing and claims agent, Garden City Group (the “Noticing and Claims Agent”), at <http://cases.gcginc.com/LOB>;
- (b) proofs of claim shall be filed by: (1) mailing through the U.S. Postal Service of the original proof of claim to Long Beach Medical Center, c/o GCG, Inc., P.O. Box 10040, Dublin Ohio 43017-6640; or (2) overnight delivery or delivery by hand of the original proof of claim to Long Beach Medical Center, c/o GCG, Inc., 5151 Blazer Parkway, Suite A, Dublin, Ohio 43017;
- (c) proofs of claim shall be deemed timely filed only when received at the address listed above on or before the Amended Schedules Bar Date;
- (d) proofs of claim shall (i) be signed; (ii) include supporting documentation (if voluminous, attach a summary) or an explanation as to why documentation is not available; and (iii) be denominated in United States currency; and
- (e) proofs of claim may not be delivered by facsimile, telecopy or electronic mail transmission.

PLEASE TAKE FURTHER NOTICE that if you fail to file a proof of claim by the Amended Schedules Bar Date according to the procedures set forth herein, you will be bound by the classification and/or amount of liability set forth in the Amended Schedules.

PLEASE TAKE FURTHER NOTICE that, copies of the Debtors' Original Schedules and Amended Schedules are available for inspection on the Court's Internet Website at <http://www.nyeb.uscourts.gov>. A login and password to the Court's Public Access to Electronic Court Records ("PACER") are required to access this information and can be obtained through the PACER Service Center at <http://www.pacer.psc.uscourts.gov>. Copies of the Debtors' Original Schedules are also available free of charge on the Noticing and Claims Agent's website at <http://cases.gcginc.com/LOB> and may be examined in person between the hours of 9:00 a.m. and 4:30 p.m., Monday through Friday at the Office of the Clerk of the Bankruptcy Court, Alfonse M. D'Amato U.S. Courthouse, 290 Federal Plaza, Central Islip, New York 11722. Copies of the Debtors' Original Schedules may also be obtained by written request to the Debtors' counsel at the address and telephone number set forth below:

Garfunkel Wild, P.C.
111 Great Neck Road
Great Neck, New York 11021
Telephone: (516) 393-2200

If you are unsure about any of these matters, including whether you should file a proof of claim, you may wish to consult an attorney.

Great Neck, New York
Dated: January 23, 2015



Burton S. Weston
Afsheen A. Shah
Adam T. Berkowitz
GARFUNKEL WILD, P.C.
111 Great Neck Road
Great Neck, NY 11021
Telephone: (516) 393-2200
Facsimile: (516) 466-5964
Counsel for Debtors and Debtors in Possession

Exhibit 1
Long Beach Medical Center Amended
Schedules

Exhibit 2

Long Beach Memorial Nursing Home, Inc.
***dba* The Komanoff Center for Geriatric and**
Rehabilitative Medicine Amended Schedules

Exhibit 3
Proof of Claim Form



UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF NEW YORK PROOF OF CLAIM

Name of Debtor (Check Only One): Case No.
[] Long Beach Medical Center 14-70593-ast
[] Long Beach Memorial Nursing Home d/b/a The Komanoff Center for Geriatric and Rehabilitative Medicine 14-70597-ast

Your Claim is Scheduled As Follows:

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the Debtor owes money or property):

[] Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent:
Telephone number:
Email address:

Court Claim Number:
(if known)
Filed on:

If an amount is identified above, you have a claim scheduled by one of the Debtors as shown. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as any of DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

Name and address where payment should be sent (if different from above):
Telephone number:
Email address:

[] Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

1. Amount of Claim as of Date Case Filed: \$
If all or part of the claim is secured, complete item 4.
If all or part of the claim is entitled to priority, complete item 5.
[] Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim:
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:

3a. Debtor may have scheduled account as:
(See instruction #3a)

3b. Uniform Claim Identifier (optional):
(See instruction #3b)

4. Secured Claim (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.
Nature of property or right of setoff: [] Real Estate [] Motor Vehicle [] Other
Describe:
Value of Property: \$
Annual Interest Rate: % [] Fixed or [] Variable (when case was filed)
Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$
Basis for perfection:
Amount of Secured Claim: \$
Amount Unsecured: \$

5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.
[] Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).
[] Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the Debtor's business ceased, whichever is earlier - 11 U.S.C. § 507 (a)(4).
[] Contributions to an employee benefit plan - 11 U.S.C. § 507 (a)(5).
[] Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)().
[] Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507 (a)(7).
[] Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8).
Amount entitled to priority: \$

*Amounts are subject to adjustment on 4/1/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

7. **Documents:** Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain: _____

8. **Signature:** (See instruction #8)
Check the appropriate box.

I am the creditor. I am the creditor's authorized agent. I am the trustee, or the Debtor, or their authorized agent. (See Bankruptcy Rule 3004.) I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: _____
Title: _____ (Signature) _____ (Date)
Company: _____
Address and telephone number (if different from notice address above): _____

Telephone number: _____ Email address: _____

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the Debtor, exceptions to these general rules may apply. The attorneys for the Debtors and their court-appointed claims agent, GCG, are not authorized and are not providing you with any legal advice.

PLEASE SEND YOUR ORIGINAL, COMPLETED CLAIM FORM AS FOLLOWS: **IF BY MAIL:** LONG BEACH MEDICAL CENTER, C/O GCG, P.O. BOX 10040, DUBLIN, OH 43017-6640. **IF BY HAND OR OVERNIGHT COURIER:** LONG BEACH MEDICAL CENTER, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017. ANY PROOF OF CLAIM SUBMITTED BY FACSIMILE OR EMAIL WILL NOT BE ACCEPTED.

THE GENERAL BAR DATE IN THESE CHAPTER 11 CASES IS FEBRUARY 23, 2015

Items to be completed in Proof of Claim Form

Court, Name of Debtor, and Case Number:
These chapter 11 cases were commenced in the United States Bankruptcy Court for the Eastern District of New York on February 19, 2014 (the "Petition Date"). You should select the Debtor against which you are asserting your claim.

A SEPARATE PROOF OF CLAIM FORM MUST BE FILED AGAINST EACH DEBTOR.

Creditor's Name and Address:
Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. Please provide us with a valid email address. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:
State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:
State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to your claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:
State only the last four digits of the Debtor's account or other number used by the creditor to identify the Debtor.

3a. Debtor May Have Scheduled Account As:
Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the Debtor.

3b. Uniform Claim Identifier:
If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:
Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507(a):
If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:
An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the Debtor credit for any payments received toward the debt.

7. Documents:
Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:
The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS**Debtor**

A Debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is the person, corporation, or other entity to whom the Debtor owes a debt that was incurred before the date of the bankruptcy filing. See 11 U.S.C. § 101 (10).

Claim

A claim is the creditor's right to receive payment for a debt owed by the Debtor on the date of the bankruptcy filing. See 11 U.S.C. § 101 (5). A claim may be secured or unsecured.

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the Debtor on the date of the bankruptcy filing. The creditor must file the form with GCG as described in the instructions above and in the Bar Date Notice.

Secured Claim Under 11 U.S.C. § 506 (a)

A secured claim is one backed by a lien on property of the Debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a Debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the Debtor money (has a right to setoff).

Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. § 507 (a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information.

INFORMATION**Evidence of Perfection**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

Acknowledgment of Filing of Claim

To receive a date-stamped copy of your proof of claim form, please provide a self-addressed stamped envelope and a copy of your proof of claim form when you submit the original to GCG. You will also receive an acknowledgment letter from GCG after your proof of claim form has been processed.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the Debtor. These entities do not represent the bankruptcy court or the Debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

Display of Proof of Claim on Case Administration Website

As the official claims agent, and in accordance with Federal Bankruptcy Rule 9037(g), GCG will display the first page of your proof of claim form on the case administration website. Please be aware that any personal information not otherwise redacted on your proof of claim form will be displayed over the Internet.

In re Long Beach Medical CenterCase No. 14-70593

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N D I S P U T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
								AMOUNT ENTITLED TO PRIORITY	
Account No. Alexander, Brandy			2/18/2014 Originally Filed in the amount of \$100.28 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Amsterdam, Jacqueline			2/18/2014 Originally Filed in the amount of \$2,108.70 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Barnett, Ilene			2/18/2014 Originally Filed in the amount of \$1,426.40 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Bifulco, Diane			2/18/2014 Originally Filed in the amount of \$602.40 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Blue, Cynthia			2/18/2014 Originally Filed in the amount of \$116.10 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Subtotal							0.00	0.00	0.00
(Total of this page)							0.00	0.00	0.00

Sheet 1 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY		
								AMOUNT ENTITLED TO PRIORITY		
Account No. Castano, Nicolas			2/18/2014 Originally Filed in the amount of \$711.33 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00	
Account No. Colon-Nocera, Isabel			2/18/2014 Originally Filed in the amount of \$3,332.39 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00	
Account No. Conry, Annamae			2/18/2014 Originally Filed in the amount of \$3,130.86 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00	
Account No. Davis, James			2/18/2014 Originally Filed in the amount of \$290.70 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00	
Account No. Duverger, Cyntia			2/18/2014 Originally Filed in the amount \$260.51 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00	
Subtotal								0.00	0.00	0.00
(Total of this page)								0.00	0.00	0.00

Sheet 2 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B I T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
								AMOUNT ENTITLED TO PRIORITY	
Account No.			2/18/2014						
Franzese, Therese			Originally Filed in the amount of \$321.43 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Glenn, Murrene			Originally filed in the amount of \$897.75 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Graham, Neesha			Originally Filed in the amount of \$265.88 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Grant, Dolores			Originally Filed in the amount of \$3,368.35 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	
Account No.			2/18/2014						
Green, Ann Marie			Originally Filed in the Amount of \$571.81 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	
Subtotal								0.00	0.00
(Total of this page)								0.00	0.00

Sheet 3 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	A M O U N T N O T E N T I T L E D T O P R I O R I T Y, I F A N Y	
								A M O U N T E N T I T L E D T O P R I O R I T Y	A M O U N T E N T I T L E D T O P R I O R I T Y
Account No. Grey, Gilbert R	-	-	2/18/2014 Originally Filed in the amount of \$2,270.10 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Guirand, Patricia	-	-	2/18/2014 Originally Filed in the amount of \$120.30 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Hirschheimer-Breslow, Mandy	-	-	2/18/2014 Originally Filed in the amount of \$1,319.80 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Kapen, Toni	-	-	2/18/2014 Originally Filed in the amount of \$1,215.45 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Manolaki, Evangelia	-	-	2/18/2014 Originally Filed in the amount of \$891.54 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Subtotal (Total of this page)							0.00	0.00	0.00

Sheet 4 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	A M O U N T N O T E N T I T L E D T O P R I O R I T Y, I F A N Y		
									A M O U N T E N T I T L E D T O P R I O R I T Y	
Account No.			2/18/2014							
Martin, Ursula			Originally Filed in the amount of \$817.02 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00	
Account No.			2/18/2014							
McManus, Maureen			Originally Filed in the amount of \$312.24 to be reduced to \$0.00 (No ther changes other than to amount)				0.00	0.00	0.00	
Account No.			2/18/2014							
Ogwuegbu, Ogadinma			Originally Filed in the Amount of \$244.30 to be reduced to \$0.00. (No other changes other than to amount).				0.00	0.00	0.00	
Account No.			2/18/2014							
Owens, Ted			Originally Filed in the amount of \$439.76 to be reduced to \$0.00 (No other changes othen than to amount)				0.00	0.00	0.00	
Account No.			2/18/2014							
Paqueo, Mariefel			Originally Filed in the amount of \$886.28 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00	
Subtotal								0.00	0.00	0.00
(Total of this page)								0.00	0.00	0.00

Sheet 5 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. Pennington III, Prince			2/18/2014 Originally Filed in the amount of \$390.76 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Perez, Rommel			2/18/2014 Originally Filed in the amount of \$410.69 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Persaud, Chandrawattie			2/18/2014 Originally Filed in the amount of \$1,181.70 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Rimpel, Ralph			2/18/2014 Originally Filed in the amount of \$734.00 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Account No. Riquelme, Lillian			2/18/2014 Originally Filed in the amount of \$798.13 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00
Subtotal (Total of this page)							0.00	0.00

Sheet 6 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	A M O U N T N O T E N T I T L E D T O P R I O R I T Y, I F A N Y	
									A M O U N T E N T I T L E D T O P R I O R I T Y
Account No. Rodriguez, Blanca			2/18/2014 Originally Filed in the amount of \$1,328.86 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Rodriguez, Jayson			2/18/2014 Originally Filed in the amount of \$2,433.90 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Rossi, David			2/18/2014 Originally Filed in the amount of \$1,661.73 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Solis, Esther			2/18/2014 Originally Filed in the amount of \$2,341.35 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00
Account No. Terry, Gayle			2/18/2014 Originally Filed in the amount of \$263.97 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Subtotal							0.00	0.00	0.00
(Total of this page)							0.00	0.00	0.00

Sheet 7 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Long Beach Medical Center
Debtor

Case No. 14-70593

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS - AMENDED
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	A M O U N T N O T E N T I T L E D T O P R I O R I T Y, I F A N Y	
									A M O U N T E N T I T L E D T O P R I O R I T Y
Account No. Thomas, Ralph			2/18/2014 Originally Filed in the amount of \$830.70 to be reduced to \$0.00. (No other changes other than to amount.)				0.00	0.00	0.00
Account No. Tierney, Kristen			2/18/2014 Originally Filed in the amount of \$2,041.25 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00
Account No. Ugbogbo, Adesuwa			2/18/2014 Originally Filed in the amount of \$612.90 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Account No. Washington, Margaret			2/18/2014 Originally Filed in the amount of \$114.60 to be reduced to \$0.00. (No other changes other than to amount)				0.00	0.00	0.00
Account No. Williams, Gwenetta			2/18/2014 Originally Filed in the amount of \$2,592.68 to be reduced to \$0.00 (No other changes other than to amount)				0.00	0.00	0.00
Subtotal (Total of this page)							0.00	0.00	0.00
Total (Report on Summary of Schedules)							0.00	0.00	0.00

Sheet 8 of 8 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims