B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Southern District of New York

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

Chapter **11**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	37,200,000.00		
B - Personal Property	Yes	6	74,810,877.32		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	7		47,638,579.32	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	230		8,554,525.21	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	220		54,181,938.43	
G - Executory Contracts and Unexpired Leases	Yes	43			
H - Codebtors	Yes	28			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedules		535			
		Total Assets	112,010,877.32		
			Total Liabilities	110,375,042.96	

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UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

In re:	)	Chapter 11
Sound Shore Medical Center of Westchester, et al.	)	Case No. 13-22840 (RDD)
Debtors.	)	(Jointly Administered)

GLOBAL NOTES, METHODOLOGY, AND SPECIFIC DISCLOSURES REGARDING THE DEBTORS' SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS

Introduction

Sound Shore Medical Center of Westchester ("SSMC") and certain of its debtor affiliates, as debtors and debtors in possession in the above-captioned chapter 11 cases (collectively, the "Debtors"), with the assistance of their advisors, have filed their respective Schedules of Assets and Liabilities (the "Schedules") and Statements of Financial Affairs (the "Statements", and together with the Schedules the "Schedules and Statements") with the United States Bankruptcy Court for the Southern District of New York (the "Bankruptcy Court"), pursuant to section 521 of title 11 of the United States Code (the "Bankruptcy Code") and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules").

These Global Notes, Methodology, and Specific Disclosures Regarding the Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs (the "Global Notes") pertain to, are incorporated by reference in, and comprise an integral part of all of the Debtors' Schedules and Statements. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statements.

The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States ("GAAP"), nor are they intended to be fully reconciled with the financial statements of each Debtor. Additionally, the Schedules and Statements contain unaudited information that is subject to further review and potential adjustment, and reflect the Debtors' reasonable best efforts to report the assets and liabilities of each Debtor on an unconsolidated basis.

John Spicer has signed each of the Schedules and Statements. Mr. Spicer is the President and CEO of Sound Shore Health System, Inc., a Debtor herein, and certain of its subsidiaries and affiliates, including, SSMC. and an authorized signatory for each of the Debtors. In reviewing and signing the Schedules and Statements, Mr. Spicer necessarily has relied upon the efforts, statements, and representations of various personnel employed by the Debtors and their advisors. Mr. Spicer has not (and could not have) personally verified the accuracy of each statement and

representation contained in the Schedules and Statements, including statements and representations concerning amounts owed to creditors, classification of such amounts, and creditor addresses.

Global Notes and Overview of Methodology

1. **Reservation of Rights**. Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; however, inadvertent errors or omissions may exist. The Debtors reserve all rights to amend or supplement the Schedules and Statements from time to time, in all respects, as may be necessary or appropriate, including, without limitation, the right to amend the Schedules and Statements with respect to claim ("Claim") description, designation, or Debtor against which the Claim is asserted; dispute or otherwise assert offsets or defenses to any Claim reflected in the Schedules and Statements as to amount, liability, priority, status, or classification; subsequently designate any Claim as "disputed," "contingent," or "unliquidated;" or object to the extent, validity, enforceability, priority, or avoidability of any Claim. Any failure to designate a Claim in the Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute a waiver of rights to change designation on appropriate notice or amendment by the Debtors that such Claim or amount is "disputed," "contingent," or "unliquidated." Listing a Claim does not constitute an admission of liability by the Debtor against which the Claim is listed or against any of the Debtors. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of rights with respect to the Debtors' chapter 11 cases, including, without limitation, issues involving Claims, substantive consolidation, defenses, equitable subordination, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation or rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph. Notwithstanding the foregoing, the Debtors shall not be required to update the Schedules and Statements.

2. **Description of Cases and "As Of" Information Date**. On May 29, 2013 (the "Petition Date"), the Debtors filed voluntary petitions for relief under chapter 11 of the Bankruptcy Code. The Debtors are operating their businesses and managing their properties as debtors in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.

On May 31, 2013, the Bankruptcy Court entered an order directing procedural consolidation and joint administration of the Debtors' chapter 11 cases [Docket No. 30]. On May 11, 2012, the United States Trustee for the Southern District of New York appointed a statutory committee of unsecured creditors pursuant to section 1102(a)(1) of the Bankruptcy Code [Docket No. 67].

The asset information provided herein, except as otherwise noted, represents the asset data of the Debtors as of May 1, 2013 and the liability information provided herein, except as otherwise noted, represents the liability data of the Debtors as of the close of business on May 1, 2013.

3. **Net Book Value of Assets**. It would be prohibitively expensive, unduly burdensome, and an inefficient use of estate assets for the Debtors to obtain current market valuations for all of their assets. Accordingly, unless otherwise indicated, the Debtors' Schedules and Statements reflect net book values as of April 30, 2012. Additionally, because the book values of assets

such as patents, trademarks, and copyrights may materially differ from their fair market values, they are listed as undetermined amounts as of the Petition Date. Furthermore, assets that have fully depreciated or were expensed for accounting purposes do not appear in these Schedules and Statements as they have no net book value.

4. **Recharacterization**. Notwithstanding the Debtors' reasonable best efforts to properly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtors may nevertheless have improperly characterized, classified, categorized, designated, or omitted certain items due to the complexity and size of the Debtors' businesses. Accordingly, the Debtors reserve all of their rights to recharacterize, reclassify, recategorize, redesignate, add, or delete items reported in the Schedules and Statements at a later time as is necessary or appropriate as additional information becomes available, including, without limitation, whether contracts or leases listed herein were deemed executory or unexpired as of the Petition Date and remain executory and unexpired postpetition.

5. **Liabilities**. The Debtors have sought to allocate liabilities between the prepetition and post-petition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and postpetition periods may change. Accordingly, the Debtors reserve all of their rights to amend, supplement, or otherwise modify the Schedules and Statements as is necessary or appropriate. Liabilities listed are as of May 1, 2013.

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 of their 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. **Excluded Assets and Liabilities**. The Debtors have excluded certain categories of assets, tax accruals, and liabilities from the Schedules and Statements, including, without limitation, goodwill, accrued salaries, employee benefit accruals, accrued accounts payable, customer deposits, and deferred gains. The Debtors also have excluded rejection damage Claims of counterparties to executory contracts and unexpired leases that may be rejected, to the extent such damage Claims exist. In addition, certain immaterial assets and liabilities may have been excluded.

The Bankruptcy Court has authorized the Debtors to pay, in their discretion, certain outstanding Claims on a post-petition basis. Prepetition liabilities which have been paid post-petition or those which the Debtors plan to pay via this authorization may have been excluded from the Schedules and Statements.

7. **Insiders**. Solely for purposes of the Schedules and Statements, the Debtors define "insiders" to include the members of their respective boards of directors; affiliates of the debtor and insiders of such affiliates. Persons have been included in the Statements for informational purposes only, and the listing of an individual as an insider, however, is not intended to be, and

should not be construed as, a legal characterization of that person 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 reserved. Further, the Debtors do not take any position concerning (a) the person's influence over the control of the Debtors, (b) the person's management responsibilities or functions, (c) the person's decision-making or corporate authority, or (d) whether the person could successfully argue that he or she is not an insider under applicable law, including the federal securities laws, for any theories of liability or for any other purpose.

8. Intellectual Property Rights. Exclusion of certain 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 pursuant to a sale, acquisition, or other transaction. 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 pursuant to a sale, acquisition, or other transaction.

In addition, although the Debtors have made diligent efforts to attribute intellectual property to the rightful Debtor entity, in certain instances, intellectual property owned by one Debtor may, in fact, be owned by another. Accordingly, the Debtors reserve all of their rights with respect to the legal status of any and all such intellectual property rights.

9. Executory Contracts. Although the Debtors made diligent attempts to attribute an executory contract to its rightful Debtor, in certain instances, the Debtors may have inadvertently failed to do so due to the complexity and size of the Debtors' businesses. Accordingly, the Debtors reserve all of their rights with respect to the named parties of any and all executory contracts, including the right to amend Schedule G.

10. Classifications. Listing a Claim on (a) Schedule D as "secured," (b) Schedule E as "priority," (c) Schedule F as "unsecured," or (d) listing a contract on Schedule G as "executory" or "unexpired," does not constitute an admission by the Debtors of the legal rights of the claimant or a waiver of the Debtors' rights to recharacterize or reclassify such Claims or contracts or to setoff of such Claims.

11. Claims Description. Schedules D, E, and F permit each of the Debtors to designate a Claim as "disputed," "contingent," and/or "unliquidated." Any failure to designate a Claim on a given Debtor's Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute a waiver of any rights to change designations or amend upon appropriate notice by that Debtor that such amount is "disputed," "contingent," or "unliquidated," or that such Claim is subject to objection. The Debtors reserve all of their rights to dispute, or assert offsets or defenses to, any Claim reflected on their respective Schedules and Statements on any grounds, including liability or classification. Additionally, the Debtors expressly reserve all of their rights to subsequently designate such Claims as "disputed," "contingent" or "unliquidated." Moreover, the mere listing of a Claim does not constitute an admission of liability by the Debtors except as otherwise stated in the Bankruptcy Code.

12. Causes of Action. Despite their reasonable efforts to identify all known assets, the Debtors may not have listed all of their causes of action or potential causes of action against

third-parties as assets in the Schedules and Statements, including, without limitation, causes of actions arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. The Debtors reserve all of their rights with respect to any cause of action (including avoidance actions), controversy, right of setoff, cross claim, counterclaim, or recoupment and any claim on contracts or for breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege and license of any kind or character whatsoever, known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertable directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law or in equity, or pursuant to any other theory of law (collectively, "Causes of Action") they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any claims or Causes of Action or in any way prejudice or impair the assertion of such claims or Causes of Action.

13. Currency. Unless otherwise indicated, all amounts are reflected in U.S. dollars.

14. Intercompany. Intercompany transactions between the Debtors and the respective intercompany accounts payable and intercompany accounts receivable, if any, are not set forth on Schedule F or on Schedule B.16. Intercompany transfers between Debtors or Non Debtor affiliates are captured on Statement question 3C.

15. Setoffs. The Debtors incur certain offsets and other similar rights during the ordinary course of business. Offsets in the ordinary course can result from various items, including, without limitation, intercompany transactions, pricing discrepancies, returns, warranties, and other disputes between the Debtors and their suppliers. These offsets and other similar rights are consistent with the ordinary course of business in the Debtors' industry and are not tracked separately. Therefore, although such offsets and other similar rights may have been accounted for when certain amounts were included in the Schedules, offsets are not independently accounted for, and as such, are excluded from the Debtors' Schedules and Statements.

16. Global Notes Control. In the event that the Schedules and Statements differ from the foregoing Global Notes, the Global Notes shall control.

Specific Disclosures with Respect to the Debtors' Schedules

Schedule A. For those Debtors that own real property, such owned real estate is reported at appraised values based on appraisals obtained by the Debtors in April, 2013. The Debtors may have listed certain assets as real property when such assets are in fact personal property, or the Debtors may have listed certain assets as personal property when such assets are in fact real property. The Debtors reserve all of their rights to recategorize and/or recharacterize such asset holdings to the extent the Debtors determine that such holdings were improperly listed.

Schedule B16. The Debtors have disclosed the net book value with respect to accounts receivable listed on Schedule B16, which represents the amount of the accounts receivable netted by any "doubtful accounts." For purposes of Schedule B16, "doubtful accounts" are those

accounts that the Debtors have identified as unlikely to be paid given the amount of time such accounts have been outstanding.

Schedule B21. In the ordinary course of their businesses, the Debtors may have accrued, or may subsequently accrue, certain rights to counter claims, crossclaims, setoffs, refunds with their customers and, suppliers or potential warranty claims against their suppliers. Additionally, certain of the Debtors may be a party to pending litigation in which the Debtors have asserted, or may assert, claims as a plaintiff or counter claims and/or crossclaims as a defendant. Because such claims are unknown to the Debtors and not quantifiable as of the Petition Date, they are not listed on Schedule B21.

Schedules B28 and B29. For purposes of Schedules B28 and B29, the value of certain assets may be included in a fixed asset group or certain assets with a net book value of zero may not be set forth on Schedule B28 or B29.

Schedule B30. Unless otherwise stated in a specific Debtor's Schedule B30, book value is presented net of inventory reserves.

Schedule D. The Claims listed on Schedule D arose or were incurred on various dates; a determination of the date upon which each Claim arose or was incurred would be unduly burdensome and cost prohibitive. Accordingly, not all such dates are included for each Claim. All Claims listed on Schedule D, however, appear to have arisen or been incurred before the Petition Date.

Except as otherwise agreed pursuant to a stipulation or order entered by the Bankruptcy Court, the Debtors reserve their rights to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be granted or perfected in any specific asset of a secured creditor listed on Schedule D of any Debtor. Moreover, although the Debtors have scheduled Claims of various creditors as secured Claims, the Debtors reserve all of their rights to dispute or challenge the secured nature of any such creditor's Claim or the characterization of the structure of any such transaction or any document or instrument related to such creditor's Claim. The descriptions provided in Schedule D are solely intended to be a summary-and not an admission-of liability.

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 liens. The secured debt is jointly and severally the responsibility of multiple Debtors, as such the liability has been listed on each Debtor who is an obligor or guarantor of such debt. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements. Except as specifically stated on Schedule D, real property lessors, utility companies, and other parties that may hold security deposits have not been listed on Schedule D. The Debtors reserve all of their 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 the claimant or a waiver of the Debtors' rights to recharacterize or reclassify such Claim or contract.

Moreover, the Debtors have not included on Schedule D parties that may believe their Claims are secured through setoff rights or inchoate statutory lien rights. Although there are multiple parties that hold a portion of the debt included in the Debtors' prepetition secured credit facilities, only the administrative agents have been listed for purposes of Schedule D. The amounts outstanding under the Debtors' prepetition secured credit facilities reflect approximate amounts as of the Petition Date.

Schedule E. Listing a claim on Schedule E as priority does not constitute an admission by the Debtors of the claimant's legal rights or a waiver of the Debtors' right to recharacterize or reclassify the claim or contract. The Bankruptcy Court entered a number of first day orders granting authority to pay certain prepetition priority claims. Accordingly, only claims against the Debtors for prepetition amounts that have not been paid as of May 29, 2013 have been included in Schedule E. In addition, the Bankruptcy Court entered a first day order authorizing (but not directing) the Debtors to pay certain prepetition claims of employees. Consequently, unsecured priority claims of employees for wages, salaries, and commissions, including vacation, severance, and sick leave pay, are not included. Finally, the Debtors reserve their rights to object to any listed claims on the ground that, among other things, they have already been satisfied.

Schedule F. The Debtors have used best reasonable efforts to report all general unsecured Claims against the Debtors on Schedule F based upon the Debtors' existing books and records as of the Petition Date. The Claims of individual creditors for, among other things, products, goods, or services are listed as either the lower of the amounts invoiced by such creditor or the amounts entered on the Debtors' books and records and may not reflect credits or allowances due from such creditors to the applicable Debtor. The Debtors reserve all of their rights with respect to any such credits and allowances including the right to assert objections and/or setoffs with respect to same. Schedule F does not include certain deferred charges, deferred liabilities, accruals, or general reserves. Such amounts are, however, reflected on the Debtors' books and records as required in accordance with GAAP. Such accruals are general estimates of liabilities and do not represent specific Claims as of the Petition Date. The Debtors have made every effort to include as contingent, unliquidated, or disputed the Claim of any vendor not included on the Debtors' open accounts payable that is associated with an account that has an accrual or receipt not invoiced.

The Claims listed in Schedule F arose or were incurred on various dates. In certain instances, the date on which a Claim arose is an open issue of fact. Although reasonable efforts have been made to identify the date of incurrence of each Claim, determining the date upon which each Claim in Schedule F was incurred or arose would be unduly burdensome and cost prohibitive and, therefore, the Debtors do not list a date for each Claim listed on Schedule F. Furthermore, claims listed on Schedule F have been aggregated by creditor and may include several dates of incurrence for the aggregate balance listed.

Schedule F contains information regarding pending litigation involving the Debtors. The dollar amount of potential Claims associated with any such pending litigation is listed as "undetermined" and marked as contingent, unliquidated, and disputed in the Schedules and Statements. Some of the litigation Claims listed on Schedule F may be subject to subordination pursuant to section 510 of the Bankruptcy Code.

Schedule F also includes potential or threatened legal disputes that are not formally recognized by an administrative, judicial, or other adjudicative forum due to certain procedural conditions that counterparties have yet to satisfy. Any information contained in Schedule F with respect to such 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 F reflects the 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 an executory contract or unexpired lease. Additionally, Schedule F does not include potential rejection damage Claims, if any, of the counterparties to executory contracts and unexpired leases that may be rejected.

Schedule G. The Debtors' businesses are complex. Although the Debtors' existing books, records, and financial systems have been relied upon to identify and schedule executory contracts at each of the Debtors and diligent efforts have been made to ensure the accuracy of each Debtor's Schedule G, inadvertent errors, omissions, or over-inclusions 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 the Debtors' reasonable efforts. Listing a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is an executory contract or unexpired lease or that such contract or agreement was in effect on the Petition Date or is valid or enforceable. The Debtors hereby reserve all of their rights to dispute the validity, status, or enforceability of any contracts, agreements, or leases set forth 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.

Certain confidentiality and non-disclosure agreements may not be listed on Schedule G. The Debtors reserve all of their rights with respect to such agreements.

Certain of the contracts and agreements listed on Schedule G may consist of several parts, including, 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. The Debtors expressly reserve their rights to challenge whether such related materials constitute an executory contract, a single contract or agreement or, multiple, severable, or separate contracts.

The contracts, agreements, and leases listed on Schedule G may have expired or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters, memoranda, and other documents, instruments, and agreements that may not be listed therein despite the Debtors' use of reasonable efforts to identify such documents. Further, unless otherwise specified on Schedule G, each executory contract or unexpired lease listed therein shall include all exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any agreement, instrument, or other document that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed therein. In some cases, the same supplier or

provider appears 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 reserve all of their rights, claims, and Causes of Action with respect to the contracts on Schedule G, including the right to dispute or challenge the characterization of the structure of any transaction or any document or instrument related to a creditor's Claim.

In addition, the Debtors may have entered into various other types of agreements in the ordinary course of their businesses, such as subordination, nondisturbance, and attornment agreements, supplemental agreements, settlement agreements, amendments/letter agreements, title agreements and confidentiality agreements. Such documents may not be set forth on Schedule G. Further, the Debtors reserve all of their rights to alter or amend these Schedules to the extent that additional information regarding the Debtor obligor to such executory contracts becomes available. Certain of the executory agreements may not have been memorialized and could be subject to dispute. Executory agreements that are oral in nature have not been included on Schedule G.

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.

The listing of any contract on Schedule G does not constitute an admission by the Debtors as to the validity of any such contract or that such contract is an executory contract or unexpired lease. The Debtors reserve all of their rights to dispute the effectiveness of any such contract listed on Schedule G or to amend Schedule G at any time to remove any contract.

Schedule H. For purposes of Schedule H, the Debtors that are either the principal obligors or guarantors under the prepetition secured credit facilities are listed as Co-Debtors on 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 of their rights to amend the Schedules to the extent that additional guarantees are identified or such guarantees are discovered to have expired or be unenforceable.

Although there are multiple lenders under the Debtors' prepetition secured credit facilities, only the administrative agents have been listed for purposes of Schedule H.

In the ordinary course of their businesses, the Debtors may be involved in pending or threatened litigation. These matters may involve multiple plaintiffs and defendants, some or all of whom may assert cross-Claims and counter-Claims against other parties. Because all such Claims are contingent, disputed, or unliquidated, such Claims have not been set forth individually on Schedule H. Litigation matters can be found on each Debtor's Schedule F and Statement 4a, as applicable.

Specific Disclosures with Respect to the Debtors' Statements

Statement 3b. Statement 3b includes any disbursement or other transfer made by the Debtors except for those made to insiders, employees, and bankruptcy professionals. The amounts listed

in Statement 3b reflect the Debtors' disbursements netted against any check level detail; thus, to the extent a disbursement was made to pay for multiple invoices, only one entry has been listed on Statement 3b. All disbursements listed on Statement 3b are made through the Debtors' cash management system. Additionally, all disbursement information reported in Statement 3b for a specific Debtor pertains to the bank accounts maintained by that respective Debtor.

In the normal course of the Debtors operations there may be a delay between the date a disbursement is proposed and the disbursement being effected.

Statement 3c. Statement 3c accounts for a respective Debtor's intercompany transactions, as well as other transfers to insiders, as applicable. As described in the Cash Management Motion, in the ordinary course of business certain of the Debtor entities and business divisions maintain business relationships with each other, resulting in intercompany receivables and payables (the "Intercompany Claims"). Any payments to another Debtor or a non-Debtor affiliate on account of Intercompany Claims are reflected as the net payments between the Debtor and applicable affiliate. Where payments have been made to another Debtor, such payments are presented in response to SOFA Question 3c of the Debtor whose intercompany payments exceeded its intercompany receipts). Where payments are made between a Debtor and a non-Debtor affiliate, such payments are shown in response to SOFA Question 3c of the Debtor only if the intercompany payments made by such Debtor exceed the intercompany receipts received by such Debtor from the non-Debtor affiliate.

Statement 4a. Information provided in Statement 4a includes only those legal disputes and administrative proceedings that are formally recognized by an administrative, judicial, or other adjudicative forum. In the Debtors' attempt to provide full disclosure, to the extent a legal dispute or administrative proceeding is not formally recognized by an administrative, judicial, or other adjudicative forum due to certain procedural conditions that counterparties have yet to satisfy, the Debtors have identified such matters on Schedule F for the applicable Debtor. Additionally, any information contained in Statement 4a shall not be a binding representation of the Debtors' liabilities with respect to any of the suits and proceedings identified therein.

Statement 8. The Debtors occasionally incur losses for a variety of reasons, including theft and property damage. The Debtors, however, may not have records of all such losses to the extent such losses do not have a material impact on the Debtors' businesses or are not reported for insurance purposes.

Statement 9. Although all of the Debtors retained or paid the entities and individuals who provided consultation concerning debt consolidation, relief under the Bankruptcy Code, or preparation of a petition in bankruptcy within one year immediately preceding the Petition Date, all of the payments, or property transferred by or on behalf of a Debtor for such services, were made by SSMC, and are therefore listed on that Debtor's response to Statement 9.

Statement 13. The Debtors routinely incur setoffs from third parties in the ordinary course of business. Setoffs in the ordinary course can result from routine transactions, including intercompany transactions, counterparty settlements (in particular, interline ticketing setoffs with other carriers), pricing discrepancies, and other disputes between Debtors and third parties. These normal setoffs are consistent with the ordinary course of business in the Debtors'

industries. Therefore, these ordinary course setoffs are excluded from the Debtors' responses to Question 13.

Statement 19d. The Debtors have provided financial statements in the ordinary course of their businesses to numerous financial institutions, creditors, and other parties within two years immediately before the Petition Date. Considering the number of such recipients and the possibility that such information may have been shared with parties without the Debtors' knowledge or consent, the Debtors have not disclosed any parties that may have received such financial statements for the purposes of Statement 19d.

Statement 23. Unless otherwise indicated in a Debtor's specific response to Statement 23, the Debtors have included a comprehensive response to Statement 23 in Statement 3c [need to ensure these are picked up in 3c response].

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B6A (Official Form 6A) (12/07)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Sound Shore Medical Center and 6 Parking Lots 16 Guion Place New Rochelle, New York 10802 Block 1235, Lot 23	**Fee simple**	**-**	**37,200,000.00**	**15,811,743.64**

Sub-Total >	**37,200,000.00**	(Total of this page)
Total >	**37,200,000.00**	

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply 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).

	Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand		**Petty Cash**	-	**197.00**
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		**JP Morgan Chase 491 Main Street New Rochelle, NY 10801 Account No. 816900310 Account Name: Sound Shore Medical Center of Westchester Payroll account**	-	**179,530.27**
			Account No. 134773683 JP Morgan Chase 491 Main Street New Rochelle, NY 10801 Sound Shore Medical Cnt of West Foundation Midcap Lockbox - Patient Care Receipts	-	**7,275.76**
			PNC Account Number 8611722228 Account Name: Sound Shore Medical Center P.O. Box 418552 Boston, MA 02241-8552 Midcap Lockbox - Commercial Patient Care Receipts	-	**0.00**
			Account No. 8611722236 PNC P.O. Box 418552 Boston, MA 02241-8552 Account Name: Sound Shore Medical Center Midcap Lockbox - Medicare/Medicap Receipts	-	**0.00**
			Account No. 6709080596 JP Morgan Chase 491 Main Street New Rochelle, NY 10801 Account Name: Sound Shore Medical Center Cashiers Office - Credit Card Processing	-	**10,797.00**

Sub-Total > (Total of this page) **197,800.03**

5 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		Account No. 6709085512 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: Sound Shore Medical Center** **General Savings Account**	-	**4,338.83**
		Account No. 6709009158 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: Sound Shore Medical Center** **Escrow Account**	-	**320,246.59**
		Account 1204412126 **Hudson Valley Bank** **403 Sanford Blvd** **Mount Vernon, NY 10550** **Account Name: Sound Shore Medical** **Collateral - Temporary Restriction**	-	**1,264,820.25**
		Account No. 753658756 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Sound Shore Physicians Services** **Physicians Operating Account**	-	**48,914.69**
		Account 6700794952 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **New Rochelle Medical Services, P.C** **Physicians Operating Account**	-	**17,370.62**
		Account 6700997284 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: New Rochelle Geriatrics Med Svs. PC** **Physicians Operating Account**	-	**5,796.79**
		Account 6703818720 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: New Rochelle Med Services PC** **OB-GYN** **Physicians Operating Account**	-	**25,343.48**
			Sub-Total > (Total of this page)	**1,686,831.25**

Sheet **1** of **5** continuation sheets attached to the Schedule of Personal Property

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		Account 6709083587 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: New Rochelle Pathology Services PC** **Physicians Operating Account**	-	**2,287.71**
		Account 4181516396 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: Sound Shore Medical Center fka Physician's** **Benefit of Physicians Group**	-	**146,976.78**
		Account No. 6701129936 **JP Morgan Chase** **491 Main Street** **New Rochelle, NY 10801** **Account Name: Sound Shore Pharmacy** **Pharmacy - Transition**	-	**3,383.56**
		JP Morgan Chase **Account Number: 6700997802** **491 Main Street** **New Rochelle, NY 10801** **Account Name: Sound Shore Med Cnt of West Foundation**	-	**771.55**
		JP Morgan Chase **Account Number: 6709092616** **Account Name: Sound Shore Med Cnt of West Foundation** **491 Main Street** **New Rochelle, NY 10801**	-	**19,706.77**
		JP Morgan Chase **Account Number: 6700790914** **Account Name: NRHMC Service Corporation** **491 Main Street** **New Rochelle, NY 10801**	-	**58,926.02**
		UBS **Account Number: WE18764MG** **Account Name: Endowment Fund** **1251 Avenue of the Americas, 2nd Floor** **New York, NY 10021**	-	**211,533.00**
			Sub-Total > (Total of this page)	**443,585.39**

Sheet **2** of **5** continuation sheets attached to the Schedule of Personal Property

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		JP Morgan Chase Account Number: 134774515 Account Name: Warren Jampol CD 491 Main Street New Rochelle, NY 10801	-	**216,229.48**
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

Sub-Total > **216,229.48**
(Total of this page)

Sheet **3** of **5** continuation sheets attached to the Schedule of Personal Property

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		**Location: 16 Guion Place, New Rochelle NY 10802**	-	**31,378,877.00**
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

Sub-Total > **31,378,877.00**
(Total of this page)

Sheet **4** of **5** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		**Motor Vehicles** **16 Guion Place** **New Rochelle, NY 10802**	-	**300,074.00**
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		**Fixed Equipment** **16 Guion Place** **New Rochelle, NY 10801**	-	**7,034,127.14**
		Major Moveable Equipment **16 Guion Place** **New Rochelle, NY 10802**	-	**12,887,944.89**
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.		**Food Inventory, Drug Inventory, Operating Room and Receiving Storage Inventory** **16 Guion Place** **New Rochelle, NY 10802**	-	**5,149,556.00**
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		**Board Designated Assets**	-	**443,104.67**
		Noteman Endowment Trust	-	**11,729,962.67**
		Harding Endowment Trust	-	**3,342,784.80**

Sub-Total > **40,887,554.17**
(Total of this page)
Total > **74,810,877.32**

Sheet **5** of **5** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6D (Official Form 6D) (12/07)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. 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. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, 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 all secured creditors will not fit on this page, use the continuation sheet provided.

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.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **1199 SEIU** **330 W. 42nd Street** **New York, NY 10036**		-	**Judgment Lien** **Sound Shore Medical Center and 6 Parking Lots** **16 Guion Place** **New Rochelle, New York 10802** **Block 1235, Lot 23** Value $ **37,200,000.00**				**908,000.00**	**0.00**
Account No. **1199 SEIU United Healthcare** **310 West 43rd Street** **New York, NY 10036**	X	-	**Judgment Lien** Value $ **0.00**			X	**6,083,497.00**	**6,083,497.00**
Account No. **AMERISOURCEBERGEN DRUG COR** **1300 Morris Drive** **Morrisville, PA 19067**		-	**Drug Inventory** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Baxter Healthcare Corporation** **One Baxter Parkway** **Deerfield, IL 60015**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
						Subtotal (Total of this page)	**6,991,497.00**	**6,083,497.00**

6 continuation sheets attached

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B6D (Official Form 6D) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **Beckman Coulter, Inc.** **4300 North Harbor Blvd** **Fullerton, CA 92834**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **California First Leasing** **18201 Von Karman Ave** **Suite 800** **Irvine, CA 92612**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Citicorp Vendor Finance, Inc.**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Coactiv, LLC** **900 Ethan Allen Hwy** **Ridgefield, CT 06877**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **D & D ELEVATOR INC** **38 Hays Street** **Elmsford, NY 10523**		-	**Mechanic's Lien** **16 Guion Street** **Glover Johnson Place** **23 Washington Avenue** **New Rochelle, NY** Value $ **0.00**			X	**525,880.00**	**525,880.00**
						Subtotal (Total of this page)	**525,880.00**	**525,880.00**

Sheet **1** of **6** continuation sheets attached to Schedule of Creditors Holding Secured Claims

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B6D (Official Form 6D) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **DASNY** **515 BROADWAY** **Albany, NY 12207**		-	Value $ **0.00**				**5,100,000.00**	**5,100,000.00**
Account No. **DASNY** **515 BROADWAY** **Albany, NY 12207**		-	Value $ **0.00**				**2,900,000.00**	**2,900,000.00**
Account No. **First Financial Corporate** **711 Kimberly Avenue** **Suite 160** **Marysville, WA 98270**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **General Electric Capital** **P.O. Box 414** **W-490** **Milwaukee, WI 53201**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **GRAYBAR ELECTRIC COMPANY** **401 Franklin Avenue** **Suite 220** **Garden City, NY 11530**		-	**Mechanic's Lien** **16 Guion Streret** **Glover Johnson Place** **23 Washington Avenue** **New Rochelle, New York** Value $ **0.00**			X	**17,458.68**	**17,458.68**
						Subtotal (Total of this page)	**8,017,458.68**	**8,017,458.68**

Sheet **2** of **6** continuation sheets attached to Schedule of Creditors Holding Secured Claims

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B6D (Official Form 6D) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **Hill-Rom Company, Inc.** **1069 State Road 46 East** **Batesville, IN 47006**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **M & I MARSHALL & ISLEY BANK** **651 NICOLLET MALL** **Minneapolis, MN 55402**		-	**Equipment Loan** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **MB Financial Bank** **6111 North River Road** **Des Plaines, IL 60018**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Medline Industries** **One Medline Place** **Mundelein, IL 60060**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **MidCap Financial, LLC** **7735 Old Georgetwon Road** **Bethesda, MD 20814**		-	**April 8, 2011** **Account Receivable** Value $ **31,378,877.00**				**16,200,000.00**	**0.00**
						Subtotal (Total of this page)	**16,200,000.00**	**0.00**

Sheet **3** of **6** continuation sheets attached to Schedule of Creditors Holding Secured Claims

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B6D (Official Form 6D) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **New York State Dept of Labor State Office Building Albany, NY 12240**		-	**Judgment Lien Sound Shore Medical Center and 6 Parking Lots 16 Guion Place New Rochelle, New York 10802 Block 1235, Lot 23** Value $ **37,200,000.00**				**21,800.00**	**0.00**
Account No. **Nihon Kohden America, Inc. 90 Icon Street Foothill Ranch, CA 92610**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **OMEGA ENVIRONMENTAL SERV 280 Huyler Street South Hackensack, NJ 07606**		-	**Mechanic's Lien Sound Shore Medical Center and 6 Parking Lots 16 Guion Place New Rochelle, New York 10802 Block 1235, Lot 23** Value $ **37,200,000.00**			X	**138,742.00**	**0.00**
Account No. **Optumhealth Bank, Inc. 2525 Lake Park Blvd Salt Lake City, UT 84120**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Pantheon Capital, LLC 1 International Blvd Mahwah, NJ 07495**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
						Subtotal (Total of this page)	**160,542.00**	**0.00**

Sheet **4** of **6** continuation sheets attached to Schedule of Creditors Holding Secured Claims

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B6D (Official Form 6D) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **PBGC** **1200 K Street NW** **Washington, DC 20005**		-	**Tax Lien** **Sound Shore Medical Center and 6 Parking Lots** **16 Guion Place** **New Rochelle, New York 10802** **Block 1235, Lot 23** Value $ **37,200,000.00**				**5,763,201.64**	**0.00**
Account No. **Penn Mutual** **2 Park Avenue** **#300** **New York, NY 10016**		-	**Loan on Insurance Policy** Value $ **0.00**				**1,000,000.00**	**1,000,000.00**
Account No. **Philips Medical Center** **1111 Old Eagle School Road** **Wayne, PA 19087**		-	**Equipment Loan** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Radiometer America, Inc.** **810 Sharon Drive** **Westlake, OH 44145**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Republic Bank** **801 North 500 West** **Suite 103** **Woods Cross, UT 84087**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Sheet **5** of **6** continuation sheets attached to Schedule of Creditors Holding Secured Claims						Subtotal (Total of this page)	**6,763,201.64**	**1,000,000.00**

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B6D (Official Form 6D) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. **Siemens Financial Services** **170 Wood Avenue** **Iselin, NJ 08830**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Stryker Capital** **83 Wooster Heights Road** **Danbury, CT 06810**		-	**Equipment Lease** Value $ **0.00**				**Unknown**	**Unknown**
Account No. **Sun Life Assurance Co. Canada** **One Penn Plaza** **New York, NY 10119**		-	**April 1, 2006** **Mortgage** **Sound Shore Medical Center and 6 Parking Lots** **16 Guion Place** **New Rochelle, New York 10802** **Block 1235, Lot 23** Value $ **37,200,000.00**				**8,980,000.00**	**0.00**
Account No. 			Value $					
Account No. 			Value $					

Sheet **6** of **6** continuation sheets attached to Schedule of Creditors Holding Secured Claims

Subtotal (Total of this page)	**8,980,000.00**	**0.00**
Total (Report on Summary of Schedules)	**47,638,579.32**	**15,626,835.68**

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B6E (Official Form 6E) (4/10)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

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 $11,725* 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 $5,775* 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 $2,600* 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 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

229 continuation sheets attached

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2504** **AAKJAR, HANNAH** **32 BANK STREET** **COLD SPRING, NY 10516**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1275** **ABERNETHY, MICHELLE** **2201 PALMER AVE** **APT 3J** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1146** **ACEVEDO, MIRIAM** **80 GUION PL** **APT #4P** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2098** **ACKERMAN, MICHAEL** **345 HEATHCODE RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100366** **ACOSTA, EDUARDO** **P.O. BOX 427** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

Sheet **1** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100602** **ADAMS, TRICIA A** **4601 MURDOCK AVE** **1ST FLOOR** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100391** **ADAMS, VICTOR** **140 DONIZETTI PLACE** **APT 23B** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100145** **AGGARWAL, RICHA** **255 HUGUENOT STREET** **APT. 2010** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100183** **AHAMA, KOSI** **4061 - LOWERRE PLACE** **APT 2 F** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2405** **AIKENS-LOTEN, ALEEN** **120 DEBS PLACE** **APT. 15F** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **2** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100058** **AINE, VIOLETTE** **196 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100555** **AKRAM, WARQAA** **350 E. 89 STREET** **APT. 1** **NEW YORK, NY 10128**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2180** **ALAIA, LOUANNE** **485 PELHAM ROAD** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2224** **ALBERICO, MICHAEL** **1273 NORTH AVE** **APT. 1AY** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1282** **ALBITO, MARIA** **80 GUION PL** **APT. 5U** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **3** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100569** **ALETA, MELISSA** **80 GUION PLACE** **2M** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2234** **ALHASSAN, ABDUL** **1585 TOWNSEND AVE.,** **#6-I** **BRONX, NY 10452**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2036** **ALLEYNE, JAMAR** **2879 EAST 197TH ST** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1394** **ALPER, NOREEN D** **30-11 PARSONS BLVD** **APT 4P** **FLUSHING, NY 11354**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1324** **ALTAREJOS, TERESITA A** **50 GUION PL** **APT 5E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2093** **ALTMAN, JILL** **818 WILMOT RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2013** **ALVARADO, DIANA** **125 W. TREMONT AVE** **APT. 4L** **BRONX, NY 10453**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1142** **ALVARADO, PABLO** **80 GUION PL** **APT 11S** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1294** **ALVERANGA, VINNETH** **40 EAST SIDNEY AVE** **APT 2M** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100335** **AMON, ARCH** **80 GUION PLACE** **APT. 6Y** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2237** **AMPADU-KYERE, YAW** **80 GUION PL** **APT 10M** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1325** **ANAYA, CARMEN** **83 MEADOW LN** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2139** **ANDERSON, ALTHEA** **113 MORIS ST** **#3** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100027** **ANDRADE, FRANKYS** **80 GUION PLACE** **APT. 10P** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3903** **ANDRADES, IRENES** **160 E SIDNEY AVE,** **#1E** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

Sheet **6** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100319** **ANG, JONATHAN R** **80 GUION PLACE** **APT. 9T** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1489** **ANTONY, VALSAMMA T** **34 LASALLE DR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2238** **ARAH, PEGGY** **922 FORBELL ST** **APT 3E** **BROOKLYN, NY 11208**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2426** **ARI, ADRIANO** **3130 WATERBURY AVE** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1330** **ARIAS, ORLANDO** **294 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

Sheet **7** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1026** **ASHLEY, DENNIS** **165 WEST SHORE DR** **CARMEL, NY 10512**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100552** **ATHANIKAR, ADITYA** **501 HUDSON PARK** **EDGEWATER PARK, NJ 07020**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1334** **AUSTIN, DALE** **50 GUION PL** **APT 7B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1817** **AVANZADO, SERGIO** **24 TIOKEN ROAD** **SPRING VALLEY, NY 10977**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3298** **AYALA, LINNETTE** **10 RICH AVE** **#A31** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **3782** **AZER, IBRAHIM** **30-42 23RD ST,** **#3J** **LONG ISLAND CITY, NY 11102**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100612** **AZIZ, MOHAMMED** **2073 DAVIDSON AVE,** **#3D** **BRONX, NY 10453**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1917** **BACA, EDUARDO** **733 PELHAM ROAD,** **# 2** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1337** **BACA, JUAN** **331 7TH AVE** **2FLR** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1338** **BAGUIO, ANTONIO** **80 GUION PL** **APT 11T** **NEW ROCHLLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1210** **BAILEY, BEVERLY** **811 E 224TH ST** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1884** **BAILEY, JENNIFER** **1009 ARNOW AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1019** **BAKER-STONE, LORI** **96 FRANKLIN AVE** **HARRISON, NY 10528**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1530** **BAKOS, PATRICIA** **14 ENTRANCE WAY** **VALHALLA, NY 10595**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100429** **BALAKUMAR, MALA M** **56 SHADETREE LANE** **ROSLYN HGTS, NY 11577**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100104** **BANINI, BUBU** **50 GUION PLACE,** **# 6 B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100591** **BANJADE, RASHMI** **50 GUION PLACE** **APT. 4K** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1027** **BARONE, RICHARD** **39 HOLBROOKE RD** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1169** **BARRIFFE, ANN** **11 TRIBROOK DRIVE** **SOUTH SALEM, NY 10590**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100386** **BARZEY, GINETTE** **1391 NELSON AVE** **#4D** **BRONX, NY 10452**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1091** **BASAK, PRASANTA** **19 LOCUST STREET** **GREENVALE, NY 11548**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2484** **BATISTA, MARILYN** **80 GUION PL** **APT 5S** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1158** **BEJAR, RAQUEL** **1 HARRISON ST** **#2F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1663** **BEJAR, YOLANDA F.** **1 HARRISON ST** **APT 2F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100467** **BELLIZZI, DONNA** **82 RAINBOW CREST** **HOPEWELL, NY 12533**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **12** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2502** **BELTRAN, DANILO** **5-7 NORTH 9TH AVE** **APT. # D5** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1759** **BENAVENTE, JOEL** **80 GUION PL,** **#3M** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100344** **BENOIT, BERLANDIE** **247 DRAKE AVE** **APT. W41** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2044** **BENOIT, MARIE** **53 WILSON AVE** **TRUMBULL, CT 06611**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1339** **BENSON, JOANN** **140 PELHAM RD** **APT 4B** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1269** **BENTO, RACHELE** **265 E PROSPECT AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1345** **BENTON, MARCIA** **94 VALLEY RD** **WHITE PLAINS, NY 10604**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1628** **BENYEHUDAH, UZZIEL SHILEM** **1112 BURKE AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1440** **BEPOITE, SANDRA A** **118 COLIGNI AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100250** **BERBICK, LEROY** **3312A FISH AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Sheet **14** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims							Subtotal (Total of this page) **0.00**	**0.00** **0.00**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2320** **BERENFELD, BENJAMIN** **457 HOMANS AVE** **CLOSTER, NJ 07624**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1346** **BHAGIRATHY, SATNARINE** **18 SO 12TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1836** **BINO, MANJU** **50 GUION PL** **APT 4J** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1348** **BISTRITZ, JANICE** **14 HARVARD CT** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2478** **BITONDO, MARY** **18-109 TOWN GREEN DR** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1349** **BLAIR-BAGGS, NOLA** **11 PLUMBROOK RD** **KATONAH, NY 10536**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100248** **BLAKE, AINSWORTH** **20 EAST 3RD STREET** **APT. 9A** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100510** **BLAKIME, CHRISTIANE** **14 POPLAR STREET** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1129** **BLAKIME, EVELYNE** **14 POPLAR STREET** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2169** **BLANCHARD, MACCARLING** **140 CARVER LOOP** **APT 7E** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **3157** **BLANCHETTE, DORIAN** **22 SHERIDAN AVE** **APT 1A** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2317** **BLONDE, CASEY** **602 E. 138 STREET** **NEW YORK, NY 10031**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1789** **BLUE, EDWARD L** **157 SICKLES AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1017** **BLUM, DAVID** **185 BARNARD RD.** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100289** **BLUNDO, RICHARD** **541 PELHAM ROAD** **APT. 4-0** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1962** **BOCHOW, GAIL** **2218 PALMER AVE.** **APT 1K** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1358** **BONAVISO, DARCY J** **35 CIRCUIT RD** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1358** **BONAVISO, DARCY J** **35 CIRCUIT RD** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2479** **BONETTI, SIMONE** **2289 EVERGREEN ST** **YORKTOWN HEIGHTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1665** **BONOMO, NANCY** **549 SECOND AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **18** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1384** **BONVINO, TERESA** **11 LT WHEELER CT** **BLAUVELT, NY 10913**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1353** **BOOTHE, YVONNE** **701 PELHAM RD** **#4-L** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2344** **BORE, FATOUMATA** **2670 VALENTINE AVE** **APT 7** **BRONX, NY 10458**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2052** **BORELL, RITA** **61 W. GRAND ST** **APT 2M** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1276** **BOUHLEV, OGNIAN** **116 HAMILTON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **19** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1356** **BOURNE, EUTALESE** **76 LOCUST ST** **BRIDGEPORT, CT 06610**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1357** **BOVELL, MONICA** **40 E SIDNEY AVE** **6N** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1214** **BOWER, EILEEN C.** **168 LAKEVIEW AVE** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2091** **BOZIC, STANIMIR** **18 DOE VIEW LANE** **POUND RIDGE, NY 10576**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2121** **BRADSHAW, ANGUS** **70 FERRIS AVE** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1359** **BRANDON-REYNOLDS, FLORENCE** **81 POTTER AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2410** **BRATCHER, DAUNE** **92 HOMESTEAD PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1196** **BRISCO, LENWORTH** **3254 FENTON AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1863** **BRISSETT, CORDELL** **3904 PRATT AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1360** **BRITTO, JOHN** **455 CHAPPAQUA RD** **BRIARCLIFF MANOR, NY 10510**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2148** **BROOMES, ATHELSTON** **50 GUNION PLACE** **APT. 2D** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1103** **BROTEA, CRISTIAN** **10 COTTAGE PLACE,** **UNIT 3C** **WHITE PLAINS, NY 10601**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1787** **BROWN, GERALDINE** **428 TORRY AVE** **BRONX, NY 10473**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1361** **BROWN, JAMES C** **330 NORTH TERRACE AVE** **APT. #5** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1156** **BROWN, LORNA** **3638 PALMER AVE,** **3RD FLOOR** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2081** **BROWN, MICHAEL** **945 EAST 214TH ST.** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1253** **BROWNE, KAILASH** **30 MIDDLEBROOKS AVE** **TRUMBULL, CT 06611**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2368** **BROWNE, MICHAEL** **30 MIDDLEBROOK AVE** **TRUMBULL, CT 06611**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1212** **BRUEL, LUDIVINA** **50 GUION PL** **#8F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1153** **BRUNO, MARIA CECIL SM** **433 WENTZ ST** **KUTZTOWN, PA 19530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1922** **BRUNO, PETER J** **124 MAYFLOWER AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1822** **BRYANT, JAMES** **203 NORTH 9TH AVE** **APT 12** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1180** **BUCKLEY, EDNA** **P.O. BOX 710** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1797** **BUNTING, NICOLE** **92 MAIN ST** **APT 213** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2387** **BURFORD, MICHAEL** **408 BEDFORD AVE** **MT. VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1110** **BURGER, STEPHEN** **1874 PELHAM PKWY SO** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1079** **BURNS, MARK** **142 MT. JOY PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1155** **BURT-MILLER, YVONNE** **683 SO 5TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1947** **BYFIELD, MICHELLE** **749 E. 229TH STREET** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1812** **BYRD, DENISE** **20 CYPRESS POINT DR** **PURCHASE, NY 10571**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

Sheet **25** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1364** **CABIGON, JUNE R** **80 GUION PL** **APT 3-W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2092** **CADMAN, GREGORY** **36 HOLLY DRIVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100179** **CADOGAN, CHRISTINE** **905 E. 222 STREET** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2045** **CAMPBELL, CONSIE** **253 W 1ST STREET,** **#6** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2177** **CAMPBELL-GARDENER, LILA** **635 LAFAYETTE AVE** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1931** **CANCIO, MELENCIO** **80 GUION PL,** **#12N** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1366** **CANN, BARBARA CIEGLER** **3 CHURCH ST** **#703** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1712** **CANO, ANDREA** **2146 BARNES AVE** **APT 402** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100268** **CANO, JESSICA**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2009** **CAPELLAN, DAMARIS** **1 LINN PLACE** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

Sheet **27** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1368** **CAPOGNA, JENNY** **666 N TERR AV** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1832** **CAPUANO, NANCY** **710 VISTA ON THE LAKE** **CARMEL, NY 10512**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2040** **CARDENAS, LILIAN** **50 GUION PLACE** **APT. 3** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1370** **CARNIATO, DONALD E** **150 BUXTON RD** **BEDFORD HILLS, NY 10507**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100154** **CARO, ROBERTO** **2505 AQUADUCT AVE** **#1A** **BRONX, NY 10468**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1028** **CASINO, JOSEPH** **22 STONE FENCE** **STAMFORD, CT 06903**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1074** **CASSIDY, AMY KAVANA** **110 BROOKSIDE PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100041** **CASTILLO, FERNANDO** **64-57 230TH STREET** **BAYSIDE, NY 11364**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2154** **CASTILLO, KATHLEEN** **79-17 154TH STREET** **FLUSHING, NY 11367**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2319** **CASTILLO, LESLIE** **3040 WATERBURY AVE** **2ND FLOOR** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **3185** **CASTRO, HENRY** **5 EAST 196 STREET** **APT. 208** **BRONX, NY 10468**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2327** **CATALANO, JOSEPHINE** **301 PELHAMDALE AVE.** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1937** **CERMELE TURCO, ANGELA** **18 CLAUDET WAY** **EASTCHESTER, NY 10709**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1372** **CHACKO, RACHEL** **139 SUNHAVEN DRIVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2084** **CHANDER, BINA** **30 MIDDLEBROOKS AVE** **TRUMBLL, CT 06611**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100020** **CHARLES, NAVINA** **138 ALTA AVE** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1733** **CHEATHAM, ROCHELLE** **45 SO. 7TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2485** **CHERY, MAGALY** **88-26 205TH STREET** **HOLLIS, NY 11423**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100350** **CHHETRI, MAMTA** **50 GUION PLACE** **#3G** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100206** **CHIODI, JOANNE** **32 COLBY LANE** **BRIARCLIFF, NY 10510**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100614** **CHIRUMAMILLA, VASU** **8 SAMANTHA WAY** **WEST NYACK, NY 10994**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2217** **CHISOLM, PATRICIA** **47 SOULICE PLACE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100051** **CHIU, DOREEN** **43-14 163 STREET** **FLUSHING, NY 11358**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2213** **CHRELASHVILLI, MAIA** **2249 83RD ST,** **#B5** **BROOKLYN, NY 11214**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100577** **CHUA, MILTON MARVIN** **127 WASHINGTON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

Sheet **32** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100134** **CHUA, RUTHIE M** **80 GUION PLACE** **APT. 10T** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100105** **CHURCH, KALLIE** **379 SOMMERVILLE PLACE** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2324** **CIASTON-MURPHY, LINDA** **24 COLUMBIA PLACE** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1207** **CIFERRI, MICHAEL** **67 HIGHBROOK AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1376** **CIOFFI, BEVERLY** **14 SENATE PL** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Sheet **33** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2415** **CIPRIAN, CHRISTINE** **2 WYNDOVER WOODS LANE** **#7** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2062** **CIVITANO, MARC** **139 HART AVE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100557** **CLARKE, COLIN** **302 WEST 152 STREET** **#5B** **NEW YORK, NY 10039**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2353** **CLARKE, GWENDOLYN** **1009 E. 222ND ST.** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1378** **CLARKE, HORTENSE** **11 BRIARCLIFF RD** **NEW CITY, NY 10956**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1438** **CLARKE, LORRAINE** **442 SOUTH 9TH AVE** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2108** **CLARKE, SIDONEY** **246 CENTRE AVE** **APT 4J** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100482** **CLEARY, JAMILA** **2187 HOLLAND AVE** **#3M** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2097** **CLOUGH, THOMAS** **225 LORING AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2149** **COCKERHAM, EDNA** **1600 METROPOLITAN AV** **APT 6A** **BRONX, NY 10452**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2196** **COHAN, JAN** **43 DAVENPORT AVE** **APT 3B** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100072** **COLASACCO, MARNIE**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1941** **COLEMAN, JESSICA** **127 PATMORE AVE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100119** **COLEMAN, MICHAEL** **127 PATMORE AVE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2422** **COLEMAN, PORTIA** **420 JANE STREET** **FORT LEE, NJ 07024**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100059** **COLETY, RICHARD** **20 CHESTER PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1321** **COLL, MARGARET** **31 SOMMIT AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1883** **COLLINS, VELETTA** **230 PELHAM ROAD** **APT 2R** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1861** **COLON, WILMER** **2011 HOBART AVE** **APT 2F** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3198** **CONJEEVARAM, SRINIVASULU** **166 PEARSALL DRIVE,** **#4C** **MOUNT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1380** **CONKLIN, BARBARA** **59 EMERSON AV** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1063** **CONNOLLY, ROBERT E** **147 - 40 CHERRY AVE** **FLUSHING, NY 11355**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2420** **COOMBS, ANDRINE** **64 LINCOLN AVE** **APT. # 1E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1101** **COOPER, JEROME** **92 WOOD HOLLOW LANE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100200** **CORNISH, LAURA M** **181 PEARSALL DRIVE** **#2C** **MOUNT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100136** **CORON, ROGER** **37 CARRINGTON DRIVE** **GREENWICH, CT 06831**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1308** **CORTESE, ANGELA** **31 GLOVER AVE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100598** **COSENTINO, JESSICA** **39 WILLOW AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1881** **COSENTINO, LAWRENCE** **32-12 AMPERE AVE** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **4055** **COURTIEN, ALEXANDRA** **122 THIRD AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

Sheet **39** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1382** **COUSINS, ALVA** **111 N 3RD AV** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1383** **COWAN, JUDITH** **147-43 230TH ST** **JAMAICA, NY 11413**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1882** **CRESPO, LUZ** **2352 CROTONA AVE** **APT. 2** **BRONX, NY 10458**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1752** **CRESPO, MILDRED** **2739 PEARSALL AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2029** **CRESPO, MIRNA** **2011 MORRIS AVE** **APT 3B** **BRONX, NY 10453**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100030** **CRISP, DANIEL** **50 GUION PLACE** **APT. 2C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2159** **CROWLEY, BARBARA** **7 EVERETT STREET** **EASTCHESTER, NY 10709**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2483** **CROWLEY, KRISTIN** **7 EVERETT ST.** **EASTCHESTER, NY 10709**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3302** **CRUZ, DANIEL** **PO BOX 1874** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2030** **CRUZ, ERNESTO** **121 FRANKLIN AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1872** **CRUZ, JOSE V** **3080 PARK AVE** **APT 3H** **BRONX, NY 10451**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2150** **CRUZ, MALENA** **330 N. TERRACE AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100354** **CRUZ, MICHELLE** **562 FOX STREET** **BRONX, NY 10455**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100553** **CRUZ, STEPHANIE** **25 WATERSIDE PLAZA** **BLDG. 10 APT. 15G** **NEW YORK, NY 10010**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1385** **CUDINA, ANITA** **1 DEFOREST CT** **VALLEY COTTAGE, NY 10989**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2079** **CUMBERBATCH, JUDY** **35 MAY STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1545** **CUMBERBATCH, MARGARET N** **140 PELHAM RD** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100165** **CUNNINGHAM, CLAUDETTE** **4734 BRONX BLVD.** **BRONX, NY 10470**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2103** **CUTIGNOLA, JEANINE** **1464 GEORGE STREET** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1650** **CYRIAC, JOSE** **221 DAISY FARM DRIVE** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1493** **D'ADAMO, CARMEN** **2319 DELANOY AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100520** **D'AMATO, MICHELLE** **36 VAN BUREN** **STONY POINT, NY 10980**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100055** **DACOSTA, DONNA** **160 REMINGTON PLACE** **APT. 3E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100583** **DAHAL, BINAYA R** **50 GUION PLACE** **APT 10F** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1927** **DAMEUS, MARIE JOSE** **40 EAST SIDNEY AVE** **APT 19C** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **44** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2486** **DASILVA, ANTONIO** **80 GUION PLACE** **APT. # 8R** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1529** **DASILVA, PILAR M** **80 GUION PL** **APT 8R** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1388** **DAVIS, MURIEL** **536 SO 7TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2256** **DAVIS, SHERINE** **4038 PRATT AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2071** **DAVIS-SMITH, ANA** **33 LINCOLN AVE** **APT 5A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **45** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100243** **DAWKINS, KEISHA** **655 E. 230 STREET** **APT. 6E** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100293** **DAY, RASHEEN** **141 NORTH 9TH AVE** **APT 4** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1726** **DE FREITAS, STELLA** **20 SUMMIT AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1389** **DE GUZMAN, VERINA** **50 GUION PL** **APT 10-B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2464** **DE JESUS, DIANA DELA CRUZ** **127 WASHINGTON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1223** **DE LENO, ROBERT** **21 MERTON ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1391** **DE ROSE, JOSEPH** **916 EDISON AVE** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2407** **DEBENEDITTIS, DOMENICA** **1600 YATES AVE** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100604** **DEDIVANOVIC, JENNIFER** **11 LAKE STREET** **APT 2U** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2332** **DEFRIETAS, LUMENGO** **380 LENOX AVE.** **APT.4D** **NEW YORK, NY 10027**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100502** **DEIGHAN, LUKE D** **2 FIVE OAKS LANE** **VALLEY COTTAGE, NY 10989**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1032** **DEJULIO, ELIZABETH** **26 FAIRVIEW PL.** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100605** **DEL GUERCIO, KATHLEEN** **14 PARK LANE** **RYE, NY 10580**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1500** **DELCONTE, FRANCESCA** **251 ROBINSON AVE** **1FL** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1090** **DELIANA, DANILA** **680 WEST BOSTON POST RD** **APT 3R** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1120** **DEMOSTHENES, MELEON** **148 PIXLEE PL** **BRIDGEPORT, CT 06610**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100360** **DEPIPPO, JOSEPH** **119 LAWRENCE AVE** **EASTCHESTER, NY 10709**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1203** **DERRY, MONIQUE** **45 CHARLES STREET,** **#3** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1393** **DESIR, CLAUDE** **58 SOUTH SECOND AVE** **APT. A4** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1247** **DESIR, FRANCIS** **74 SEARS AVE** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1996** **DEVERA, CECILIA M** **144 HOBART AVE** **PORTCHESTER, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1031** **DEVINE, PATRICIA** **8 HAGEMAN COURT** **KATONAH, NY 10536**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100161** **DHAR, YASMIN** **77 GLENWOOD AVE** **DEMAREST, NJ 07627**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1397** **DI SAPIA, AMERICO V** **151 MAYFLOWER AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100188** **DIAZ, ANA** **1423 121 STREET** **COLLEGE POINT, NY 11356**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2201** **DIAZ, JORGE** **1460 BRONX RIVER AVE** **#6E** **BRONX, NY 10472**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1730** **DIAZ, JORGE L** **2191 BOLTON STREET** **APT. 6A** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100018** **DIAZ, JOSE** **2191 BOLTON STREET** **APT. 6A** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1918** **DIAZ, LORRAINE C** **140 ALCOTT PLACE,** **#3A** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100129** **DIBUONO, AMANDA** **433 ROWAYTON AVE** **NORWALK, CT 06854**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1395** **DIBUONO, PHILIP** **49 HALCYON TERR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100626** **DIEYE, FATOU** **29 AVIS DRIVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1870** **DINO, CLARISSA A** **17 GRANANDA CRES.** **APT.22** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1398** **DISAPIA, NUNZIO** **256 SICKLES AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100485** **DIXON, DAYNA** **44 FOUNTAIN PLACE** **#6B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

Sheet **52** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1955** **DIXON, EDNA** **4330 WILDER AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100388** **DIZENZO, ROSEANNA** **76 DRAKE AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2171** **DJANIE, CHRISTIAN N** **57 GUINESS WAY** **HOPEWELL JUNCTION, NY 12533**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2452** **DOHERTY, CAROL ANN** **14 OVER HILL ROAD** **YORKTOWN HEIGHTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100483** **DOHERTY-SALERNO, CHERIE** **124 PILOT STREET** **#2** **BRONX, NY 10464**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1399** **DOIG, KEITH L** **50 GUION PL** **APT 11G** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1846** **DONNELLY, CLAIRE** **236 LORING AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2385** **DOS SANTOS, MARIA AUXILIA** **47 BEAUMONT CIRCLE** **APT 3** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1755** **DRAGO, CAMILLE A** **11 WINCHESTER OVAL** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1747** **DROZD-BASES, ALINA** **27 LIVINGSTON RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100576** **DRY, JULIA** **35 HIGHLAND AVE** **#2** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1400** **DUMOSMOG-ZABLAN, JOYLENE B** **50 GUION PL** **APT 8D** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1263** **DUNCAN, VIOLA** **308 SOUTH 6TH AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1798** **DUNCANSON, ELIZABETH** **100 PRIMROSE AVE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2499** **DUNN, SOPHIA** **645 E. 232 ST.** **APT. # 3D** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
							Subtotal (Total of this page) **0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2349** **DUPUIS, DEBORAH M** **11 PALMER AVE.** **CROTON-ON-HUDSON, NY 10520**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1033** **DUPUIS, PAMELA** **120 PROSPECT ST** **UNIT #37** **RIDGEFIELD, CT 06877**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1857** **EBONA, MARUJETA** **1177 SACKET AVE** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2435** **EDWARDS, ARNETTE** **31 CEDAR PL,** **3RD FLOOR** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1138** **EDWARDS, ELAINA** **80 COOPER DR** **APT 1A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100494** **ELEZAJ, TONY** **37 SECOND AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100392** **ELIEZER, WASLIN** **77 CENTRE STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1404** **ELLIS, ISABEL** **230 SO 7TH AVE** **#4C** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100080** **ELLIS, MARCIA** **3949 ROMBOUTS AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2011** **ENAYE, SOLOMON** **158 DRAKE AVE** **APT.19** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **57** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1848** **ENG, RITA** **22-40 128TH ST** **COLLEGE POINT, NY 11356**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2450** **ENGLISH, BLOOM J** **3573 BRONXWOOD AVE** **APT. 3** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1406** **ESCUDERO, GUILLERMO** **100 ASCH LOOP** **APT 12F** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100044** **ESPINOSA, FERNANDO** **70 VIRGINIA ROAD N.** **3B** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100497** **ESPINOSA, MELBA** **319 DAVENPORT AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1402** **EUGENE, EGUERNE** **650 MAIN ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2377** **EUGENE, JACKYVAN** **7 COUCH ST** **NORWALK, CT 06854**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1407** **EVANS, MILDRED O** **3307 HOLLYWOOD ST** **MOHEGAN LAKE, NY 10547**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2265** **EVANS, YANINA** **80 GUION PL** **APT 7T** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1840** **EVBUOMWAN, PETRUS** **71 RUMSEY RD** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **59** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1409** **FANELLI, FRANK** **70 LOCUST AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2183** **FASCE, SYLVIA** **57 POPLAR AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1410** **FATAL, PETER** **76 LOCUST ST** **BRIDGEPORT, CT 06610**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1055** **FEATHERS, PATRICIA** **158 LARCH ROAD** **BRIARCLIFF MANOR, NY 10510**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100266** **FELTON, DANNIE M** **50 GUION PL** **APT 11B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** **0.00**

Sheet **60** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100106** **FERGUSON, ALEXIS** **80 GUION PLACE** **APT. # 11P** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1715** **FERGUSON, AUDREY** **18 NO BOND ST** **APT 1C** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1285** **FERNANDEZ, MARIA** **50 GUION PL** **APT 4E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1905** **FERNANDEZ, REBECCA** **3300 PALMER AVE** **#414** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1413** **FERRARO, JOANN** **40 CHURCH ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100519** **FERRIS, TOREY** **5 BURMA ROAD** **MARLBORO, NY 12542**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3299** **FIORILLO, VICTOR J** **2 PUTNAM HILL** **APT 1A** **GREENWICH, CT 06830**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2427** **FLETCHER, NATASHA** **420 SOUTH 6TH AVE** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2352** **FLORES, JOSEFA** **72 JACKSON STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1703** **FORBES, EVERTON** **307 EAST 239TH ST.** **APT 4B** **BRONX, NY 10470**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1416** **FORDE, BRIAN** **2891 HEATHERCREST DR** **YORKTOWN HEIGHTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100629** **FORDE, SARAH A** **170 ELM STREET** **#3D** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2270** **FORREST, FRANCINE** **105 PARK AVE** **HARRISON,, NY 10528**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2033** **FOX, JENNIFER** **14 HIGHVIEW DRIVE** **CARMEL, NY 10512**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1024** **FOX, NORRIS** **947 SHORE ACRES DR.** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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Debtor

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

Wages, salaries, and commissions
TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2437** **FRANCIS, ASHLEY** **451 SECOND AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1226** **FRANCIS, WINSTON** **730 E. 236 STREET** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1879** **FRANK, JENNIFER E** **1514 LIBRARY AVE** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100264** **FRECKLETON, ALEX** **4105 DEREIMER AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2340** **FREEMAN, KAREN** **80 GUION PLACE** **APT. 10U** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1423** **FRIMPONG, KWAME** **2 COBBLING ROCK DR** **KATONAH, NY 10536**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1687** **FULLER, ANDREA** **99 BEEKMAN AVE,** **2ND FLOOR** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100449** **FULLER, KAMICA S**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1424** **FULLER, LOUIS** **53 BOWMAN AVE** **RYE BROOK, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1425** **FURGIUELE, MONICA** **30 FRANKLIN AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100227** **FURMAN, SHARON** **765 N. BROADWAY** **#4B** **HASTINGS, NY 10706**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100049** **GAISI, LAILA** **337 GRANDVIEW BLVD.** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1915** **GALINDO, JEFFERSON** **37 LINCOLN STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1147** **GALLAGHER, JAMES** **110 VALENTINE LANE** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1825** **GALLICANO, JUDY** **54 RONALDS AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

Sheet **66** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1525** **GALVEZ, MARIA C** **50 GUION PL** **#4C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2227** **GANICHE, BEKER L** **302 LOCUST ST** **TEANECK, NJ 07666**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100479** **GARAN, ARED** **10 WESTERLY LANE SOUTH** **THORNWOOD, NY 10594**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100294** **GARCIA, JILLIAN**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2316** **GARCIA, MARTHA** **4544 RICHARDSON AVE** **BRONX, NY 10470**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100336** **GARCIA, YOHANNA** **3495 FENTON AVE** **#3B** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100321** **GARD, ELISA M** **80 GUION PL** **APT 6X** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3910** **GARVEY, RICHARD** **104 PEACE STREET** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1229** **GAYLE, PETA-ANN** **3946 DURYEA AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100566** **GEDAL, ALEKSANDRA** **50 GLENBROOK ROAD** **#10F** **STAMFORD, CT 06902**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **68** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims							Subtotal (Total of this page) **0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2506** **GEGA, VJOLLCA** **1828 PARKVIEW AVE** **APT. # 2F** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1184** **GEHRUNG, LISA** **20 ACORN ROAD** **BREWSTER, NY 10509**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1034** **GENDLER, SETH** **29 SPRINGDALE RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1077** **GENNARELLI, LOUIS A** **241 E 86TH STREET** **NEW YORK, NY 10028**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1738** **GENOVESE, JONATHAN** **2955 GRAND CONCOURSE** **A42** **BRONX, NY 10468**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1938** **GEORGE, BINU C** **50 RUMSEY ROAD** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1427** **GEORGE, SARAMMA** **62 ARGYLL AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1428** **GEORGE, SUSAMMA K** **78 PENGILLY DR** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2367** **GEORGE, TERRILL S** **161 VAN CORTLAND PARK AVE** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2054** **GEORGE, TOBIN** **161 VAN CORTLAND PRK, AVE** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100575** **GINO-GINO, LEILA D** **50 GUION PLACE 2E** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2096** **GINSBERG, DANIEL** **12 TAUNTON RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2088** **GIORDANO, MICHAEL** **14 ORMOND STREET** **ROCKVILLE CENTER, NY 11570**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1099** **GITLER, BERNARD** **26 PRINCE WILLOWS LA** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1035** **GLASSMAN, MARK S** **7 MAGNOLIA DR** **RYEBROOK, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **71** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **3106** **GLORI, DINA** **226 CONCORD ROAD** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1959** **GLYNN, JASON** **163-25 130TH AVE** **APT # 11A** **JAMAICA, NY 11434**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1431** **GOCO, FE CORAZON** **46 ROCKLAND PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100362** **GODFREY, LEO** **33 SOUTH HIGH STREET** **#3N** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1674** **GOEHL, ELIZABETH** **3410 LORELEI DR** **YORKTOWN HTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1231** **GOLDING, SHARON** **118 LINCOLN AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3173** **GOLDING-LEWIS, TALIA** **156 WINTHROP AVE** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100332** **GOLDSTEIN, ROBERT** **31 GREENRIDGE AVE** **APT 3L** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1432** **GONZALEZ, IRIS** **80 GUION PL** **APT 7-P** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1953** **GONZALEZ, MELVA** **257 VALENTINE LANE** **APT B1** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1988** **GONZALEZ, ONIDIS** **800 CONCOURSE VILLAGE** **APT 16A** **BRONX, NY 10451**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1831** **GOODEN, DOROTHY** **P.O. BOX 1202** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1270** **GOODLOE, CARIDAD** **1579 METROPOLITAN AVE,** **#MH** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2776** **GOODMAN, LINDORA** **626A E. 226 STREET** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2147** **GOODMAN, VINNETT** **141 S. 10TH AVE,** **2ND FLOOR** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1433** **GORDON, LORENA** **304 FIRST AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2173** **GOULBOURNE, O'NEIL** **217 DRAKE AVE** **#1E** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1434** **GOURCHANE, ANGELA** **541 JEFFERSON AVE.** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100509** **GRADDICK, JOVAN** **1336 FTELEY AVE** **1ST FLOOR** **BRONX, NY 10472**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1436** **GRAHAM, RONALD** **50 GUION PL** **APT. 3D** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1727** **GRANDISON, RICHARD** **120 CASALS PLACE** **APT 26 - K** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1437** **GRANT, BEULETTA** **157 SICKLES AV** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1405** **GRANT, GWYN** **17 HARTFORD AVE** **GREENWICH, CT 06830**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2064** **GRAY, LEE LA DEE** **829 ADEE AVE** **APT. 1C** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1439** **GREEN, HAZEL** **345 MAIN ST** **#7L** **WHITE PLAINS, NY 10601**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1248** **GREEN, LORNA** **2977 EDSON AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100169** **GREENBERG, KIMBERLY** **7 BALINT DRIVE** **#717** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1442** **GREGORY, TOMMY** **33 NORTH 3RD AVE,** **#2M** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2571** **GREIGER-ZANLUNGO, PAULA** **1333 SOMERSET RD** **TEANECK, NJ 07666**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100208** **GRESSEAU, SHIRLEY** **40 MEMORIAL HIGHWAY** **APT. 32F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1401** **GRIFFIN, LISA A** **78 GRIFFIN PL** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1444** **GRIFFITH, JOAN A** **195 HILLCREST RD** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100285** **GRIFFITH, TAIWO** **1008 NORTH AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1702** **GRIMES, PAULINE** **37 ROCHELLE PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100240** **GRINSHPUN, DMITRIY** **65-65 WETHROLE STREET** **APT 6Y** **REGO PARK, NY 11374**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2267** **GROSSBERG, GAYLE** **138 EAST 112TH ST** **APT 1C** **NEW YORK, NY 10029**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1445** **GROSSO, MARY-LOU** **41 ACORN TER** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1446** **GUANZON, LEA A** **80 GUION PL** **#8N** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1447** **GUGLIELMO, DEBORAH** **51 STONELEA PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100226** **GUMPEL, CAROLYN** **490 BLEEKER AVE** **#4F** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100349** **GUPTA, SANJEEV** **515 W. 59TH STREET** **#9L** **NEW YORK, NY 10019**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100539** **GUTMAN, DAVID** **235 E. 85TH STREET** **#10F** **NEW YORK, NY 10128**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1987** **GUZMAN, TERESITA** **501 PELHAM ROAD** **APT. 3A** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1318** **HALL, EDWIN** **118 LINCOLN AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1449** **HALL, FRANCIS X** **15 ST JOSEPH ST** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1036** **HALPERN, MICHELE** **961 GREEN MEADOW LN** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100045** **HAMILTON, PERISSA** **68 RIDGEVIEW AVE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2006** **HAMM, ANGELLA D** **4078 EDSON AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1252** **HAN, HUNG-CHAU** **65-45 183RD ST** **FRESH MEADOWS, NY 11365**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100508** **HANCOCK, THOMAS** **2110 HERMONY AVE** **BRONX, NY 10473**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1221** **HANSEN, CHRISTINA** **12 PHILLIPS ST.** **BEACON, NY 12508**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **5119** **HANSER, BENEDICTE** **307 LORING AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100215** **HANSON-MCINTOSH, MEEKLYN** **1336 FTELEY AVE** **BRONX, NY 10472**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100472** **HANTMAN, IAN** **400 E. 84 STREET** **3A** **NEW YORK, NY 10028**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1387** **HARJU, ROCHELLE** **87 UNION ST** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2189** **HARRIS, THEODORE** **75 LASALLE ST** **APT 10E** **NEW YORK, NY 10027**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1732** **HARRIS, ZACHARY** **1050 EAST 225TH ST,** **1ST FLOOR** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2663** **HARVEY, NANCY** **72 POMONA ROAD** **SUFFERN, NY 10901**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100311** **HASHEMI, PANTEA** **518 E. 80TH STREET** **#5H** **NEW YORK, NY 10075**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1451** **HASKETT, DEREK** **5 KNOLLWOOD AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1452** **HASKINS, SALLY** **300 PALISADE AVE,** **#1F** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100302** **HASSAN, KHALED** **71 HOOVER DRIVE** **CRESSKILL, NJ 07626**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1179** **HAWKES, KAREN** **50 GUION PL** **APT 6H** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1244** **HENRIQUES, CHESTER** **1 WHITTIER AVE** **CORTLANDT MANOR, NY 10567**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2164** **HENRY, JOHN** **124 REMINGTON PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester** Case No. **13-22840**

Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2408** **HENRY, NICOLE** **4444 BAYCHESTER AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100231** **HENRY-SMITH, SONIA D** **203 LINCOLN AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2166** **HERNANDEZ, ISMAEL** **47 ROCHELLE TERR** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100086** **HERNANDEZ, MARYLU** **531 EAST LINCOLN AVE** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1453** **HERNANDEZ, SAUL** **89 LAUREL PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1009** **HERZBERG, GILBERT Z** **31 VILLA RD** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1181** **HEWITT, MAXINE** **300 GRAMATAN AVE** **APT. A9** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1696** **HIDALGO, JOHN** **126 CHURCH STREET** **APT 6B** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100196** **HIJAZIN, EYAD** **2365 BOSTON POST RD** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100435** **HIMELSTEIN, LEONARD** **6 DAVIS AVE, A41** **RYE, NY 10580**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2019** **HINDS, AUDREY** **113 FRANKLIN AVE,** **2F** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100631** **HINDS-WHITE, GILLIAN A** **44 THIRD AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1455** **HINES, GREGORY** **10 ALTA DRIVE** **BRONXVILLE, NY 10708**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2260** **HO, KIMBERLY** **69-42 225TH ST.** **BAYSIDE, NY 11364**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1790** **HOLCOMB, LAWRENCE** **80 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1877** **HOLDIPP, CLAUDETTE** **244 WEST POST ROAD** **APT G2** **WHITE PLAINS, NY 10606**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2374** **HOLLOWAY, MELODY** **3376 FENTON AVE** **APT. # 2F** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1262** **HOLMES, CYNTHIA** **650 MAIN STREET,** **#2DD** **NEW ROCHELL, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1059** **HOLSTEIN, STANLEY** **140 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100265** **HOROWITZ, JEFFREY** **144-40 72ND STREET** **FLUSHING, NY 11367**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2120** **HORTON, LATOYA** **59 CRESCENT STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2047** **HOUSEN, JASSETT M** **3009 ELY AVE,** **2ND FLOOR BOX - 11** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2141** **HOWE, SIMONE** **140 ASCH LOOP** **6A** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1150** **HOWELL, BARBARA** **17 FIFTH AVE** **APT. 65** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2134** **HOYTE, ALMENA** **147 WASHINGTON ST** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100242** **HUDSON, KIRK** **3482 WILSON AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1809** **HUVANE, ANASTASIA** **2500 JOHNSON AVE** **APT 12M** **BRONX, NY 10463**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1457** **HUVANONDA, PHASOOK** **80 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1853** **IANNONE-LEHRIEDER, LISA** **5 WINCHESTER AVE.** **APT.1B** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2314** **IDOLOR, ESIMA** **228 BLAIR AVE,** **3RD FLOOR** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2002** **INDELICATO, ROSE ANNE** **73 TOWN GREEN DR** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1459** **IRBY, JANICE** **50 GUION PL** **APT 5J** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100599** **IRVING, MARLENE** **524 PEEKSKILL HOLLOW RD** **PUTNAM VALLEY, NY 10579**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1025** **IRVING, TOM** **524 PEEKSKILL HOLLOW RD** **PUTNAM VALLEY, NY 10579**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1944** **ISAAC-PAGE, TISHA** **3637 BRONXWOOD AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1472** **JACOB, ANNAMM M** **114 EMERSON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1682** **JACOB, LIZY** **5 INDIAN TRAIL** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100120** **JACOB, NITHU E** **800 BRONX RIVER,** **# A52** **BRONXVILLE, NY 10708**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1462** **JACOB, ROYMOLE** **115 EMERSON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1908** **JACOB, SUNITHA** **585 NORTH AVE** **2ND FL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1880** **JARRETT-ELLIOTT, NORMA** **20 LORRAINE AVE,** **#8** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1078** **JARVIS, TAMISHA** **4127 WICKHAM AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2271** **JARVIS, TEMECA** **4127 WICKHAM AVE.** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1211** **JAWOSZEK, HELEN** **56 LEONARD ST** **PORT CHESTER, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100592** **JAZAYERI-MOGHADASS, BENHAM** **21 DAVENPORT AVE** **#2D** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2018** **JEFFERSON, DARNELL** **40 MEMORIAL HIGHWAY** **APT 31C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1038** **JESMAJIAN, STEPHEN** **121 EDGARS LANE** **HASTING ON HUDSON, NY 10706**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2221** **JESSAMY, BRIDGET** **155 SEARS AVE** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2161** **JIN, JING** **167 CENTRE AVE.** **APT. 3C** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2114** **JIN, YU** **211 RAFF AVE** **CARLE PLACE, NY 11514**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100241** **JOB, ANNAMMA** **345 BRONX RIVER ROAD** **APT. 6F** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1464** **JOHN, ALEYAMMA** **846 WEBSTER AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2101** **JOHN, MARIAM RAJESH** **104 WENDOVER ROAD** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2144** **JOHNSON, ALICIA** **3360 BRUNER** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1193** **JOHNSON, ROBERT** **2227 CHERRY LEAF LN.** **SILVER SPRINGS, MD 20906**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions
TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1467** **JONES, ALAN E** **58 REMINGTON PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1468** **JONES, DAVID** **50 GUION PL** **APT 5F** **NEW ROCHELLE, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2028** **JONES, MICHELLE** **570 5TH AVE** **APT 1F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1152** **JONES, PRINCE** **421 SO. COLUMBUS AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1469** **JONES, SHELLYANNE** **550 5TH AVE** **APT 3F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1470** **JONES, SHIRLEY D** **413 GARDEN AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1974** **JONES, SOPHIA** **17 AMUNDSON AVE** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2073** **JONES, THERESA** **951 WOODYCREST AVE** **APT 5D** **BRONX, NY 10452**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1929** **JORDAN, ROSALIND P** **214 5TH AVE** **APT 3** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1471** **JOSE, SUSAMMA** **24 WOODGLEN DRIVE** **MAHOPAC, NY 10541**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1159** **JOY, ALICE A** **14 SHORT LANE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100197** **JOY, JUSTIN** **2 AUDUBAN COURT** **WEST NYACK, NY 10994**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100056** **KAJA, NERTILA** **14 MINNA STREET** **STATEN ISLAND, NY 10304**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2409** **KAMBA, NENE** **230 W. 111 ST.** **APT. # 5C** **NEW YORK, NY 10026**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2094** **KAMINER, RUTH** **10 BYWORTH RD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1479** **KANTOR, ROBERT J** **60 LOCUST AVE** **APT #107** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100061** **KARABEL, LORETTA**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1015** **KARANFILIAN, RICHARD** **5 CREEMER ROAD** **ARMONK, NY 10504**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100054** **KARAVATTE, JACOB** **650 MAIN STREET** **APT. 3C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1369** **KAROUNOS, ROSITA** **245 ELM ST** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100075** **KASHAMBUZI, MICHELA** **137 CLAREMONT AVE** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100476** **KASNECI, MIMOZA** **225 WINFRED AVE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1829** **KATT, MARGUERITE** **3528 GOMER ST** **YORKTOWN HTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100563** **KATZ, LEAH** **875 W. END AVE** **3G** **NEW YORK, NY 10025**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2245** **KAUR, NAVNEET** **52 HOWARD PKWY** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1081** **KAZANSKAYA, ANNA** **281 GARTH ROAD** **APT C2D** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2419** **KELLY, HILARY** **89 KING AVE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1100** **KELTZ, THEODORE** **50 VANEHAN BLVD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1967** **KERR, KERETH** **16 ROSEDALE STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1482** **KHAN, ABDULYALIN** **5-7 NORTH 9TH AVE** **APT C7** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100377** **KHANGURA, HARKINDER K** **40 MEMORIAL HIGHWAY** **#40** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100554** **KHITHANI, AMIT** **1775 YORK AVE** **APT. 26C** **NEW YORK, NY 10128**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1061** **KLASS, STEPHEN** **421 HUGUENOT ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2343** **KLUFIO, THEODOSIA** **531 E. LINCOLN AVE.** **APT. 5C** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100498** **KNOWLES, TYRELL** **94 ORCHARD STREET** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1477** **KOLLER, VICTORIA** **27 PARK RIDGE AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1750** **KOOTTUMATHA, SHIJU V** **1235 BRUCE ST.** **ELMONT, NY 11003**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1484** **KOSHY, MARIAMMA** **7 BONNIE MEADOW RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1485** **KOSHY, SHAJI** **45 LOGANS WAY** **HOPEWELL JCT, NY 12533**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2190** **KOWALESKI, ANGELA** **171 MORSEMERE AVE** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1487** **KRUMSOONGNOEN, RACHOD** **333 RICH AVE** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1488** **KUHN, ALYSSA** **300 PELHAM RD 7-0** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1567** **KUHN, COURTNEY** **401 CHESTNUT AVE** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1722** **KUJABI, MOMODOU** **1157 WHEELER AVE,** **#2R** **BRONX, NY 10472**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1186** **KURIAKOSE, DAISY** **19 CORNELL DRIVE** **HARTSDALE, NY 10530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1287** **KURIAN, ANNA** **100 SURREY DRIVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100401** **KWON, HYE-EUN** **3 HIGHVIEW DRIVE** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1891** **LAGARDE, DIANA** **2 DIKE DRIVE** **WESLEY HILLS, NY 10952**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1574** **LAGUATAN, GWENDOLYNN R** **50 GUION PL** **#4H** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100331** **LAGUERRE-SIMON, KERBY** **55 WEST 7TH STREET** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1684** **LAKOVIC, SNEZANA** **2040 BRONXDALE AVE** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1084** **LAKSHMI, KAMESWARI** **218 VICTORY BLVD.** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2366** **LAM, SIMEE** **221 LONGVUE TERRACE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1490** **LAMANNA, DIANE** **40 ROCKLAND PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2413** **LAMBERT, PENNY J** **4000 LOWERRE PLACE** **APT. # D1** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100147** **LAMSEN, MARIE** **80 GUION PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2022** **LANDAU, JOHN** **8 COUNTRY RIDGE DR.** **N. RYE BROOK, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1723** **LANDRINE, ALIEAN** **P.O. BOX 14** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100585** **LANE, DEBORAH M** **1162 CROSBY AVE** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1040** **LANGBEIN, BARBARA** **40 ROBINS CRESCENT** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2503** **LANTIGUA, MONIQUE** **237 BENNETT AVE** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100232** **LARIOS-CASTILO, JOSE** **1521 WHITE PLAINS RD** **APT. 4C** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2153** **LARMON, DAVID** **130 WHITNEY AVE** **TRUMBULL, CT 06611**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1491** **LASHLEY, GLORIA** **245 S 5TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1771** **LATOUCHE, MAXINE** **10 ORCHARD PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100417** **LATTIMORE, BRIAN** **191 OAK STREET** **APT. 2C** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100079** **LAWRENCE-JOSEPH, CECELIA** **3466 EASTCHESTER RD** **APT. #2** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3297** **LAWSON, KATHERINE** **450 HIGHLAND AVE,** **2ND FLOOR** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100082** **LAYNE, DONNA** **712 EAST GUNHILL RD** **APT # 5E** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1301** **LEAL, ANA** **80 GUION PLACE** **APT 9S** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100274** **LEAVY, FARRON** **31 COLIGNI AVE** **#3C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1001** **LEDERMAN, JEFFREY A** **211 BARNES ST** **OSSINING, NY 10562**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100425** **LENNON, CHELSEA** **33 HUGENOT ST** **2ND FLOOR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1311** **LENNON, CHRISTINA** **33 HUGUENOT ST** **2ND FLOOR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1625** **LEON, YENNY M** **65 NETHERMONT AVE** **N. WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1494** **LEPORE, MARYLU** **32 EDGEWOOD PARK** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3744** **LEUNG, MICHELLE** **37 ROCK SPRING RD** **STAMFORD, CT 06906**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1010** **LEVITT, MARGARET** **50 ELK AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1495** **LEWIS, GLORIA** **51 HIGHLAND RD** **THORNWOOD, NY 10594**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1496** **LEWIS, HUGH** **283 RICH AVE** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1979** **LEWIS, SANDRA M** **3216 WILSON AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1497** **LINDSAY, DOUGLAS** **33 HILLSIDE AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2015** **LINDSAY, FIORENTINA** **33 HILLSIDE AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1958** **LINDSAY, SUSANNE** **80 GUION PLACE** **APT. 7X** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100314** **LING, JIE** **80 GUION PLACE** **APT. 8M** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1154** **LINTON, THERESA** **15 ADAIR ROAD** **CORTLANDT MANOR, NY 10567**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1086** **LISS, MARK** **115 EAST 86TH ST** **NEW YORK, NY 10028**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1199** **LIVERZANI, STEPHANIE** **1339 BIRCH HILL LN** **APT 1-I** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1342** **LJULJIC, JOHN** **93 FALMOUTH RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1824** **LLOYD, JIMMIE** **14L SPRINGVALE RD** **CROTON-ON-HUDSON, NY 10520**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100556** **LOMBARDI, ADRIANA** **1667 WOODLAND AVE** **EDISON, NJ 08820**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2104** **LONDON-WOODS, WILLETTA** **60 MORROW AVE** **APT #3GS** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2010** **LOPEZ, ESTHER** **19 LAWN AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1765** **LOPEZ, TERESA** **139 FARMERS AVE** **LINDENHURST, NY 11757**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1503** **LORDE, MARCIA** **50 GUION PL** **APT 7F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1504** **LORETONI, ELAINE** **151 MAYFLOWER AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1144** **LOVISHUK, VALERA** **57 DALEWOOD AVE** **FAIRFIELD, CT 06824**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1056** **LOW, MURRAY** **15 SPRINGDALE RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100601** **LUCAS, TAMIKA T** **349 S. 2ND AVE** **3RD FLOOR** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3369** **LUCIANO, CECILIA** **14 GRANT AVE** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1741** **LUGO, ANGELA** **1842 COLDEN AVE,** **2ND FLOOR** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1683** **LUKE, PAMELA** **81 WINTHROP AVE** **APT. 2E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100565** **LUNA, RONALD** **50 GUION PLACE** **2A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1505** **LUNDE, RICHARD** **10 DAVENPORT AV** **APT. 1K** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1506** **LUNDY, VALERIE** **80 GUION PL** **APT 105** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1278** **LUTTER, PATRICIA** **70 PHILLIPS LN** **PEARL RIVER, NY 10965**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1004** **LYO, ROSIE** **1648 LURTING AVE** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **4070** **MAC DONALD, COLLEEN** **660 SCARSDALE RD** **TUCKAHOE, NY 10707**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1003** **MAFFUCCI, LEONARD** **92 ROSEHILL AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1141** **MAGALDI, THOMAS** **200 CAPITOL AVE** **WILLISTON PARK, NY 11596**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1680** **MALDONADO, VIONETTE** **120 ERSHINE PL** **APT 3E** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1933** **MALTESE, LIZA** **51 WOODLAND AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1041** **MAMANGAKIS, JOHN** **50 FULTON AVE** **RYE, NY 10580**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1022** **MANDEL, MICHAEL** **33 CROFTS LANE** **STAMFORD, CT 06903**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1509** **MANGIERI, ELEANOR** **2437 BEDFORD ST,** **UNIT F-6 BLDG 20** **STAMFORD, CT 06905**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1510** **MANIGAULT, RODNEY** **10 MONITOR RD** **POUGHKEEPSIE, NY 12603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100632** **MANNING, HEDDA R** **11 SOUTH 10TH AVE** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100382** **MANOHAR, SANDHYA** **50 GUION PLACE** **#2G** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2481** **MARAGH, DAVID** **629 KAPPOCK** **BRONX, NY 10463**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1736** **MARCUS, AMY** **190 GARTH RD,** **#TQ** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2129** **MARINELLI, ANNA** **10 SEVENTH STREET** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1075** **MARRERO, LISA A** **30 HARVARD CT** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100121** **MARROQUIN, AMANDA** **6 MOUNT JOY PLACE** **APT. 3** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1217** **MARROQUIN, EDELMIRA** **541 PELHAM ROAD** **APT 4-0** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1171** **MARSHALL, LEON** **710 EAST 235TH ST** **APT C5** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1819** **MARTIN, ALLYSON** **10 EASTCHESTER RD** **APT 1G** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2165** **MARTINEZ, ANDY** **2185 VALENTINE AVE** **BRONX, NY 10457**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100528** **MARTINEZ, NATALIA** **646 UNDERHILL AVE.** **2ND FLOOR** **BRONX, NY 10473**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100337** **MARTINO, ROSEMARY** **31 HUDSON WATCH DR** **OSSINING, NY 10562**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1167** **MARTINS, MARIA** **55 RAMSEY AVE** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1304** **MARTYNIAK, MARCELLA** **20 QUEENS WAY** **MAHOPAC, NY 10541**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2082** **MASCOLL, MARLEEN** **112 UNION AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2027** **MATHAI, ALEXANDER** **650 MAIN ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1511** **MATHEW, ANN** **31 WOODSHALL DRIVE** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1512** **MATHEW, JOLLY** **229 MAYFLOWER AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1934** **MATHEW, LEELAMMA** **93 FOURTH ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2060** **MATHEW, LEENA** **16 SIMPSON PLACE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2055** **MATOS, JENNY** **555 FOX ST** **BRONX, NY 10455**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1093** **MATOS, MARSHALL** **115 ROLLING WAY** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100450** **MAUCIERI, DANIELLE** **10 COTTAGE PLACE** **APT. 8F** **WHITE PLAINS, NY 10601**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1513** **MAYARD, DUDRO** **108 FOURTH ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1299** **MAZZA, ANNE** **187 KIMBALL TR** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1843** **MC CARTHY, PATRICK L** **124 PELHAMDALE AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2246** **MC CREA, COLISA** **4028 EDSON AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2494** **MC ENTEE, EVA** **27 FLOWER ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1772** **MC FARLANE, MARY** **329 SOUTH 8TH AVE** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1514** **MC GHEE, CAROLYN** **28 WEST MINISTER CT** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1386** **MC GRANE, VALERIE** **18 ALPINE RD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1486** **MC GRATH, LORRAINE** **17 FOURWINDS DR** **POUGHKEEPSIE, NY 12603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1865** **MC KENNA, DEBBIE** **70 LOCUST AVE** **APT. # B402** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1516** **MC LEER, SUSAN** **6 ROSEDALE AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100446** **MCCAFFREY, TIMOTHY** **4 LOUIS LANE** **CROTON ON HUDSON, NY 10520**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1053** **MCKAY, KATHLEEN ANNE** **19 SYCAMORE ST** **MELVILLE, NY 11747**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1205** **MCKEE, MARY** **67 VIRGINIA PL** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2315** **MCKITTY, VINCENT** **390 GURDON ST** **BRIDGEPORT, CT 06606**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1518** **MCLEOD-GORDON, MERCELYN Y** **65 IRVING PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100465** **MCNEIL, WILLIE** **P.O. BOX 1851** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1072** **MCWILLIAM, JAMES** **45 WAINWRIGHT ST** **RYE, NY 10580**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1043** **MEACHAM, KEVIN** **9 SILVER STREAM DR.** **W. HARRISON, NY 10604**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1257** **MEDFORD, CAROL** **485 WEBSTER AVE** **APT A10** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1098** **MEDINA, EMMA** **170 COLIGNI AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1520** **MEHTA, RASHMIKANT** **435 OXFORD RD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100574** **MEHTA, SHIKHA** **950 49TH STREET** **#7E** **BROOKLYN, NY 11219**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1901** **MELE, ANTONIO** **230 ELM STREET** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1686** **MELICIO, CRISANTA** **23 LEATHER STOCKING** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2156** **MELVIN, PATRICE** **300 GRAMATAN AVE** **APT. 35C** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1240** **MENA, KEVIN** **35 WOODLAND AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1539** **MENON, SREEDEVI** **650 MAIN ST** **APT 2EE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1236** **MERCADO, MARTA** **444 2ND AVE** **#16B** **NEW YORK, NY 10010**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1775** **MERCED, MARILYN** **446 E. 176TH ST.** **#12** **BRONX, NY 10457**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1842** **MERILUS, ETHLYN** **30 LINDEN BLVD** **APT. D7** **BROOKLYN, NY 11226**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1292** **MERRITT, NANCIE** **20 PELHAMSIDE DR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1523** **MICELI, CONSTANCE** **1305 SHELBURNE AVE** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100171** **MIHOVIC, GEORGE** **127 PARK AVE** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1095** **MILLER, DONALD** **1 AVON ROAD** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
							Subtotal (Total of this page) **0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1198** **MILLER, KELLIE** **240 SOUTH 7TH AVE** **APT 7D** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1066** **MILLER, MARIAN** **188 GARTH RD TW** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1273** **MILLER, MAUREEN** **10 PLYMOUTH RD** **FISHKILL, NY 12524**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1125** **MINOWITZ, LAWRENCE S** **140 EINSTEIN LOOP** **APT. 10G** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1125** **MINOWITZ, LAWRENCE S** **140 EINSTEIN LOOP** **APT. 10G** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1148** **MINZIE-CHAPPELL, PAULET** **749 EAST 229 ST.** **APT 3** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1528** **MITCHELL, JENNIFER** **360 7TH AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1305** **MITCHELL, RENELLA** **50 GUION PLACE** **APT 6J** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1895** **MODUPE, OLUWATOYIN** **72 CINDER ROAD** **STONY POINT, NY 10980**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1710** **MOHALLAND, SIMONE** **809 E 213TH ST** **#1** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1157** **MOHANAN, SHEEBA** **14 GLEN PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2383** **MOKBEL, ADNAN R** **51 MINERVA DR** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1175** **MOLINA, ROSEMARIE** **44 PARK AVE** **#43** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1531** **MONTANO, MARIA** **50 GUION PLACE** **APT. # 11H** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1745** **MONTECILLO, LILY** **2030 MAYFLOWER AVE** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1942** **MONTEQUE, ALICIA M** **507 SOUTH 11TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100507** **MONZIDELIS, NICOLLETTE** **69 SHORE DRIVE** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1533** **MOORE, JACQUELINE** **2 WASHINGTON SQ,** **1C** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2358** **MOORE, JASMINE** **160 EAST 4TH ST.** **APT 1-A** **MT. VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2300** **MORALES, ALEXANDRA** **40 MORINGSIDE AVE.** **YONKERS, NY 10703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2247** **MORALES, JESUS** **1 STANTON COURT** **BRONX, NY 10473**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100144** **MOREY, RISHIKESH** **80 GUION PLACE** **APT. 9U** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1201** **MORGAN, JAMES** **80 GUION PL** **APT 12M** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1744** **MORGAN, SHAMAR** **1702 PITMAN AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1209** **MORMINO, TERESA** **80 GUION PL** **APT 3R** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1932** **MORTON, JOYCE** **160 SOUTH 2ND AVE** **APT 4C** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1280** **MUGUERCIA, CARMEN** **920 CO OP CITY BLVD.** **APT 16 E** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1815** **MUIR, CARLA A** **680 E 224TH ST** **APT H** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100203** **MUIR, KRISTIN** **106 VAN WAGNER RD** **#10G** **POUGHKEEPSIE, NY 12603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1960** **MULLAKARY, JOSEPH** **65 MOHAWK RD.** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100060** **MULVEY, GAIL**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2392** **MURPHY, CATHERINE** **28 DUNWOODIE ST.** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1536** **MURPHY, MARY KATHLEEN** **94 HOMESTEAD PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2178** **MURRAY, ANNE** **75 BROOK AVE** **ENGLEWOOD, NJ 07631**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100387** **MURRAY, BRENDA** **3636 GREYSTONE AVE** **#6L** **BRONX, NY 10463**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100369** **MUSCHETT, ANTHONY** **4 SICKLES PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2232** **MWESIGE, AHMED** **2026 HAVILAND AVE** **BRONX, NY 10472**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1218** **MYERS, KATHERINE** **4535 RICHARD TERR** **WALNUTPORT, PA 18088**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100441** **MYFTARI, ERIN** **2206 HOLLAND AVE** **APT. 4G** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100570** **NAARAAYAN, ASHUTOSSH** **50 GUION PLACE** **APT. 11F** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100561** **NABAR, MANASI** **31110 TOWN GREEN DR** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1581** **NABUA, HELEN RELATOS** **50 GUION PL** **APT 8J** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1537** **NAIR, JAYASREE** **7 INDEPENDENCE CT** **NEW CITY, NY 10956**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1541** **NAMASONDHI, KOSOL** **27 SOUTH 13TH AVE** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1177** **NEGRON, CHEYENNE** **P O BOX 53** **MAHOPAC FALLS, NY 10542**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1216** **NESTOR, ROLANDE** **9302 KINGS HWY** **APT E9** **BROOKLYN, NY 11212**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100040** **NEWELL, ROSANNE** **12 GLENN PLACE** **HASTINGS ON HUDSON, NY 10706**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2490** **NEWGENT, NICHOLAS** **24 PRATT STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1544** **NG, FENGLING** **121 CLOVE ROAD** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100204** **NIGHTINGALE, DAVID** **2 GREENRIDGE AVE.** **APT. 3C** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1943** **NIPAL, VISHNU** **4504 CARPENTER AVE** **BRONX, NY 10470**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100173** **NOBLE, ANNMARIE** **3309 LURTING AVE,** **2ND FLOOR** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1546** **NOEL, VIRGINIA** **140 PELHAM RD** **APT 2E** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100280** **NORMAN-JONES, VANESSA** **3414 GUNTHER AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1617** **NORTH, BARBARA** **70 PRATT ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100457** **NOVELLO, CLAUDIA M**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2381** **NUDALO, ISLENN H** **250 WASHINGTON AVE FRONT** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100318** **NULU, SHANTI** **12 HAMILTON TERRACE** **NEW YORK, NY 10031**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1892** **NUNEZ, DALIS** **63 TOTOWA AVE** **PATERSON, NJ 07502**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1071** **O'ROURKE, EILEEN M** **15 WHITFIELD TERRACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1956** **OGLESBY, DOCVAL** **1507 METROPOLITAN AV** **APT 11F** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3187** **OKEKE, VICTORIA** **24 BRIGAM LANE** **HOPEWELL JUNCTION, NY 12533**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1069** **OLSEWSKI, JOHN** **135 BRAMBLE BROOK RD** **ARDSLEY, NY 10502**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100150** **OLUSANYA, OLAJUMOKE** **608 MAPLE AVE** **TEANECK, NJ 07722**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100110** **ONWOCHEI, MITCHELL** **40 MEMORIAL HWY** **APT. 2I** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100123** **OQUENDO, BYRON** **100 ASCHLOOP** **25F** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100214** **OSEI, MARGARET** **1985 WEBSTER AVE** **#321** **BRONX, NY 10457**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **2004** **OTANEZ, JOHANN** **80 GUION PLACE** **APT. 5W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100430** **OTANEZ, STALIN** **1955 GRAND CNCRS,** **NO. 3ES** **BRONX, NY 10453**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100461** **OWENS, JANEA** **107 LINCOLN AVE,** **#7** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1873** **OWUSU-MAINOO, KINGSFORD** **1796 VYSE AVE** **APT N-42** **BRONX, NY 10460**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100573** **PABILONA, CHRISTINE N** **50 GUION PLACE** **3A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1706** **PAGNOTTA, MARYANN** **221 MOUNTAINDALE RD.** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1187** **PALESI, CALOGERO** **177 KNEELAND AVE** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1076** **PALI, ROZAFA** **89 MILL SPRING LANE** **STAMFORD, CT 06903**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2195** **PALMER, JENNIFER** **38 JUDSON ST.** **BEACON, NY 12508**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100130** **PANDEY, SANJAY** **50 GUION PLACE** **APT. 4D** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1553** **PAPPAS, LISA** **359 WEBSTER AV** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1577** **PARASCANDOLA, LISA** **22 WINCHESTER AVE,** **#2C** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1554** **PARISI, GERALDINE** **16 LOCKWOOD AV** **BRONXVILLE, NY 10708**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **146** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1284** **PARISI, JACQUELINE L** **35 DAVENPORT AVE** **APT 2G** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3474** **PARKER, HENZERT** **4358 BRUNER AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1392** **PARKER, INDIRA M** **50 BAYARD ST** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2106** **PARKER, SUZANNE** **33 MIDBROOK LANE** **OLD GREENWICH, CT 06870**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1555** **PARKES, JOAN D** **44 GLENCAR AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1556** **PARNELL, BARBARA** **P.O. BOX 660-295** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100584** **PAUDEL, RAJIV** **8 INTERVALE AVE** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100594** **PAYNE, DONTE** **1580 PELHAM PARKWAY** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2375** **PAYNE, STEPHANIE** **30 COTTAGE AVE.** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100084** **PAZHOOR, SAM** **100 SURREY DRIVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100077** **PEARSON, KYRA** **447 EAST 3RD STREET** **MOUNT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1773** **PEARSON, SIMONE** **14 WAINWRIGHT AVE** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1363** **PEDDIE, MOIRA** **108 MAGNOLIA AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1277** **PEPDJONOVIC, PHYLLIS** **4704 APPLEWOOD CIRCLE** **CARMEL, NY 10512**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1860** **PEPIN, MANUEL A** **634 LELAND AVE** **BRONX, NY 10473**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100033** **PEREZ, EDWIN** **28-22 FULTON STREET** **BROOKLYN, NY 11207**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2493** **PEREZ, FRANCESCA** **80 GUION PLACE,** **2U** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1778** **PEREZ, MIGDALIA A** **140 ERDMAN PLACE,** **#21B** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1143** **PEREZ, MONSELUE** **2567 TIEMANN AVE..** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2276** **PERRONE, BERNICE** **114 RICHBELL RD** **APT C4** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2024** **PERSAUD, ANIL** **87-24 97TH ST.** **WOODHAVEN, NY 11421**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100142** **PERSAUD-ROBERT, VANESSA** **4221 PARK AVE** **BRONX, NY 10457**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1823** **PHYNN, JOSEPH** **3043 HONE AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1105** **PIAZZA, STEPHEN** **24 CANFIELD DRIVE** **STAMFORD, CT 06902**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1562** **PICONE, CONCETTA** **5 BAYVIEW AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester** Case No. **13-22840**
Debtor

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

Wages, salaries, and commissions
TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1168** **PIERPONT, DIANNE** **1006 PROSPECT AVE** **PELHAM MNR, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1565** **PINGITORE, PATRICIA** **74 UNITY RD** **STAMFORD, CT 06905**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **100423** **PISANO, RICHARD** **1802 PALMER AVE** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1548** **PIZZO, COLLEEN** **160-08 17 AVE** **WHITESTONE, NY 11357**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
Account No. **1566** **PODSZUS, ELAINE** **59 CLIFFORD AV** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100313** **POKHAREL, REHA** **35 DAVENPORT AVE,** **#MG** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1859** **POLANCO, DERBY** **1656 HAIGHT AVE.** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1761** **POLICARPIO, AMELOU** **405 MANHATAN AVE** **HAWTHORNE, NY 10532**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2248** **POMALES, ANA** **458 SO 2ND AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1119** **POMERANTZ, DANIEL H** **3255 OLINVILLE AVE** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1119** **POMERANTZ, DANIEL H** **3255 OLINVILLE AVE** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100405** **PONTICIELLO, JOSEPH** **226 CARROLL AVE** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100113** **POSTE, JENNIFER** **601 MAIN STREET** **APT. 2** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100633** **POWELL, NATHALIA D** **2921 WILSON AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100166** **POWELL, RICHELLE** **417 SOUTH 9TH AVE** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100249** **POWERS, EILEEN** **113 CLOVE ROAD** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1115** **POWERS, ROSALIE** **671 BRONX RIVER RD** **APT. # 1J** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100518** **PRATTS, RICHARD** **3850 SEDGWICK AVE** **APT. 14D** **BRONX, NY 10463**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1570** **PREDOVAN, MARIJAN** **10 SEVENTH ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100143** **PREMJI, RESMI** **50 GUION PLACE** **APT. 7C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100410** **PRESCOD, KENYA** **50 GUION PLACE** **APT. 9E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2236** **PRESCOD, STEPHNIE** **12 REGENT ROAD** **WARWICK, NY 10990**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1571** **PRESTON, LANCE** **16 PINEBROOK RD** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1572** **PRIOR-BOYER, MARIANNE** **988 SUNSET ST** **YORKTOWN HEIGHTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1283** **PROFITT, DENISE** **181 PEARSALL DR** **APT 2E** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1058** **PROTASS, LEON** **233 NORMAN ROAD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1769** **PRYOR, KRISTINE** **34 PRESIDENTS ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1234** **QUIGLEY, BARBARA** **206 ROUTE 100** **KATONAH, NY 10536**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1573** **QUIJANO, WERNER** **19 CABERNED CT** **CORAM, NY 11727**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1920** **QUINONES, DANIEL** **80 GUION PLACE** **#10N APT. 10N** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100156** **QUISPIALAYA, EVER** **46 HILLCREST AVE** **RYE BROOK, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2255** **RACINES, MILYN** **2363 ARTHUR AVE** **APT. #16** **BRONX, NY 10458**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1821** **RAFFINGTON, WILFRED** **443 EAST 3RD ST** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1693** **RAFTER, LYNN** **80 GUION PL** **APT 3U** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1575** **RAHL, ANDREA** **2 SUMMIT ST** **TARRYTOWN, NY 10591**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1779** **RAISON-ADOLPHUS, REGINA** **9 CHESTER STREET** **MOUNT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1576** **RAJAN, RETNAMMA** **176 OLD WILMOT RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2218** **RAJU-OTANEZ, REJI** **80 GUION PLACE** **APT 5W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1763** **RAMIREZ, MILAFE** **80 GUION PL** **APT 6P** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1228** **RAMOS, VIVIAN** **96 FIRST ST** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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B6E (Official Form 6E) (4/10) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2357** **REGALADO, SYLVIA C** **2 WOODS END RD** **HARTSDALE, NY 10530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1578** **REID, DELVIN** **3448 FISH AVE** **APT 23** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1579** **REID, LORNA** **15 SCHUDY PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1558** **REID, NICHOLEINE** **83 SKY MEADOW** **WHITE PLAINS, NY 10607**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1580** **REILLY, DENISE** **82 TUCKAHOE AVE** **EASTCHESTER, NY 10709**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1149** **REMATA, ROSARIO** **50 GUION PL** **APT 7A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1286** **REMOLADO, ALBERT** **50 GUION PL** **APT 10H** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1582** **RENDA, ANN** **80 MADELEINE AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100558** **RESTIVO, GEORGE** **74 ALHAMBRA DRIVE** **OCEANSIDE, NY 11572**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100606** **REULBACH, STEPHEN A** **8 ARLINGTON STREET** **#1B** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1586** **REYES, AMADEO** **236 WIRE MILL RD** **STAMFORD, CT 06903**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2135** **RIANO, SONIA** **24 SAINT JOSEPH ST.** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1587** **RICHMOND, PATRICK** **407 HOMESTEAD AVE** **APT. # 1** **MT. VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100393** **RICKETTS, VERONICA** **4130 GRACE AVENUE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2226** **RIDDICK, TAMMY M** **999 HIGH ST** **APT 3K** **PORTCHESTER, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100562** **RIDLEY-LANE, MEGAN** **189 MAYFLOWER** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1926** **RIOBE, ALEXANDRA** **14 SANTIAGO AVE** **HAVERSTRAW, NY 10927**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1925** **RIVERA, CARLOS M** **66 GLENBROOK ROAD** **APT. 4125** **STAMFORD, CT 06902**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1897** **RIVERA, CYNTHIA** **80 GUION PLACE** **APT. 4R** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1707** **RIVERA, EVELYN** **2776 SCHLEY AVE** **#3A** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2329** **RIVERA, LESLIE** **80 GUION PLACE** **APT. 2R** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2497** **RIVERA, MARIA** **555 MCLEAN AVE** **APT. # 5C** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1754** **RIVERA, MICHELLE** **907 ADEE AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100217** **RIVERA, MINELISA** **3855 OALOFF AVE** **APT. 3C** **BRONX, NY 10463**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1238** **RIVERA, REBECCA** **562 FOX ST** **BRONX, NY 10455**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2053** **RIVERA, STEPHANIE** **759 MAIN STREET** **APT. 10** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2259** **ROBERSON, AARDEN** **409 EAST 5TH ST.** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1770** **ROBERTSON, JENNIFER J** **161 WEST 3RD ST** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1589** **ROBLES-VITALE, LORNA** **144 STEPHENSON BLVD** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1590** **RODRIGUEZ, ANASTASCIO** **140 PELHAM RD** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1102** **RODRIGUEZ, BARTHOLOME** **19 DUESNBERRY RD.** **BRONXVILLE, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1045** **RODRIGUEZ, CONSUELO** **58 CROSSWAY** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100409** **RODRIGUEZ, LILLIAN** **149 LONG HILL ROAD EAST** **BRIARCLIFF MANOR, NY 10510**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2261** **RODRIGUEZ, ORLANDO** **50 GUION PLACE** **APT. 9B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100273** **RODRIGUEZ, SULLY** **2971 MARION AVE** **#5E** **BRONX, NY 10458**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1591** **RODRIGUEZ, YDALMI** **100 ELGAR PL** **APT 14D** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1844** **ROHONCZY, BARBARA C** **179 PINEWOOD ROAD** **HARTSDALE, NY 10530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1638** **ROLDAN, ZINAH SUCALDITO** **62 CRESTVIEW ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2345** **ROMANO, CLAUDIA** **10 BRIARCLIFF DR S** **OSSINING, NY 10562**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100357** **ROMEO, ANGELA** **3213 RANDALL AVE** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1323** **ROMER, EDWARD** **25 ELLENTON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2131** **ROONEY, SUSAN R** **991 HIGHLAND AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **5122** **ROOPNARAYAN, NARJIS** **729 EAST 235TH ST** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100506** **ROOPNARAYAN, SARITA** **1591 TOWNSEND AVE,** **#6C** **BRONX, NY 10452**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1594** **ROSARIO, IRIS** **6 SPRUCE RD** **BRIARCLIFF MANOR, NY 10510**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2241** **ROSE, PAMELA** **4312 DEREIMER AVE** **APT #2** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2137** **ROSEN, LINDA** **20 HILL PARK AVE** **APT. 2F** **GREAT NECK, NY 11021**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1082** **ROSENFELD, NATHEN** **391 OXFORD ROAD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100126** **ROWLAND, PAUL** **54 CHERRY AVE** **WEST SAYVILLE, NY 11796**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1255** **ROXBURY, BETH** **8 BROWN DR** **TINTON FALLS, NJ 07724**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2371** **RUSSELL, STEPHEN** **647 KIRBYTOWN ROAD** **MIDDLETOWN, NY 10940**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2294** **RYAN PAULO, ANN-MARIE** **493 CALIFORNIA RD** **BRONXVILLE, NY 10708**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1164** **RYAN-FORRESTER, MAURA** **129 VERNON AVE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100505** **SABREE, MWALIMU** **23 FIRST STREET** **#2C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2151** **SACKEY, WESLEY** **2256 WALTON AVE** **#3F** **BRONX, NY 10453**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1600** **SAINI, KISHVER** **55 PRESIDENT ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1046** **SAITTA, RICHARD** **140 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1601** **SAJEEVAN, SHEELA** **1 MASEFIELD LN** **HARTSDALE, NY 10530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1602** **SALAHUDDIN, ABDUR-RAHIM** **113 UNION AVE** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2008** **SALAMO, NORMA I** **2 SADORE LANE** **APT 4L** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1600** **SAINI, KISHVER** **55 PRESIDENT ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1046** **SAITTA, RICHARD** **140 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1601** **SAJEEVAN, SHEELA** **1 MASEFIELD LN** **HARTSDALE, NY 10530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1602** **SALAHUDDIN, ABDUR-RAHIM** **113 UNION AVE** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2008** **SALAMO, NORMA I** **2 SADORE LANE** **APT 4L** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100181** **SALAZAR, CARINA** **2205 CRESTON AVE** **APT. 4G** **BRONX, NY 10453**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1163** **SALAZAR, JERIC P** **323 HILLSIDE AVE** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2491** **SALCEDO, MONICA** **37-4TH STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1681** **SALMON, RAYMOND** **272 NUBER AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1604** **SALVIEJO, FLORENDO** **60 LAWRENCE PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1605** **SALVIEJO, SONIA** **60 LAWRENCE PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1332** **SAM, MOLLY** **30 AGNOLA ST.** **TUCKAHOE, NY 10707**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100537** **SAMBANDAN, DIVYA** **550 WEST 54 STREET** **APT. 609** **NEW YORK, NY 10019**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1695** **SAMOLSKY, MARC** **26 CLUB HOUSE LANE** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1607** **SAMPOLI, LOUIS** **15-9 GRANADA CRESCENT** **WHITE PLAINS, NY 10603**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
							Subtotal (Total of this page) **0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1608** **SAMPSON, NEVILLE** **450 HIGHLAND AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2510** **SAMUEL, JOHN** **230 KIMBALL TERRACE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1691** **SAMUEL, RAJI** **55B LOCUST AVE** **#3C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2364** **SAMUEL, SARAH** **55 RALPH RD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2372** **SAMUEL, SOPHIA S.** **72 SO. NICHOLS AVE.** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
							Subtotal (Total of this page) **0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1131** **SAMUEL, SUSAN** **55 RALPH RD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1609** **SANABRIA, CARLOS H** **P.O. BOX 1080** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2363** **SANCHEZ, RACHEL** **80 GUION PL** **APT 8W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1669** **SANDHU, AVA** **180 SICKLES AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1949** **SANDOVAL, CLAUDIA** **83 POTTER AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1350** **SANDOVAL, ROSARIO** **50 GUION PLACE** **APT. # 9J** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1735** **SANFILIPPO, DANIELLE** **84 GAIL DRIVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2275** **SANSEVERINO, CAITLIN** **579 LAKESIDE AVE** **APT 105** **POMPTON LAKES, NJ 07442**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1610** **SANSEVERINO, CARMINE TOM** **1181 CALIFORNIA RD** **APT 23A** **EASTCHESTER, NY 10907**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1611** **SANTOIEMMA, KATHLEEN** **463 PELHAM RD** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

TYPE OF PRIORITY: **Wages, salaries, and commissions**

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100039** **SANTOPIETRO, ROBERT** **80 GUION PLACE** **APT. 10R** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1612** **SANTORO, ROSEANN** **106 COUNTRY RIDGE RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1828** **SANTOS, ANNA E** **89 HUNTER AVE** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100124** **SANTOS, GLADYS** **762 BRADY AVE,** **# 324** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1613** **SARAMAK, MARY** **53 ACRE LANE** **HICKSVILLE, NY 11801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1935** **SCALZO, ANN MARIE** **6 HOLLYWOOD PLACE** **GRANITE SPRINGS, NY 10527**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1615** **SCHANZER, JEFFREY** **17 WALWORTH TERR** **WHITE PLAINS, NY 10606**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1588** **SCHIAROLI, JOANNE** **458 2ND AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2057** **SCHOENHERR, KERRI** **47 MAPLE AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1014** **SCHUETTENBERG, SUSAN** **725 PELHAMDALE AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2250** **SCOTT, TESFA** **302 W 152 ST.** **APT 2B** **NEW YORK, NY 10039**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1616** **SEEGARS, COLEEN** **51 WINTHROP AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2127** **SEIDE, JOANISE** **89 SHORE VIEW DR** **APT 1** **YONKERS, NY 10710**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2152** **SEMA, SONILA** **80 GUION PL** **APT. 4X** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2124** **SEN, SINI** **55B LOCUST AVE** **#3C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1618** **SENERCHIA, ANDREA** **16 LAUREL PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2308** **SENG, LEAP SEAM** **177 WHITE PLAINS RD** **APT. 9B** **TARRYTOWN, NY 10591**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1619** **SERVIGON-OCAMPO, DELIA** **50 GUION PL** **APT 5C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2351** **SEYMOUR, ROSHEER** **80 GUION PLACE** **APT. 8Y** **NEW ROCHELLE, NY 10802**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1621** **SHAFIRO, GALINA** **1250 NORTH AVE** **APT 312** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **4088** **SHAIKH, MUNIMA** **17 FORRESTAL WAY** **MAHOPAC, NY 10541**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2090** **SHAJI, LAILA** **1 HARMON PLACE** **NEW CITY, NY 10956**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1246** **SHAJI, THANKAMONY** **3401-A BRUNEY AVE** **BAYCHESTER, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1622** **SHELTON, BETTY** **727 MAIN STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1864** **SHEPARD, LAKISHA** **380 EAST 143RD ST** **APT 4 B** **BRONX, NY 10454**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100115** **SHI, JULI** **14 SOUNDVIEW AVE,** **# 15** **WHITE PLAINS, NY 10606**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1080** **SHOOKSTER, LINDA** **70-31 108TH STREET** **#7A** **FORREST HILLS, NY 11375**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1623** **SHUKLA, DIPA** **80 GUION PLACE** **APT. 5T** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2507** **SHUKLA, RACHANA R** **43 FIELDMERE STREET** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1112** **SHUKLA, VAISHALEE** **1 GRISSOM DRIVE** **BRONXVILLE, NY 10708**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1834** **SIGNORE, LEANNE** **123 HIDRETH PL** **YONKERS, NY 10704**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100133** **SIHOTA, AANU** **40 MEMORIAL HIGHWAY** **APT. 34D** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1188** **SIKORJAK, HELEN** **15 GOODWIN AVE** **WHITE PLAINS, NY 10607**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100138** **SILBERSTEIN, MICHAEL W** **14 HANNAN PLACE** **RYE, NY 10580**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100560** **SINGH, VINITA** **50 GUION PLACE** **10K** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1483** **SINKKONEN, PEGGY R** **4 FOREST HILL DR** **NEW FAIRFIELD, CT 06812**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1627** **SKARIAH, SUSY** **368 PINE BROOK BLVD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1089** **SKELTON S, RHITLAN** **1100 WARBURTON AVE** **APT. 5N** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2346** **SKROBE, THERESA** **58 SECOND STREET** **NEW HYDE PARK, NY 11040**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2048** **SMALL, PEARLINE** **40 E. 4TH STREET** **APT. # 3A** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1893** **SMALL, SYLVIA** **140 ALCOTT PLACE** **APT 25L** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1867** **SMITH, CHERRYLE** **4225 HILL AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1629** **SMITH, LORNA** **432 SENECA AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1630** **SMITH, MICHAEL** **11 JACKSON ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2128** **SNELL, CAROLYN** **1504 METROPOLITAN AVE** **APT 6G** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1289** **SOBHAN, RAJSHREE** **2242 POWELL AVE,** **2ND FLOOR** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100303** **SOLOMON, MOLHAM** **521 OAKHRUST ROAD** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100315** **SOMERA, LEOMERTO** **80 GUION PLACE** **#4Y** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1631** **SORTO, JUAN** **99 COLIGNI AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1632** **SOSA, YRINA** **47 HOWARD PARKWAY** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
						Subtotal (Total of this page)	**0.00**	**0.00** / **0.00**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2244** **SOTO, FRANCES** **111 VALENTINE LANE** **APT 6B** **YONKERS, NY 10705**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1876** **SOTO, MARGARITA** **3300 PALMER AVE** **APT 427** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1999** **SPADA, ROBERT** **58 ISELIN TERRACE** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1802** **SPANO, SAMANTHA** **80 GUION PL** **APT 4N** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1047** **SPICER, JOHN R** **915 WYNNEWOOD ROAD** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1635** **SPRUILL, SHERRENE** **105 SO FULTON AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100367** **ST. CHARLES, MARISE** **30 CLINTON PLACE** **APT. #5E** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1476** **ST. MARTIN, VIOLETTE** **25 ROCHELLE PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1227** **STAFFORD, DENISE** **120 ALCOTT PL,** **#2G** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1637** **STARKE, GAIL** **50 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1474** **STEED, JOYCE J** **2242 PALMER AVE** **#3A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1268** **STEELE, LEONARD** **255 HUGUENOT ST** **APT 2116** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1984** **STEINBERG, CRAIG** **8 DAYTON DRIVE** **MAHOPAC, NY 10541**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1799** **STEINBERG, SARA** **8 DAYTON DR.** **MAHOPAC, NY 10541**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1906** **STEPHEN, MINI** **14 WESTLYN DRIVE** **NANUET, NY 10954**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1315** **STEPHENSON, SHARON** **160 SO 2ND AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1899** **STERLING, LEONARD** **P.O. BOX 616** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1856** **STEWART, BEVERLEY** **2930 CRUGER AVE** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100270** **STEWART, HESTER** **19 PEASE STREET** **MOUNT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1000** **STIER, JEFFREY** **14 REUNION RD** **RYE BROOK, NY 10573**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2034** **STONE, TRECIA** **505 SOUTH 9TH AVE** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1983** **SUAREZ, FLERIDA A** **1790 BRUCKNER BLVD** **APT 11A** **BRONX, NY 10473**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100536** **SUBRAMANIAN, CHAMUNDESWARI** **255 HUGUENOT STREET** **APT. 217** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1820** **SUCALDITO - ESTIMOS, ADA P** **50 GUION PL** **APT. 2C** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1894** **SUCALDITO, HAIG** **62 CRESTVIEW STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1639** **SULLIVAN, REGINA A** **463 PELHAM ROAD** **BLDG. 2** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1640** **SUMNER, RUBY** **85 WILSON DR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2107** **SUNDARESAN, PRIYA SUNDARAM** **602 NORTH STREET** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1641** **SUSTENTO, HENRIETTA** **80 GUION PL** **APT 7W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100535** **SWINBURNE, NATHANIEL** **201 50TH AVE** **APT. 3E** **LONG ISLAND CITY, NY 11101**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1993** **SYMONS, VERONICK** **137 URBAN ST** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1656** **TABUJARA, MERLYN** **80 GUION PL** **APT 4W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1048** **TAMARIN, FRANK** **73 WARD DR** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1644** **TANGO, G LOUISA** **181 SUTTON MANOR** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1711** **TARANSON, ANNIE** **288 VICTORY BLVD** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2311** **TARRICONE, BARBARA** **55 BENNETT AVE** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100473** **TAVOLACCI, JOHN** **159-10CROSS ISLAND PKWY** **WHITESTONE, NY 11357**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1718** **TELMAR, YESENIA** **3023 HEMLOCK FARM** **LORDS VALLEY, PA 18428**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1176** **TEN EYCK, ROBIN** **9 BROOKSIDE AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1645** **TENENZAPF, GARY PAUL** **80 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100118** **TESADO, GRETTEL** **80 GUION PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100135** **THIND, SHARAN** **255 HUGUENOT STREET** **APT. 605** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100406** **THOMAS, ANUPA** **50 RIVERSALE AVE** **#2H** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100385** **THOMAS, CHARLES** **120 ASCH LOOP** **#4F** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1737** **THOMAS, GENEBRA** **120 LAKE ST** **APT 5B** **WHITE PLAINS, NY 10604**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

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Account No. **2263** **THOMAS, JOHNKUTTY** **16 FIFTH AVE,** **1ST FLOOR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1740** **THOMAS, LATOYA** **11 CHARLES ST,** **2MDH** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2251** **THOMAS, LAUREN D** **167 CLINTON AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2031** **THOMAS, MARLON** **2505 OLINVILLE AVE** **APT 1C** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1647** **THOMAS, RACHEL** **36 EARLE PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

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Account No. **1839** **THOMAS, SHEBA** **595 EAST LINCOLN AVE** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1267** **THOMAS, SONJA** **2504 OLINVILLE AVE** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2115** **THOMAS, SUJA** **49 BROOKSIDE PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1998** **THOMAS, SUNITHA** **78 PENGILLY DRIVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1648** **THOMAS, THANKAMMA** **82 MADELINE AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

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CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1649** **THOMPSON, GARY** **3856 BRONX BLVD** **APT 5C** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100125** **THOMPSON-SMITH, MAYBELLINE** **33 LINCOLN AVE** **APT. 5A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1651** **TISDALE, CHERYL** **321 MC CLELLAN AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100532** **TOGBE, BENNET** **3924 MONTICELLO AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1219** **TOLBERT, TAHIESHA** **205 SO COLUMBUS AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1811** **TOLENTINO, NICHOLAS** **2255 HAMPDEN PL** **BRONX, NY 10468**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1320** **TORIBIO, IVELISSE** **1541 SHAKESPEARE AVE** **#5H** **BRONX, NY 10452**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100445** **TORRES, TERESA** **42 PRINCE STREET** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2016** **TRACEY, WINSTON** **1474 LINCOLN PLACE** **APT 2** **BROOKLYN, NY 11213**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1563** **TRANDIAK, SHARON** **55 POPLAR PL** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100297** **TRAUZZI, STEPHEN** **12 MAGNOLIA ROAD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1878** **TREASURER, TOBINE** **5 WINTHROP AVE** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1652** **TRUSCIO, THOMAS** **459 HILLSIDE AVE** **PALISADES PK, NJ 07650**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1936** **TUGMAN, CHERYL MARIE** **76 ECHO DRIVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1653** **TUKU, HAILESELASSIE** **80 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1254** **TUKU, SHEWAYE** **80 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1713** **TULLY, CATHERINE** **9 HUBBARD DRIVE** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2266** **TUPAC-YUPANQUI, JENNY** **100 BELLAMY LOOP** **APT 14B** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1319** **TUPAC-YUPANQUI, RUBEN** **100 BELLAMY LOOP** **APT 14B** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1970** **URIARTE, AYSSHA** **3018 HEATH AVE** **C-35** **BRONX, NY 10463**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **3013** **VADAKATTUPURATHU, NEENA** **37 VERNON PKWY** **MT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2051** **VADASSERY, ELIZABETH** **60 LOCUST AVE** **APT. 303A** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100182** **VALENTIN, CARMEN** **3970 AMUNDSON AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1256** **VALLADARES, LAURIE** **63-D EDGEWATER PK** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1296** **VALLARELLI, JAMES** **1436 TROUT BROOK DR** **YORKTOWN HTS, NY 10598**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2038** **VARCA, LOUISE** **58 HUNTER ROAD** **DANBURY, CT 06811**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1122** **VARGAS, FANNY** **13N MANNING AVE** **#2** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2176** **VARGHESE, LIJO** **80 RIVERDALE AVE** **APT 2K** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100078** **VARGHESE, NEETA** **97 HOMESTEAD PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100286** **VARGHESE, SONIA M** **454 PINEBROOK BLVD.** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2145** **VARGHESE, YADLY** **18 PROSPECT STREET** **ELMSFORD, NY 10523**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1660** **VASQUEZ, ALEXANDRE** **80 GUION PL** **#5P** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100275** **VASUDEVAN, SHAJIKUMAR** **49 BROOKSIDE PLACE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1849** **VAUGHAN-WELLINGTON, KERRY A** **10 HEMINGWAY AVE** **APT D41** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1780** **VELAZQUEZ, DENISE** **120 ALCOTT PLACE** **18A** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2313** **VELEZ, CLAUDIA** **67 CHURCH STREET** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1114** **VELEZ, EMY** **1952 CHATTER AVE** **BRONX, NY 10472**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2133** **VELEZ, GILBERTO** **110 ROLLING MEADOWS RD** **MIDDLETOWN, NY 10940**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1782** **VELEZ, LILLIAN** **1427 KENNELLWORTH PL** **APT 1- F** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1662** **VELEZ, VICTOR R** **50 GUION PL,** **APT 7H** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2099** **VERA, FREDDY** **2131 WALLACE AVE** **APT 207** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100205** **VERGEZ, ANGEL B** **152 BUENA VISTA ROAD** **NEW CITY, NY 10956**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1701** **VERSOZA, FRANCIS** **205 GAINSBOROUGH RD** **HOLBROOK, NY 11741**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1855** **VETTUCHIRAYIL, SUJA** **164 CHURCH STREET** **APT 1B** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1309** **VICTORIA-HERNANDEZ, ESTHER** **30 SAMSTAG AVE** **OSSINING, NY 10562**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100026** **VICTORY, VICTORIA** **318 WAGNER AVE** **MAMARONECK, NY 10543**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1178** **VILLA, INES** **60 JACKSON ST.,** **3RD FLOOR** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1749** **VILLALOBOS, NAOMI** **724 EAST 220TH ST** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100390** **VIOLAGO, MICHAEL** **80 GUION PLACE** **5M** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2380** **VITARELLI, MARYANN** **158 REVERE AVE** **BRONX, NY 10465**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1666** **WADE, EASSAW** **50 GUION PL** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1995** **WALKER, GLORIA** **255 HUGUENOT STREET** **APT. 316** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1667** **WALKER, MICHAEL** **284 SO COLUMBUS AVE** **MT VERNON, NY 10553**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1692** **WALKER, WINSOME** **11 BRIARCLIFF RD** **NEW CITY, NY 10956**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100500** **WALLIS, SUSAN** **315 EAST 86TH STREET,** **# 2RE** **NEW YORK, NY 10028**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1902** **WALSH, GERMAINE** **4069 WILDER AVE** **BRONX, NY 10466**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1258** **WALSH, PRECIOUS** **15105 OLD CORN LANE** **CHARLOTTE, NC 28262**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1067** **WALTER, CLARK E** **14 GREENS WAY** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1948** **WANE, AIDA** **255 HUGUENOT ST** **APT. 516** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1939** **WAREK, KIMBERLY M** **70 SHADOW LANE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1670** **WASHINGTON, BERNICE** **448 SOUTH 7TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1060** **WASSERMAN, SHELDON** **131 DEVONSHIRE** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **3080** **WATKINS, CRYSTAL** **21 EAST CEDAR STREET** **2ND FLOOR** **MOUNT VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1671** **WATTS, NORMA DELL** **145 FRANKLIN AVE** **APT. # 1H** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1140** **WATTS, TYLIA** **145 FRANKLIN AVE** **APT 1H** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
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(Continuation Sheet)

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CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1672** **WEBB, CHARLES** **1324 FINLEY AVE.** **BRONX, NY 10456**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1083** **WEIGLE, MARK** **4 LIVERY LANE** **NORTH SALEM, NY 10560**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100533** **WEISS, AMANDA** **1195 NEILL AVE 5A** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2477** **WERTER-GREEN, VALERIE** **7 HIGHLAND ROAD** **LARCHMONT, NY 10538**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1950** **WEST, HOWARD** **505 E. LINCOLN AV** **APT 518** **MT. VERNON, NY 10552**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

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(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1137** **WHALEN, KRISTIN** **208 1ST AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1005** **WHANG, MICHAEL** **922 EDGEWOOD AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2185** **WHEELOCK, HEIDI** **1 ASHBURTON RD** **CARMEL, NY 10512**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1714** **WHITE, FRANKLIN** **38 NORTH 10TH AVE** **MT VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1992** **WHITE, SYLVIA** **51 UNDERHILL STREET** **STAMFORD, CT 06902**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **213** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1793** **WHITE, TASHIKA** **15 ENRICA RITA WAY** **STRATFORD, CT 06614**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2105** **WHYTE, LEOTA J** **247 EAST 94 STREET** **APT. 2R** **BROOKLYN, NY 11212**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1673** **WILLIAMS, DOROTHY** **11 LOCUST AVE** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1192** **WILLIAMS, ETTA** **37 LEHIGH AVE** **NEWARK, NJ 07112**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1092** **WILLIAMS, LINDA** **1005 - NORTH AVE** **NEW ROCHELLE, NY 10804**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **214** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. 1314 WILLIAMS, NARDA 120 CO-OP CITY BLVD APT 11G BRONX, NY 10475		-	May 13, 2013	X	X		Unknown	Unknown / Unknown
Account No. 1717 WILLIAMS, PETER 4705 BRONX BOULEVARD APT 1 BRONX, NY 10466		-	May 13, 2013	X	X		Unknown	Unknown / Unknown
Account No. 4045 WILLIAMS, TISHA 2259 NEW HACKENSACK RD POUGHKEEPSIE, NY 12603		-	May 13, 2013	X	X		Unknown	Unknown / Unknown
Account No. 1720 WILLIAMS-BROWN, PAMELA P.O. BOX 296 ELMSFORD, NY 10523		-	May 13, 2013	X	X		Unknown	Unknown / Unknown
Account No. 100146 WILLIAMSON, KERIN 490 BLEEKER AVE, #1F MAMARONECK, NY 10543		-	May 13, 2013	X	X		Unknown	Unknown / Unknown
Subtotal (Total of this page)							0.00	0.00 / 0.00

Sheet 215 of 229 continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2000** **WILLIAMSON, MARCIA D** **109 SOUTH 13TH ST.** **MT. VERNON, NY 10550**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100127** **WILSON, MICHAEL** **112 MILLER AVE** **NORTH BABYLON, NY 11703**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2249** **WILSON, OPAL** **1 GLENCAR AVE** **APT. 4N** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1675** **WILSON, SANTRA** **3032 TIEMAN AV** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100291** **WINESKI, MARGARET** **81 DUNSTON AVE** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

Sheet **216** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1781** **WONG, CARMEN** **760 BRONX RIVER RD,** **A-63** **BRONXVILLE, NY 10708**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100459** **WOODS, SUSAN** **160 TOWNSEND AVE** **PELHAM, NY 10803**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1743** **WOODY, RAHSAAN** **23 ST JOSEPH ST** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100213** **WRAY, MARIE** **100 DARROW PLACE** **15F** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1923** **WRIGHT, ROBERT** **3750 WILLETT AVE** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

Sheet **217** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **2819** **WRIGHT, ROBERTA** **11 EAST ELM ST** **VALHALLA, NY 10595**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1678** **WYCHE, DENISE M** **80 GUION PL** **APT 12W** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100534** **XU, ZHI** **50 GUION PLACE** **APT. 3K** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100630** **YAN, YUHUI** **50 GUION PLACE** **#10G** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100305** **YANG, FAN** **1579 THINELANDER AVE,** **#1P** **BRONX, NY 10461**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **218** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1264** **YANO, RICHEL** **100 LANE CREST** **APT 3D** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2215** **YEARWOOD, ANCIL** **9 WENDEL PL,** **BSMT. APT** **YONKERS, NY 10701**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1302** **YOHANNAN KUNJU, KATHERINE** **289 DAVENPORT AVE** **NEW ROCHELLE, NY 10805**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **2069** **YOUNG, MICHELLE** **2911 TIEMANN AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1097** **YOUNG, ZENAIDA** **4 SUNSET LANE** **HARTSDALE, NY 10530**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Sheet **219** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**0.00**	**0.00** / **0.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1208** **ZABLAN, MICHAEL** **50 GUION PL** **APT 8D** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100282** **ZACHARIA, ROY** **650 MAIN STREET** **APT. 5B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1679** **ZACHARIA, SHEEN** **650 MAIN ST** **#5B** **NEW ROCHELLE, NY 10801**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100516** **ZAGREDA, FRANO** **2448 TIEMANN AVE** **BRONX, NY 10469**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100540** **ZAHIRUDDIN, AYESHA** **20 OLD MAMARONECK RD** **WHITE PLAINS, NY 10605**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**

Sheet **220** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **100609** **ZAMAN, ADILUZ** **1551 UNIONPORT ROAD** **APT. 6G** **BRONX, NY 10462**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1011** **ZELICOF, STEVEN B** **71 MAMARONECK RD** **SCARSDALE, NY 10583**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **100137** **ZHENG, ZHENG JING** **2415 MATTHEWS AVE,** **#2** **BRONX, NY 10467**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1806** **ZUBERBUHLER, TANNIA** **600 BAYCHESTER AVE** **APT. # 6F** **BRONX, NY 10475**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Account No. **1837** **ZUKOWSKI, JOSEPH** **394 WINDSOR AVE** **STRATFORD, CT 06614**		-	**May 13, 2013**	X	X		**Unknown**	**Unknown** / **Unknown**
Subtotal (Total of this page)							**0.00**	**0.00** / **0.00**

Sheet **221** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Contributions to employee benefit plans

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **1199 SEIU** **330 West 42nd Street** **New York, NY 10036**		-		X		X	3,157,740.00	0.00 3,157,740.00
Account No. **1199 SEIU Dues** **P.O. Box 2665** **New York, NY 10108**		-	**Various**				30,522.51	0.00 30,522.51
Account No. **1199 SEIU National Benefit** **330 West 42nd Street** **New York, NY 10036**	X	-	**Various**				3,052,546.00	0.00 3,052,546.00
Account No. **Aflac** **1932 Wynnton Road** **Attn: Remittance Processing** **Columbus, GA 31999**	X	-	**Various**				13,602.65	0.00 13,602.65
Account No. **Chair Workers' Compensation** **20 Park Street** **Fin Off Rm 301** **Albany, NY 12207**		-	**Various**				636.00	636.00 0.00
Sheet **222** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims							Subtotal (Total of this page) 6,255,047.16	636.00 6,254,411.16

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Contributions to employee benefit plans
TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **Chair, Workers' Comp Board 328 State Street Room 331 Schenectady, NY 12305**	X	-	**Various**				**6,529.00**	**0.00 6,529.00**
Account No. **Distr 1199 Credit Union 310 West 43rd Street Attn: Karen Nunez New York, NY 10036**	X	-	**Various**				**5,092.78**	**0.00 5,092.78**
Account No. **Equi-Vest Unit Annuity Col P.O. Box 13463 Newark, NJ 07188**		-	**Various**				**63,610.06**	**0.00 63,610.06**
Account No. **First Unum Life Ins. Co P.O. Box 100172 Columbia, SC 29202**		-	**Various**				**1,883.84**	**0.00 1,883.84**
Account No. **Industry & Local 338 - Pen One Executive Blvd, Pension Fd Yonkers, NY 10701**		-	**Various**				**25,850.55**	**0.00 25,850.55**
Subtotal (Total of this page)							**102,966.23**	**0.00 102,966.23**

Sheet **223** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Contributions to employee benefit plans
TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **ING Life Insurance Co. P.O. Box 11407 Birmingham, AL 35246**		-	**Various**				**3,984.38**	**0.00 3,984.38**
Account No. **Lincoln Life & Annuity Co P.O. Box 2340 Fort Wayne, IN 46801**		-	**Various**				**22,998.60**	**0.00 22,998.60**
Account No. **Medical Liability Mutual P.O. Box 7247-7232 Philadelphia, PA 19170**		-	**Various**				**34,334.00**	**0.00 34,334.00**
Account No. **Met Life-New England Finan P.O. Box 92773 Chicago, IL 60752**		-	**Various**				**2,134.40**	**0.00 2,134.40**
Account No. **Metlife-IA P.O. Box 10356 Des Moines, IA 50306**		-	**Various**				**34,593.90**	**0.00 34,593.90**
Sheet **224** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims						Subtotal (Total of this page)	**98,045.28**	**0.00 98,045.28**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Contributions to employee benefit plans
TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **Municipal Credit Union** **22 Cortlandt Street** **New York, NY 10007**	X	-	**Various**				**2,578.50**	**0.00** / **2,578.50**
Account No. **Nat'l Benefit Fund** **330 West 42nd Street, 27th Fl** **Attn: Timothy Wells** **New York, NY 10036**	X	-	**Various**				**12,100.85**	**0.00** / **12,100.85**
Account No. **National Benefit Life Ins** **P.O. Box 7247-8844** **Philadelphia, PA 19170**		-	**Various**				**601.20**	**0.00** / **601.20**
Account No. **National Pension Fund** **330 West 43rd St, 3rd Floor** **Attn: Tim Wells** **New York, NY 10036**		-	**Various**				**1,299.82**	**0.00** / **1,299.82**
Account No. **New York Life Insurance** **75 Remittance Drive** **PO Box 3021** **Chicago, IL 60675**		-	**Various**				**8,261.52**	**0.00** / **8,261.52**
Subtotal (Total of this page)							**24,841.89**	**0.00** / **24,841.89**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Contributions to employee benefit plans

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **New York Life Insurance Co. P.O. Box 500 Minneapolis, MN 55440**	X	-	**Various**				**243.96**	**0.00 243.96**
Account No. **NYSNA Pension Plan 3 Pine West Plaza Washington Ave Ext. Albany, NY 12205**	X	-	**Various**				**659,759.18**	**659,759.18 0.00**
Account No. **Oppenheimer Fund P.O. Box 5270 Denver, CO 80217**	X	-	**Various**				**123,644.14**	**0.00 123,644.14**
Account No. **Sheriff's Office 110 Grove St. White Plains, NY 10601**	X	-	**Various**				**7,740.91**	**0.00 7,740.91**
Account No. **The Prudential-PA 30 Scranton Office Park Moosic, PA 18507**		-	**Various**				**64,408.09**	**0.00 64,408.09**

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Subtotal (Total of this page) **855,796.28** **659,759.18 / 196,037.10**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **Commissioner of Taxation** **P.O. Box 15171** **Albany, NY 12212**	X	-	**Various**				**181,444.87**	**0.00** **181,444.87**
Account No. **Health Facility Assessment Fnd** **P.O. Box 4757** **Syracuse, NY 13202**		-	**Various**				**98,852.00**	**0.00** **98,852.00**
Account No. **New Rochelle Police Dept** **475 North Avenue** **New Rochelle, NY 10801**		-	**Various**				**714.00**	**0.00** **714.00**
Account No. **NYS Assessment Receivables** **P.O. Box 4127** **Binghamton, NY 13902**	X	-	**Various**				**10,228.58**	**0.00** **10,228.58**
Account No. **NYS Comm. Helath, NYNA** **1260 Energy Lane** **Saint Paul, MN 55108**	X	-	**Various**				**160.00**	**0.00** **160.00**
						Subtotal (Total of this page)	**291,399.45**	**0.00** **291,399.45**

Sheet **227** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

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B6E (Official Form 6E) (4/10) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **NYS Dept Taxation & Finance P.O. Box 4128 Binghamton, NY 13902**		-	**Various**				**1,144.18**	**0.00 1,144.18**
Account No. **NYS Dept. of Labor, Unemploy Bldg. 12, Room 256 State Campus Albany, NY 12240**	X	-	**Various**				**85,272.57**	**0.00 85,272.57**
Account No. **NYS Income Tax Bureau P.O. Box 4111 Binghamton, NY 13902**	X	-	**Various**				**392,942.24**	**0.00 392,942.24**
Account No. **NYS Unemployment Ins. Div P.O. Box 4301 Binghamton, NY 13902**		-	**Various**				**61,853.25**	**0.00 61,853.25**
Account No. **Public Goods Pool 344 South Warren Street Syracuse, NY 13202**		-	**Various**				**49,068.00**	**0.00 49,068.00**
Sheet **228** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Total of this page)				**590,280.24**	**0.00 590,280.24**

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B6E (Official Form 6E) (4/10) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

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

Taxes and Certain Other Debts Owed to Governmental Units

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY / AMOUNT ENTITLED TO PRIORITY
Account No. **Public Goods Pool - Statewide 344 South Warren Street Syracuse, NY 13202**		-	**Various**				**230,062.00**	**0.00 230,062.00**
Account No. **Tax Collector, New Rochelle 515 North Avenue New Rochelle, NY 10801**	X	-	**Various**				**106,086.68**	**0.00 106,086.68**
Account No.								
Account No.								
Account No.								

Sheet **229** of **229** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

Subtotal (Total of this page)	**336,148.68**	**0.00 336,148.68**
Total (Report on Summary of Schedules)	**8,554,525.21**	**660,395.18 7,894,130.03**

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B6F (Official Form 6F) (12/07)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. 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). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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 all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual 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 claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **1199 POLITICAL ACTION FUND PO BOX 2665 NEW YORK, NY 10108**		-	**Various Trade Debt**				**379.00**
Account No. **175 MEDICAL VISION PROPERT 1084 78TH ST BROOKLYN, NY 11228**	X	-	**Various Trade Debt**				**10,916.00**
Account No. **175 Medical Vision Properties c/o Philip Menna, Esq. 235 Mamaroneck Ave, Ste. 402 White Plains, NY 10605**	X	-	**Landlord/Tenant Claim**	X	X	X	**Unknown**
Account No. **3M PO BOX 371227 PITTSBURGH, PA 15250-7227**	X	-	**Various Trade Debt**				**1,841.70**
						Subtotal (Total of this page)	**13,136.70**

219 continuation sheets attached

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **3M HEALTH INFORMATION SYS PO BOX 371227 PITTSBURGH, PA 15250-7227**		-	**Various Trade Debt**				**69,795.84**
Account No. **A AND M CODING AND BILLING 25-54 12 STREET 3D ASTORIA, NY 11102**		-	**Various Trade Debt**				**20,652.00**
Account No. **A PERFECT GOLDMAN ELECCO 48 POTTER AVENUE NEW ROCHELLE, NY 10801**		-	**Various Trade Debt**				**7,398.75**
Account No. **A PLUS COMPUTER SOLUTIONS 1 PADANARAM ROAD SUITE 142 DANBURY, CT 06811**	X	-	**Various Trade Debt**				**954.00**
Account No. **A. Kingsbury, Co. c/o Bondi Iovino & Fusco 1055 Franklin Avenue, St 206 Garden City, NY 11530**		-	**Breach of Contract**	X	X	X	**Unknown**
			Subtotal (Total of this page)				**98,800.59**

Sheet no. **1** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AAMC** **2450 N ST NW** **WASHINGTON, NY 20037-1126**		-	**Various Trade Debt**				**17,508.00**
Account No. **AARON MURRAY** **C/O RICE & RICE** **270 NORTH AVENUE, STE 202** **New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **AARP** **P O BOX 740819** **ATLANTA, GA 30374**		-	**Various Trade Debt**				**132.72**
Account No. **ACCLARENT INC** **1525-B O'BRIEN DRIVE** **MENLO PARK, CA 94025**		-	**Various Trade Debt**				**13,124.87**
Account No. **ACELL INC** **8671 ROBERT FULTON DR** **SUITE B** **COLUMBIA, MD 21046-2582**	X	-	**Various Trade Debt**				**5,395.00**

Sheet no. **2** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **36,160.59**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ACME AMERICAN REFRIG** **99 SCOTT AVE** **BROOKLYN, NY 11237**		-	**Various** **Trade Debt**				**4,061.43**
Account No. **ACME AMERICAN REPAIRS** **99 SCOTT AVE** **BROOKLYN, NY 11237**		-	**Various** **Trade Debt**				**21,845.75**
Account No. **ACOG** **PO BOX 758946** **BALTIMORE, MD 21275-8946**		-	**Various** **Trade Debt**				**700.00**
Account No. **ACP** **190 N INDEPENDENT MALL W** **PHILADELPHIA, PA 19106-1572**		-	**Various** **Trade Debt**				**30.00**
Account No. **ACUMED** **5972 COLLECTION CTR DR** **CHICAGO, IL 60693**		-	**Various** **Trade Debt**				**12,230.00**

Sheet no. **3** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **38,867.18**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ACUMED LLC** **7995 COLLECTION CTR DR** **CHICAGO, IL 60693**	X	-	**Various Trade Debt**				**20,547.13**
Account No. **ADMINISTRATORS FOR THE** **1800 NORTHERN BLVD** **ROSLYN, NY 11576**		-	**Various Trade Debt**				**10,000.00**
Account No. **ADREAN PRINTING** **1299 NORTH AVE** **NEW ROCHELLE, NY 10804**		-	**Various Trade Debt**				**351.00**
Account No. **ADVANCED BIOHEALING INC** **ABH COLLECTION ACCT** **DEPT 3292** **CAROL STREAM, IL 60132-3292**	X	-	**Various Trade Debt**				**4,095.00**
Account No. **ADVANCED IMAGING SYSTEMS** **8011 CYPRESS POINTE** **MONROE, GA 30656**		-	**Various Trade Debt**				**497.00**

Sheet no. **4** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **35,490.13**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ADVANCED SURGICAL INC** **4001 FIRST AVENUE** **LAFAYETTE HILL, PA 19444**		-	**Various Trade Debt**				**43,010.90**
Account No. **ADVANTAGE MEDICAL CABLES** **10630 WILES ROAD** **CORAL SPRINGS, FL 33076**		-	**Various Trade Debt**				**178.54**
Account No. **AESCULAP INC** **PO BOX 512451** **PHILADELPHIA, PA 19175-2451**	X	-	**Various Trade Debt**				**31,054.80**
Account No. **AFM-EP FUND** **322 W 48TH STREET** **NEW YORK, NY 10036**		-	**Various Trade Debt**				**75.00**
Account No. **AGGARWAL RICHA MD** **DEPT OF MEDICINE**		-	**Various Trade Debt**				**769.40**

Sheet no. **5** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **75,088.64**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AHA SERVICES INC** **PO BOX 92683** **CHICAGO, IL 60675-2683**		-	**Various Trade Debt**				**323.95**
Account No. **AHC MEDIA LLC** **PO BOX 25355** **BLDG 6, St. 400** **ATLANTA, GA 30305-1515**		-	**Various Trade Debt**				**299.00**
Account No. **AHIMA** **PO BOX 4295** **CAROL STREAM, IL 60197-4295**		-	**Various Trade Debt**				**180.00**
Account No. **AIR ENGINEERING** **PO BOX 174** **CHAPPAQUA, NY 10514**		-	**Various Trade Debt**				**5,576.39**
Account No. **AIRGAS FORMERLY LINDE GAS** **PO BOX 827049** **PHILADELPHIA, PA 19182-7049**		-	**Various Trade Debt**				**52,009.44**

Sheet no. **6** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **58,388.78**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AIRWAYS DEVELOPMENT LLC** **209 NORTH 14TH ST** **KENILWORTH, NJ 07033**		-	**Various Trade Debt**				**1,645.04**
Account No. **AJK SECURITY SYSTEMS INC** **PO BOX 233** **NEW ROCHELLE, NY 10804**		-	**Various Trade Debt**				**324.00**
Account No. **AKINGUMPSTRAUSSHAUERANDFE** **1333 NEW HAMPSHIRE AVE NW** **WASHINGTON, DC 20036-1564**		-	**Various Trade Debt**				**420.00**
Account No. **AKORN INC** **3950 PAYSPHERE CIRCLE** **LOCKBOX 3950** **CHICAGO, IL 60674**		-	**Various Trad Debt**				**723.41**
Account No. **AKRAM WARQAA MD** **1901 1ST AVE** **NEW YORK, NY 10029**		-	**Various Trade Debt**				**650.00**

Sheet no. **7** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **3,762.45**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ALAIGH CARE ASSOCIATES LLC** **89 OLD SMALLEYTOWN RD** **WARREN, NJ 07059**		-	**Various** **Trade Debt**				**10,000.00**
Account No. **ALERE NORTH AMERICA INC** **PO BOX 846153** **BOSTON, MA 02284-6153**		-	**Various** **Trade Debt**				**16,151.55**
Account No. **ALEX HEATING AND COOLING** **73 ROLLING WAY** **NEW ROCHELLE, NY 10804**		-	**Various** **Trade Debt**				**7,125.00**
Account No. **ALEXIS PENA** **C/O FITZGERALD & FITZGERALD** **538 RIVERDALE AVENUE** **Yonkers, NY 10705**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	**X**	**X**	**X**	**Unknown**
Account No. **ALI MED** **297 HIGH ST** **PO BOX 9135** **DEDHAM, MA 02027-9135**	**X**	-	**Various** **Trade Debt**				**855.00**

Sheet no. **8** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **34,131.55**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ALL BUSINESS COMMUNICATION** **1504 PROVIDENCE HWY** **SUITE 19** **NORWOOD, MA 02061**		-	**Various** **Trade Debt**				**100.00**
Account No. **ALLEN MEDICAL SYSTEMOR** **ONE POST OFFICE SQUARE** **ACTON, MA 01720-6725**		-	**Various** **Trade Debt**				**13,378.80**
Account No. **ALLERGAN** **12975 COLLECTION CTR DR** **CHICAGO, IL 60693**		-	**Various** **Trade Debt**				**600.00**
Account No. **ALLERGAN INC** **12975 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**Various** **Trade Debt**				**5,978.00**
Account No. **ALLSCRIPTS HEALTHCARE LLC** **P O BOX 8538-0133** **LOCKBOX 077133** **PHILADELPHIA, PA 19171-0133**	X	-	**Various** **Trade Debt**				**5,085,823.40**

Sheet no. **9** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **5,105,880.20**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ALPHA MEDICAL EQUIPMENT** **10-12 PINE COURT** **NEW ROCHELLE, NY 10801**	X	-	**Various** **Trade Debt**				**50,983.00**
Account No. **ALPHA SYSTEMS** **458 PIKE ROAD** **HUNTINGTON VALLEY, PA 19006**		-	**Various** **Trade Debt**				**200.00**
Account No. **ALPHATEC SPINE INC** **5818 EL CAMINO REAL** **CARLSBAD, CA 92008**		-	**Various** **Trade Debt**				**356,251.00**
Account No. **ALTAREJOS TERESITA A** **50 GUION PLACE** **APT 5-E** **NEW ROCHELLE, NY 10801**		-	**Various** **Trade Debt**				**270.49**
Account No. **AM SURGICAL** **290 E MAIN ST** **SUITE 200** **SMITHTOWN, NY 11787**		-	**Various** **Trade Debt**				**3,656.25**

Sheet no. **10** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **411,360.74**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AMARI SHERRILL** **C/O SULLIVAN PAPAIN BLOCK** **55 MINEOLA BLVD** **Mineola, NY 11501**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **AMARI SHERRILL** **C/O SULLIVAN PAPAIN BLOCK** **55 MINEOLA BLVD** **Mineola, NY 11501**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **AMER ARBITRATION ASSOC** **1633 BROADWAY** **FLOOR 10** **NEW YORK, NY 10019-6708**		-	**Various** **Trrade Debt**				**1,775.00**
Account No. **AMER COLLEGE HEALTHCARE EX** **PO BOX 4797** **CAROL STREAM, IL 60197-4797**		-	**Various** **Trade Debt**				**150.00**
Account No. **AMER COLLEGE OF PHYSICIANS** **PO BOX 7777 R0460** **PHILADELPHIA, PA 19175-0460**		-	**Various** **Trade Debt**				**30.00**

Sheet no. **11** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **1,955.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AMER RED CROSS-WESTCTY** **106 NORTH BROADWAY** **WHITE PLAINS, NY 10603**		-	**Various Trade Debt**				**250.00**
Account No. **AMER SOC FOR METALISLIC** **1005 W 75TH STREET** **SUITE 201** **GAINESVILLE, FL 32607**		-	**Various Trade Debt**				**375.00**
Account No. **AMERI-DOSE** **PO BOX 4140** **WOBURN, MA 01888-4140**		-	**Various Trade Debt**				**1,467.00**
Account No. **AMERICAN ARBITRATION ASSOC** **1633 BROADWAY** **FLOOR 10** **NEW YORK, NY 10019-6708**	X	-	**Various Trade Debt**				**2,150.00**
Account No. **AMERICAN COLLEGE OF SURG** **633 N ST CLAIRE ST** **CHICAGO, IL 60611-3211**		-	**Various Trade Debt**				**15,000.00**

Sheet no. **12** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **19,242.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AMERICAN COLLEGE OF SURG** **PO BOX 92425** **CHICAGO, IL 60675-2425**		-	**Various Trade Debt**				**1,500.00**
Account No. **AMERICAN DIABETES ASSOC** **110 CORPORATE PARK DR** **SUITE 104** **WHITE PLAINS, NY 10604**		-	**Various Trade Debt**				**1,000.00**
Account No. **AMERICAN FUND SERVICES** **PO BOX 2280** **NORFOLK, VA 23501**		-	**Various Trade Debt**				**14,743.88**
Account No. **AMERICAN HOSPITAL ASSOC** **PO BOX 92247** **CHICAGO, IL 60675-2247**	X	-	**Various Trade Debt**				**37,288.00**
Account No. **AMERICAN MEDICAL ASSOC 4** **PO BOX 4198** **CAROL STREAM, IL 60197-9788**		-	**Various Trade Debt**				**420.00**
						Subtotal (Total of this page)	**54,951.88**

Sheet no. **13** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AMERISOURCE BERGEN DRUG** **101 NORFOLK STREET** **MANSFIELD, MA 02048-2075**	X	-	**Various Trade Debt**				**522,043.96**
Account No. **AMGAS INC** **1 DUANE STREET** **FARMINGDALE, NY 11735**		-	**Various Trade Debt**				**1,272.71**
Account No. **AMPRONIX** **15 WHATNEY** **IRVINE, CA 92618**		-	**Various Trade Debt**				**1,206.23**
Account No. **AN ELECTROMECHANICAL TECH** **789 ASTOR AVE** **BRONX, NY 10467**	X	-	**Various Trade Debt**				**2,454.12**
Account No. **ANDRADE FRANKYS** **135 WALLACE AVE** **MT VERNON, NY 10552**		-	**Various Trade Debt**				**2,500.00**

Sheet no. **14** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **529,477.02**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ANDREW ENCARCION C/O DAVID RIFAS 271 NORTH AVENUE, STE 106 WHITE PLAINS, NY**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **ANGELA LASORSA C/O PETER E. TANGREDI 202 MAMARONECK AVE White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTIC CLAIM**	X	X	X	**Unknown**
Account No. **ANGIODYNAMICS INC PO BOX 1549 ALBANY, NY 12201-1549**		-	**Various Trade Debt**				**1,671.19**
Account No. **ANGIOTECH MEDDEVICE TECH PO BOX 535594 ATLANTA, GA 30353-5594**		-	**Various Trade Debt**				**3,652.00**
Account No. **ANTHONY GARRIO C/O RONEMUS & VILENSKY, LLP 112 MADISON AVE, 2ND FLOOR New York, NY 10016**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Sheet no. **15** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)		**5,323.19**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ANTONIO JOSEPH** **60 MICHAELS LANE** **POUGHKEEPSIE, NY 12603**		-	**Various Trade Debt**				**4,207.80**
Account No. **APOGEE CONSULTING GROUP** **2500 TANGLEWILDE** **SUITE 480** **HOUSTON, TX 77063**	X	-	**Various Trade Debt**				**820.45**
Account No. **APOLLO ENDOSURGERY INC** **P O BOX 670219** **DALLAS, TX 75267-0219**		-	**Various Trade Debt**				**9,262.68**
Account No. **APOLLO HEALTH STREET INC** **2 BRIGHTON ROAD** **STE 300** **CLIFTON, NJ 07012**		-	**Various Trade Debt**				**440,073.54**
Account No. **AQUA PLAY POOL AND SPA** **750 MAIN STREET** **NEW ROCHELLE, NY 10805**		-	**Various Trade Debt**				**149.50**

Sheet no. **16** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **454,513.97**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ARDENT SUPPORT TECHNOL 12 CROSBY ROAD DOVER, NH 03820**		-	**VARIOUS TRADE DEBT**				**1,763.00**
Account No. **ARISTOTLE BOURNAZOS PC 20 CEDAR ST NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**5,300.00**
Account No. **ARM SOLUTIONS 39867 TREASURY CENTER CHICAGO, IL 60694-9800**	X	-	**VARIOUS TRADE DEBT**				**7,760.43**
Account No. **ARMINDA MARURI C/O DOUGLAS & LONDON 111 JOHN STREET, 8TH FLOOR New York, NY 10038**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **ARTHREX INC PO BOX 403511 ATLANTA, GA 30384-3511**	X	-	**Various Trade Debt**				**200,339.00**

Sheet no. **17** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **215,162.43**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ARTHROCARE** **P O BOX 844161** **DALLAS, TX 75284-4146**		-	**VARIOUS TRADE DEBT**				**23,639.30**
Account No. **ARTHROSURFACE INC** **BOX 83256** **WOBURN, MA 01813-3256**		-	**VARIOUS TRADE DEBT**				**11,801.00**
Account No. **ASAP MESSENGER** **6 SKYLINE DRIVE** **HAWTHORNE, NY 10532**		-	**VARIOUS TRADE DEBT**				**11,852.32**
Account No. **ASCENSUS** **200 DRYDEN ROAD** **DRESHER, PA 19025**		-	**VARIOUS TRADE DEBT**				**5,260.00**
Account No. **ASCOMGENERAL ELECTRIC** **PO BOX 802585** **CHICAGO, IL 60680-2585**		-	**VARIOUS TRADE DEBT**				**2,670.12**

Sheet no. **18** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **55,222.74**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ASPEN SURGICAL PRODUCTS** **3998 RELIABLE PKWY** **CHICAGO, IL 60686**		-	**VARIOUS TRADE DEBT**				**999.91**
Account No. **ASSAY TECHNOLOGY** **1382 STEALTH ST** **LIVERMORE, CA 94551**		-	**VARIOUS TRADE DEBT**				**3,150.00**
Account No. **AT AND T** **P O BOX 105068** **ATLANTA, GA 30348-5068**		-	**VARIOUS TRADE DEBT**				**37.21**
Account No. **AT AND T ATLANTA GA** **PO BOX 105068** **ATLANTA, GA 30348-5068**	X	-	**VARIOUS TRADE DEBT**				**147.34**
Account No. **ATLANTIC DETROIT DIESELALL** **PO BOX 950** **LODI, NJ 07644**		-	**VARIOUS TRADE DEBT**				**782.00**

Sheet no. **19** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **5,116.46**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ATLANTIC POWER SYSTEMS 180 ROUTE 17 SOUTH LODI, NJ 07644**		-	**VARIOUS TRADE DEBT**				**12,400.08**
Account No. **ATLAS PARTY RENTALS 554 SO COLUMBUS AVE MOUNT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**251.00**
Account No. **ATRIUM MEDICAL CORP PO BOX 842888 BOSTON, MA 02284-2888**	X	-	**VARIOUS TRADE DEBT**				**1,685.29**
Account No. **AUDREY PANTELES C/O BAILLY & MCMILLAN 244 WESTCHESTER AVE, STE 410 West Harrison, NY 10604**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **AURELIA HERRERA C/O JEFFREY SHAPIRO 675 THIRD AVE, STE. 3005 New York, NY 10017**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **20** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **14,336.37**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **AUTOMED TECHNOLOGIES** **52226 NETWORK PLACE** **CHICAGO, IL 60673**		-	**VARIOUS TRADE DEBT**				**42,282.00**
Account No. **AVA WHOLESALERS LLC** **203-06 45TH AVE** **BAYSIDE, NY 11361**		-	**VARIOUS TRADE DEBT**				**4,685.00**
Account No. **AXOGEN INC** **13859 PROGRESS BLVD** **SUITE 100** **ALACHUA, FL 32615**		-	**VARIOUS TRADE DEBT**				**1,585.00**
Account No. **BAGERT BRIDGET** **17 ORIOLE STREET** **NEW ORLEANS, LA 70124**		-	**VARIOUS TRADE DEBT**				**3,364.42**
Account No. **BARCLAY WATER MGMT** **150 COOLIDGE AVE** **WATERTOWN, MA 02472-2815**	X	-	**VARIOUS TRADE DEBT**				**10,854.08**

Sheet no. **21** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **62,770.50**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BARD ACCESS SYSTEM PO BOX 75767 BLDG 2C2-NC0802 CHARLOTTE, NC 28262**		-	**VARIOUS TRADE DEBT**				**2,516.00**
Account No. **BARD MEDICAL PO BOX 75767 CARLOTTE, NC 28275**		-	**VARIOUS TRADE DEBT**				**1,342.74**
Account No. **BARD PERIPHERAL VASCULAR PO BOX 75767 CHARLOTTE, NC 28275**		-	**VARIOUS TRADE DEBT**				**2,146.05**
Account No. **BARONE MANAGEMENT 151-45 6TH ROAD WHITESTONE, NY 11357**		-	**VARIOUS TRADE DEBT**				**31,500.00**
Account No. **BARR AND BARR INC 460 WEST 34TH ST NEW YORK, NY 10001**	X	-	**Various Trade Debt**				**163,247.16**

Sheet no. **22** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **200,751.95**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BASAK PRASANTA MD DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**1,411.50**
Account No. **BAUCHNER STUART ESQ 299 RIVERSIDE DRIVE 60 NEW YORK, NY 10025**	X	-	**VARIOUS TRADE DEBT**				**1,800.00**
Account No. **BAXTER BIOSCIENCE PO BOX 33037 NEWARK, NJ 07188-0037**		-	**VARIOUS TRADE DEBT**				**780.00**
Account No. **BAXTER HEALTHCARE CORP PO BOX 33037 NEWARK, NJ 07188**	X	-	**Various Trade Debt**				**37,778.50**
Account No. **BAXTER IV SYSTEMS DIV PO BOX 33037 NEWARK, NJ 07188-0037**	X	-	**Various Trade Debt**				**272,888.40**

Sheet no. **23** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **314,658.40**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BECKMAN COULTER INC** **250 SOUTH KRAEMER BLVD** **PO BOX 550** **BREA, CA 92822-0550**		-	**VARIOUS TRADE DEBT**				**206,865.89**
Account No. **BEDIN ALEX** **57 DAVIS AVENUE** **WHITE PLAINS, NY 10605**		-	**VARIOUS TRADE DEBT**				**214.00**
Account No. **BEEKLY CORP** **ONE PRESTIGE LANE** **BRISTOL, CT 06010**		-	**VARIOUS TRADE DEBT**				**599.00**
Account No. **BELLIZZI DONNA** **82 RAINBOW CREST** **HOPEWELL JCT, NY 12533**		-	**VARIOUS TRADE DEBT**				**1,422.06**
Account No. **BERCHTOLD CORPORATION** **1950 HANAHAN RD** **CHARLESTON, SC 29419**		-	**VARIOUS TRADE DEBT**				**1,100.96**

Sheet no. **24** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **210,201.91**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BERNADETTE FALLETTA C/O SCOTT WOLINETZ 233 BROADWAY, 18TH FL New York, NY 10279**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **BIG APPLE ENTERTAINMENT 2005 PALMER AVE LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**200.00**
Account No. **BIO-RAD LABORATORIES POBOX 849740 LOS ANGELES, CA 90084-9740**	X	-	**VARIOUS TRADE DEBT**				**6,445.16**
Account No. **BIO-REFERENCE LABS 481 EDWARD H ROSS DR ELMWOOD PK, NJ 07407**		-	**VARIOUS TRADE DEBT**				**15,360.00**
Account No. **BIOMET BIOLOGICS 75 REMITTANCE DRIVE SUITE 3283 CHICAGO, IL 60675-3283**	X	-	**Various Trade Debt**				**76,500.00**

Sheet no. **25** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **98,505.16**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BIOMET MICROFIXATION** **75 REMITTANCE DR** **STE 3071 REC AND DISPATCH** **CHICAGO, IL 60654**		-	**VARIOUS TRADE DEBT**				**2,129.80**
Account No. **BIONICHE PHARMA USA LLC** **2735 MOMENTUM PL** **CHICAGO, IL 60689-5327**		-	**VARIOUS TRADE DEBT**				**3,456.00**
Account No. **BIONIX DEVELOPEMENT** **PO BOX 935** **TOLEDO, OH 43697-0935**		-	**VARIOUS TRADE DEBT**				**657.00**
Account No. **BIOTRONIK** **6024 JEAN ROAD** **LAKE OSWEGO, OR 97035**		-	**VARIOUS TRADE DEBT**				**5,867.50**
Account No. **BLACKBAUD** **PO BOX 930256** **ATLANTA, GA 31193-0256**		-	**VARIOUS TRADE DEBT**				**24,438.23**

Sheet no. **26** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **36,548.53**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BLESSED SACRAMENT-STGABRI PO BOX 355 NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**850.00**
Account No. **BLR PO BOX 41503 NASHVILLE, TN 37204-1503**		-	**VARIOUS TRADE DEBT**				**16.95**
Account No. **BLUE BIRD TAXI SERVICING STATION PLAZA NO NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**6,173.30**
Account No. **BLUEMARK LLC 101 MEMORIAL DRIVE ELMHURST TOWNSHIP, PA 18444**	X	-	**Various Trade Debt**				**13,300.00**
Account No. **BLUM DAVID DR 16 GUION PL DIABETES CTR 5TH FLOOR NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**9,325.84**

Sheet no. **27** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **29,666.09**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BLUTH STEPHEN M** **291 SOUTH OCEAN AVE** **FREEPORT, NY 11520**		-	**VARIOUS TRADE DEBT**				**900.00**
Account No. **BMC INSTRUMENT SERVICE INC** **1278 SAXON AVENUE** **BAY SHORE, NY 11706**	X	-	**VARIOUS TRADE DEBT**				**1,690.00**
Account No. **BME** **PO BOX 122297** **DEPT 2297** **DALLAS, TX 75312-2297**	X	-	**Various Trade Debt**				**14,425.00**
Account No. **BOBCAT OF NYC** **58-64A MAURICE AVE** **MASPETH, NY 11378**		-	**VARIOUS TRADE DEBT**				**5,589.00**
Account No. **BOLTON-ST JOHNS LLC** **146 STATE STREET** **LOWER LEVEL** **ALBANY, NY 12207**		-	**VARIOUS TRADE DEBT**				**210,000.00**

Sheet no. **28** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **232,604.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BOSTON SCIENTIFIC C/O JARRED S. FREEMAN, ESQ. 135 GREEN STREET, STE 302 Woodbridge, NJ 07095**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Account No. **BOSTON SCIENTIFIC MEDI- PO BOX 8500-6205 PHILADELPHIA, PA 19178-6205**	X	-	**Various Trade Debt**				**155,117.64**
Account No. **BOTTOMLINE REIMBURSEMENT 5342 CLARK ROAD 136 SARASOTA, FL 34233**	X	-	**Various Trade Debt**				**30,361.00**
Account No. **BPA 6 RHOADS DRIVE STE 7 UTICA, NY 13502**		-	**VARIOUS TRADE DEBT**				**3,285.98**
Account No. **BRACCO DIAGNOSTICS PO BOX 532411 CHARLOTTE, NC 28290-2411**		-	**VARIOUS TRADE DEBT**				**609.22**

Sheet no. **29** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **189,373.84**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BROADVIEW NETWORKS** **PO BOX 9242** **UNIONDALE, NY 11555-9242**	X	-	**Various** **Trade Debt**				**37,335.02**
Account No. **BSC SUPPLY** **411 WAVERLY OAKS RD** **SUITE 208** **WALTHAM, MA 02452-8445**		-	**VARIOUS** **TRADE DEBT**				**231.58**
Account No. **BULBTRONICS** **45 BANFI PLAZA** **FARMINGDALE, NY 11735**		-	**VARIOUS** **TRADE DEBT**				**886.21**
Account No. **BUREAU OF PROJECT MGMT** **433 RIVER STATREET** **6TH FLOOR** **TROY, NY 12180-2299**		-	**VARIOUS** **TRADE DEBT**				**1,000.00**
Account No. **BURKE SUPPLY CO** **59 HOOK ROAD** **BAYONNE, NJ 07002**	X	-	**Various** **Trade Debt**				**29,516.00**

Sheet no. **30** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **68,968.81**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **BUTTERFLIES FROM JODIE** **31 PRESIDENT ST** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**900.00**
Account No. **BUXTON BIOMEDICAL INC** **15A MELANIE LANE** **UNIT 7** **EAST HANOVER, NJ 07936**		-	**VARIOUS TRADE DEBT**				**360.00**
Account No. **CABLEVISION ? CHELSEA MA** **PO BOX 9256** **CHELSEA, MA 02150-9256**		-	**VARIOUS TRADE DEBT**				**266.85**
Account No. **CABLEVISION LIGHTPATH INC** **PO BOX 360111** **PITTSBURGH, PA 15251-6111**	X	-	**Various Trade Debt**				**138,845.35**
Account No. **CABLEVISION-PITTSBURGH PA** **PO BOX 371378** **PITTSBURGH, PA 15250-7378**		-	**VARIOUS TRADE DEBT**				**159.80**

Sheet no. **31** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **140,532.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CADMET** **PO BOX 24** **155 PLAIN BROOK RD** **FRAZER, PA 19355**	X	-	**VARIOUS TRADE DEBT**				**2,430.00**
Account No. **CALABRIA SOCIETY** **81 UNION AVE** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**1,100.00**
Account No. **CALVARY FUND INC** **1740 EASTCHESTER RD** **BRONX, NY 10461**		-	**VARIOUS TRADE DEBT**				**10,000.00**
Account No. **CALVARY HOSPITAL** **232 MADISON AVE** **SUITE 1107** **NEW YORK, NY 10016**		-	**VARIOUS TRADE DEBT**				**7,500.00**
Account No. **CAMPBELL MARVA** **404 WALNUT STREET** **APT 1** **YONKERS, NY 10701**		-	**VARIOUS TRADE DEBT**				**14.00**

Sheet no. **32** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **21,044.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CANCER SUPPORT TEAM** **875 MAMARONECK AVE** **MAMARONECK, NY 10543**		-	**VARIOUS TRADE DEBT**				**814.05**
Account No. **CANNON DESIGN** **360 MADISON AVE** **NEW YORK, NY 10017**	X	-	**Various Trade Debt**				**240,316.18**
Account No. **CAPITAL BANK AND TRUST** **PO BOX 2560** **NORFOLK, VA 23501-2560**		-	**VARIOUS TRADE DEBT**				**10,661.58**
Account No. **CAPS** **PO BOX 512435** **PHILADELPHIA, PA 19175-2435**		-	**VARIOUS TRADE DEBT**				**3,429.59**
Account No. **CARDIAC SCIENCE CORP** **N7 W22025 JOHNSON DR** **WAUKESHA, WI 53186-1856**		-	**VARIOUS TRADE DEBT**				**6,649.65**

Sheet no. **33** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **261,871.05**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CARDIACSCAN IMAGING** **223 WALL STREET** **335** **HUNTINGTON, NY 11743**		-	**VARIOUS TRADE DEBT**				**55,195.00**
Account No. **CARDINAL HEALTH ALLEGIAN** **PO BOX 13862** **NEWARK, NJ 07188-0862**	X	-	**Various Trade Debt**				**19,303.95**
Account No. **CARDINAL HEALTH HLS FRI** **PO BOX 13862** **ACCT** **NEWARK, NJ 07188-0862**	X	-	**Various Trade Debt**				**29,861.79**
Account No. **CARDINAL HEALTH SYNCOR** **PO BOX 905488** **CHARLOTTE, NC 28290-5488**	X	-	**Various Trade Debt**				**46,741.37**
Account No. **CARDINAL HEALTHPYXISPHAR** **1952 SOLUTIONS CTR** **CHICAGO, IL 60677-1009**	X	-	**VARIOUS TRADE DEBT**				**52.80**

Sheet no. **34** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **151,154.91**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CARDIO VASCULAR SYSTEM INC** **651 CAMPUS DRIVE** **STPAUL, MN 55112**	X	-	**VARIOUS TRADE DEBT**				**3,865.00**
Account No. **CARDONE RECORD SERVICES** **1960 SOUTH CARBOY RD** **MT PROSPECT, IL 60056**	X	-	**Various Trade Debt**				**43,272.39**
Account No. **CAREFUSION 211 INC** **88253 EXPEDITE WAY** **CHICAGO, IL 60695-0001**		-	**VARIOUS TRADE DEBT**				**130.00**
Account No. **CAREFUSION 2200 INC** **25146 NETWORK PLACE** **CHICAGO, IL 60673**		-	**VARIOUS TRADE DEBT**				**22,869.83**
Account No. **CAREFUSION SOLUTIONS LLC** **25082 NETWORK PL** **CHICAGO, IL 60673-1250**	X	-	**Various Trade Debt**				**12,879.60**

Sheet no. **35** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **83,016.82**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CARESTREAM HEALTH INC DEPT CH 19286 PALATINE, IL 60055-9286**	X	-	**VARIOUS TRADE DEBT**				**975.71**
Account No. **CARMEN NIEVES C/O DUFFY & DUFFY 1370 RXR PLAZA, 13TH FL Uniondale, NY 11556**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **CAROL D'ANCONA C/O BAILY & MCMILLAN, LLP 244 WESTCHESTER AVE, STE 410 West Harrison, NY 10604**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **CARRIER RENTAL SYSTEMS 1641 US 322 SWEDESBORO, NJ 08085**		-	**VARIOUS TRADE DEBT**				**18,752.50**
Account No. **CARROLL DEBORAH J MD 699 ROUTE 9WS NYACK, NY 10960**		-	**VARIOUS TRADE DEBT**				**2,500.00**

Sheet no. **36** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **22,228.21**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CARSTENS HEALTH INDINC PO BOX 99110 CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**3,422.99**
Account No. **CARSTENS, INC. C/O MEYERS, SAXON & COLE 3620 QUENTIN ROAD Brooklyn, NY 11234**		-	**BREACH OF CONTRACT CLAIM**	**X**	**X**	**X**	**Unknown**
Account No. **CARY STEINER LLC 716 MILTON TPKE HIGHLAND, NY 12528**		-	**VARIOUS TRADE DEBT**				**2,287.50**
Account No. **CASSARA ENTERPRISES II 56 LILLIAN ROAD MAHAPAC, NY 10541**		-	**VARIOUS TRADE DEBT**				**1,525.00**
Account No. **CASTLE OIL CORPORATION 440 MAMARONECK AVE HARRISON, NY 10528**	**X**	-	**Various Trade Debt**				**109,424.17**

Sheet no. **37** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **116,659.66**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CCH INC** **P O BOX 4307** **CAROL STREAM, IL 60197-4307**	X	-	**Various** **Trade Debt**				**19,500.00**
Account No. **CEATUS MEDIA GROUP LLC** **4141 JUTLAND DR** **SUITE 215** **SAN DIEGO, CA 92117**		-	**VARIOUS** **TRADE DEBT**				**3,500.00**
Account No. **CENTURION MED PRODTRI-S** **PO BOX 842816** **BOSTON, MA 02284-2816**		-	**VARIOUS** **TRADE DEBT**				**12,860.35**
Account No. **CHAMBER OF COMMERCE NR** **459 MAIN STREET** **PO BOX 140** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **TRADE DEBT**				**1,735.00**
Account No. **CHAPPAQUA FULL SERV CLEAN** **19 SOUTH HOLLOW** **BREWSTER, NY 10509**		-	**VARIOUS** **TRADE DEBT**				**4,860.00**

Sheet no. **38** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **42,455.35**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CHARLES WARNER CO PO BOX 483 GLASTONBURY, CT 06033**	X	-	**VARIOUS TRADE DEBT**				**246.02**
Account No. **CHILDRENS PHY OF WEST 40 SUNSHINE COTTAGE RD MUNGER PAVILION, Rm 125 VALHALLA, NY 10595**		-	**Various Trade Debt**				**415,069.68**
Account No. **CICERO CONSULTING ASSOVCC 701 WESTCHESTER AVE STE210W WHITE PLAINS, NY 10604**	X	-	**Various Trade Debt**				**18,824.34**
Account No. **CIGNA PO BOX 182223 CHATTANOOGA, TN 00037-4233**		-	**VARIOUS TRADE DEBT**				**11,758.38**
Account No. **CINTAS CORP BREWSTER NY 5600 WEST 73RD ST CHICAGO, IL 60638**		-	**VARIOUS TRADE DEBT**				**3,154.01**

Sheet no. **39** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **449,052.43**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CITRIX SYSTEMS INC** **851 W CYPRESS CREEK RD** **FORT LAUDERDALE, FL 33309**		-	**VARIOUS TRADE DEBT**				**13,470.00**
Account No. **CITY OF NEW ROCHELLE** **325 A CITY HALL** **515 NORTH AVENUE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**5,000.00**
Account No. **CITY OF NEW ROCHELLE** **CITY HALL** **515 NORTH AVENUE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**2,030.00**
Account No. **CIVCO MEDICAL SOLUTIONS** **BOX 933598** **ATLANTA, GA 31193-3598**		-	**VARIOUS TRADE DEBT**				**121.00**
Account No. **CLIFTON BUDD AND DEMARIA** **420 LEXINGTON AVE** **NEW YORK, NY 10170-0089**		-	**VARIOUS TRADE DEBT**				**13,740.00**

Sheet no. **40** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **34,361.00**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CLORA JACKSON C/O MEAGHER & MEAGHER 111 CHURCH STREET White Plains, NY 10601**	X	-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **COACTIV LLC 900 ETHAN ALLEN HWY RIDGEFIELD, CT 06877**	X	-	**Various Trade Debt**				**68,830.20**
Account No. **COALITION MUTUAL RESPECT 1000 PINE BROOK BLVD NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**600.00**
Account No. **COLLAMER PATHOLOCHICAGO PO BOX 71698 CHICAGO, IL 60694-1698**	X	-	**Various Trade Debt**				**19,632.00**
Account No. **COLLEGE OF NEW ROCHELLE 29 CASTLE PLACE NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**75.00**

Sheet no. **41** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **89,137.20**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **COLOPLAST CORP** **DEPT CH 19024** **PALATINE, IL 60055-9024**	X	-	**VARIOUS TRADE DEBT**				**9,044.60**
Account No. **COMAIRCO** **3910 PARK AVE** **4** **EDISON, NJ 08820**		-	**VARIOUS TRADE DEBT**				**3,981.24**
Account No. **COMM TAXATION AND FINANCE** **NYS TAX DEPT RPC-HUT** **PO BOX 15166** **ALBANY, NY 12212-5166**		-	**VARIOUS TRADE DEBT**				**16.15**
Account No. **COMMUNICATIONS INSTALL** **35-A WEST JEFRYN BLVD** **DEER PARK, NY 11729**		-	**VARIOUS TRADE DEBT**				**355.00**
Account No. **COMMUNITY LINK** **PO BOX 306** **PINCKNEYVILLE, IL 62274-0306**		-	**VARIOUS TRADE DEBT**				**99.00**

Sheet no. **42** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **13,495.99**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **COMPLETE MANAGEMENT** **C/O AKERMAN SENTERFITT** **666 FIFTH AVE, 20TH FL** **New York, NY 10103**	X	-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Account No. **COMPLETE MGMT SOLUTIIONS** **55 KENNEDY DRIVE** **SUITE 2** **HAUPPAUGE, NY 11788**	X	-	**Various** **Trade Debt**				**180,811.73**
Account No. **CON EDISON - LOUISE GARRIC** **4 IRVING PL9FL BOX 18** **CORPACCTS** **NEW YORK, NY 10003**		-	**VARIOUS** **TRADE DEBT**				**45,541.79**
Account No. **CON EDISON NEW YORK** **4 IRVING PL9FL BOX 18** **CORPACCTS** **NEW YORK, NY 10003**	X	-	**VARIOUS** **TRADE DEBT**				**4,791.82**
Account No. **CON-WAY FREIGHT INC** **PO BOX 5160** **PORTLAND, OR 97208-5160**		-	**VARIOUS** **TRADE DEBT**				**56.68**

Sheet no. **43** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **231,202.02**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CONCEPTUS INCORPORATED** **PO BOX 39000** **SAN FRANCISCO, CA 94139**		-	**VARIOUS TRADE DEBT**				**1,800.44**
Account No. **CONE INSTRUMENTS** **5201 NAIMAN PKY** **SOLON, OH 44139**	X	-	**VARIOUS TRADE DEBT**				**255.17**
Account No. **CONGREGATION ANSHE SHOLOM** **50 NORTH AVE** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**500.00**
Account No. **CONMED LINVATEC** **PO BOX 201498** **HOUSTON, TX 77216-1498**		-	**VARIOUS TRADE DEBT**				**3,489.53**
Account No. **CONTRAN MEDICAL LLC** **17 RIVERVIEW TERRACE** **WEST HAVEN, CT 06516**	X	-	**Various Trade Debt**				**165,970.00**

Sheet no. **44** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **172,015.14**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CONVERGENT REV CYCLE** **1357 HEATHCOTE BLVD** **STE 300** **GAINESVILLE, VA 20155**	X	-	**Various** **Trade Debt**				**857,935.00**
Account No. **COOK MEDICAL INC** **22988 NETWORK PLACE** **CHICAGO, IL 60673-1229**	X	-	**Various** **Trade Debt**				**91,070.25**
Account No. **COOKE JANETTE S** **612 11TH ST** **BROOKLYN, NY 11215**		-	**VARIOUS** **TRADE DEBT**				**1,545.47**
Account No. **COOPER SURGICAL INC** **PO BOX 712280** **CINCINNATI, OH 45271-2280**		-	**VARIOUS** **TRADE DEBT**				**7,033.97**
Account No. **CORATOLO & CARRIERI** **C/O NESENOFF & MILTENBERG** **363 SEVENTH AVE, 5TH FL** **New York, NY 10001**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**

Sheet no. **45** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **957,584.69**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CORATOLO AND CARRIERI ASS** **18 N CENTRAL AVE** **204** **HARTSDALE, NY 10530**	X	-	**Various** **Trade Debt**				**500,000.00**
Account No. **CORNISH LAURA** **181 PEARSLL DRIVE** **2C** **MT VERNON, NY 10552**		-	**VARIOUS** **TRADE DEBT**				**34.25**
Account No. **CORON ROGER** **GI MEDICINE**		-	**VARIOUS** **TRADE DEBT**				**1,500.00**
Account No. **CORPORATE EXPRESS** **33903 TREASURY CTR** **CHICAGO, IL 60694-3900**	X	-	**VARIOUS** **TRADE DEBT**				**4,824.24**
Account No. **COSTELLOCOONEY AND FEARON** **205 SOUTH SALINA ST** **SYRACUSE, NY 13202-1327**	X	-	**VARIOUS** **TRADE DEBT**				**612.50**

Sheet no. **46** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **506,970.99**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **COUNTY GRAPHICS FORMS MGMT** **2 STERCHO RD** **LINDEN, NJ 07036**	X	-	**VARIOUS TRADE DEBT**				**4,408.89**
Account No. **CREAM-O-LAND DAIRIES LLC** **PO BOX 143** **FLORENCE, NJ 08518**		-	**VARIOUS TRADE DEBT**				**14,650.74**
Account No. **CREATIVE DIGITAL IMAGING** **PO BOX 1296** **BANGOR, ME 04402-1296**	X	-	**Various Trade Debt**				**13,653.21**
Account No. **CREEKRIDGE CAPITAL LLC** **7808 Creekridge Circle** **Suite 250** **Edina, MN 55439**		-	**VARIOUS TRADE DEBT**				**1,290.18**
Account No. **CROSS COUNTRY EDUCATION** **PO BOX 305006** **NASHVILLE, TN 37230**		-	**VARIOUS TRADE DEBT**				**169.00**

Sheet no. **47** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **34,172.02**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CROTHALL SERVICE GROUP** **955 CHESTERBROOK BLVD** **SUITE 300** **WAYNE, PA 19087**	X	-	**Various** **Trade Debt**				**710,350.23**
Account No. **CRUZ JOSE** **3080 PARK AVE** **APT 3H** **BRONX, NY 10451**		-	**VARIOUS** **TRADE DEBT**				**124.50**
Account No. **CRUZ-RIVERAREBECCA** **562 FOX STREET** **BRONX, NY 10455**		-	**VARIOUS** **TRADE DEBT**				**20.00**
Account No. **CRYOSTAR INDUSTRIES INC** **109 URBAN AVE** **WESTBURY, NY 11590**	X	-	**VARIOUS** **TRADE DEBT**				**295.00**
Account No. **CRYSTAL ROCK WATER** **PO BOX 10028** **WATERBURY, CT 06725-0028**	X	-	**VARIOUS** **TRADE DEBT**				**4,598.85**

Sheet no. **48** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **715,388.58**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CUMMINS-ALLISON CORP** **PO BOX 339** **MT PROSPECT, IL 60056**		-	**VARIOUS TRADE DEBT**				**260.08**
Account No. **CURBELL ELECTRONIC DIVISIO** **PO BOX 347275E** **PITTSBURGH, PA 15251-4275**		-	**VARIOUS TRADE DEBT**				**638.55**
Account No. **CURRAN AND CONNORS INC** **140 ADAMS AVENUE** **SUITE 20C** **HAUPPAUGE, NY 11788-3618**	X	-	**Various Trade Debt**				**53,477.00**
Account No. **CUSTOM COMFORT** **PO BOX 4779** **WINTER PARK, FL 32793**		-	**VARIOUS TRADE DEBT**				**273.95**
Account No. **CW NORTHRIDGE** **C/O DORNFELD & NASIS** **145 MARCUS BLVD, STE 4** **Hauppauge, NY 11788**	X	-	**NON-PAYMENT OF LEASE CLAIM**	X	X	X	**Unknown**

Sheet no. **49** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **54,649.58**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **CYRACOM LLC** **P.O. BOX 975652** **Dallas, TX 75397**	X	-	**VARIOUS TRADE DEBT**				**12,421.16**
Account No. **D AND D ELEVATOR INC** **38 HAYES STREET** **ELMSFORD, NY 10523**	X	-	**Various Trade Debt**				**50,302.00**
Account No. **DANIELS SHARPSMART INC** **PO BOX 66494** **CHIGACO, IL 60666-0494**	X	-	**VARIOUS TRADE DEBT**				**8.41**
Account No. **DARLENE CLANTON** **C/O JASON KAUFER** **923 SAW MILL RIVER RD, STE 146** **Ardsley, NY 10502**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **DAS PARKING SYSTEMS** **12 DARCI DRIVE** **HOPEWELL JUNCTION, NY 12533**		-	**VARIOUS TRADE DEBT**				**315.00**

Sheet no. **50** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **63,046.57**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DASKAUSHIK MD** **19 BRADHURST AVENUE** **HAWTHORNE, NY 10553**		-	**VARIOUS TRADE DEBT**				**243,333.36**
Account No. **DATA INNOVATIONS** **120 KIMBALL AVENUE** **SUITE 100** **SOUTH BURLINGTON, VT 05403**		-	**VARIOUS TRADE DEBT**				**4,810.50**
Account No. **DATEX-OHMEDA** **PNC BANK FIRST SIDE** **500 1ST AVE** **PITTSBURGH, PA 15219**		-	**VARIOUS TRADE DEBT**				**4,617.84**
Account No. **DAVILLA MARIA** **50 GUION PLACE** **APT 10J** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,500.00**
Account No. **DAVOL INC** **PO BOX 75767** **CHARLOTTE, NC 28275**		-	**VARIOUS TRADE DEBT**				**14,646.78**

Sheet no. **51** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **268,908.48**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DAWKINS LAKEISHA** **14 LANDAU LANE** **SPRING VALLEY, NY 10977**		-	**VARIOUS TRADE DEBT**				**798.00**
Account No. **DAY PITNEY LLP** **PO BOX 416234** **BOSTON, MA 02241-6234**	X	-	**Various Trade Debt**				**51,257.56**
Account No. **DEAF-TALK LLC** **14 EAST MAIN ST** **CARNEGIE, PA 15106**	X	-	**VARIOUS TRADE DEBT**				**2,070.00**
Account No. **DECCAID SERVICES INC** **94J JEFRYN BLVD EAST** **DEER PARK, NY 11729**	X	-	**VARIOUS TRADE DEBT**				**1,080.00**
Account No. **DECKER PUBLISHING** **P O BOX 95000-3900** **PHILADELPHIA, PA 19195-0001**		-	**VARIOUS TRADE DEBT**				**1,803.00**

Sheet no. **52** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **57,008.56**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DELL MARKETING PO BOX 643561 PITTSBURG, PA 15264-3561**	X	-	**Various Trade Debt**				**135,119.77**
Account No. **DELLA ROCCO NORINE 443 BEACH AVE MAMARONECK, NY 10543**		-	**VARIOUS TRADE DEBT**				**954.70**
Account No. **DELTA COMPUTER SERVICES 4 DUBON COURT FARMINGDALE, NY 11735**		-	**VARIOUS TRADE DEBT**				**19,005.00**
Account No. **DEMARCO JOSEPH PO BOX 643 PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**150.00**
Account No. **DENISE COLUMBO C/O PEGALIS & ERICKSON 1 HOLLOW LANE , STE 107 New Hyde Park, NY 11042**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **53** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **155,229.47**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DEPT CARDIOTHORACIC SURG 530 FIRST AVENUE SUITE 9V NEW YORK, NY 10016**		-	**VARIOUS TRADE DEBT**				**104,166.65**
Account No. **DEPUY MITEK BANK OF AMERICA LOCKBOX SERV 6000 FELDWOOD RD COLLEGE PARK, GA 30349**		-	**VARIOUS TRADE DEBT**				**5,236.00**
Account No. **DESNOYERS MARIJOSEE 4 SICKELBAR LANE RIVERDALE, CT**		-	**VARIOUS TRADE DEBT**				**649.49**
Account No. **DEVELOPMENTS IN LITERACY 455 EAST 51ST STREET 4F NEW YORK, NY 10022**		-	**VARIOUS TRADE DEBT**				**1,000.00**
Account No. **DGA PARTNERS 2 BALA PLAZA SUITE 301 BALA CYNWYD, PA 19004**		-	**VARIOUS TRADE DEBT**				**10,427.00**

Sheet no. **54** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **121,479.14**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DIANE DIBUONO** **C/O DUANE FIEDLER** **81 MAIN STREET, STE 304** **White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **DIAZ JOSE** **1035 BOYNTON AVE** **5E** **BRONX, NY 10472**		-	**VARIOUS TRADE DEBT**				**476.50**
Account No. **DIRECT SUPPLY INC** **6767 NINDUSTRIAL RD** **MILWAUKEE, WI 53223**		-	**VARIOUS TRADE DEBT**				**695.80**
Account No. **DISAPIA AMERICO** **SSMCW**		-	**VARIOUS TRADE DEBT**				**64.03**
Account No. **DIVERSIFIED CONSULTING** **176 WORCESTER PROVIDENCE TPKE** **SUITE 202** **SUTTON, MA 01590**		-	**VARIOUS TRADE DEBT**				**218.23**

Sheet no. **55** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **1,454.56**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DIVERSIFIED INFO TECH** **123 WYOMING AVE** **SCRANTON, PA 18503**		-	**VARIOUS TRADE DEBT**				**5,575.39**
Account No. **DIVERSIFIED INVESTMENT ADV** **PO BOX 13029** **NEWARK, NJ 07188**		-	**VARIOUS TRADE DEBT**				**25,429.93**
Account No. **DJOKA NIKAC** **C/O NYS DIV OF HUMAN RIGHTS** **JOHN WALSH BLVD** **Peekskill, NY 10566**		-	**DISCRIMINATION CLAIM**	X	X	X	**Unknown**
Account No. **DODD JAMES** **136 FOSTER AVENUE** **PH** **MT VERNON, NY 10552**		-	**VARIOUS TRADE DEBT**				**1,711.48**
Account No. **DORMITORY AUTH OF SNY** **ATT: S STEVENS** **COUNSELS OFFICE** **ALBANY, NY 12207**	X	-	**Various Unsecured Debt**				**850,000.00**

Sheet no. **56** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **882,716.80**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **DRAGO CAMILLE** **932 EDGEWOOD AVE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**896.00**
Account No. **DUNCAN INDUSTRIES CORP** **121 LAFAYETTE AVE** **NORTH WHITE PLAINS, NY 10603**		-	**VARIOUS TRADE DEBT**				**12,222.00**
Account No. **DYNAMIC FIRE INC** **3714 13TH ST** **LONG ISLAND CITY, NY 11101**	X	-	**Various Trade Debt**				**67,529.00**
Account No. **EAST COAST SIGNS AND AWNINGS** **76 FOURTH STREET** **NEW ROCHELLE, NY 10801**	X	-	**VARIOUS TRADE DEBT**				**891.00**
Account No. **EASTCHESTER CHECK CASHING** **2046A EASTCHESTER RD** **BRONX, NY 10461**		-	**VARIOUS TRADE DEBT**				**652.00**

Sheet no. **57** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **82,190.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **EASTCHESTER PBA** **40 MILL RD** **EASTCHESTER, NY 10709**		-	**VARIOUS TRADE DEBT**				**495.00**
Account No. **EASTCHESTER PROFFIREFIGHT** **PO BOX 172** **EASTCHESTER, NY 10709**		-	**VARIOUS TRADE DEBT**				**575.00**
Account No. **EASTCO MFG CORP** **323 FIFTH AVE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**690.00**
Account No. **EATON CORPORATION** **PO BOX 93531** **CHICAGO, IL 60673**		-	**VARIOUS TRADE DEBT**				**2,910.00**
Account No. **ECOLAB FOOD SAFETY SPECIAL** **24198 NETWORK PLACE** **CHICAGO, IL 60673-1241**		-	**VARIOUS TRADE DEBT**				**1,599.95**

Sheet no. **58** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **6,269.95**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ECRI** **5200 BUTLER PIKE** **PLYMOUTH MEETING, PA 19462-9980**		-	**VARIOUS TRADE DEBT**				**19,309.00**
Account No. **EDIMS LLC** **651 W MOUNT PLEASANT AVE** **LIVINGSTON, NJ 07039**	X	-	**Various Trade Debt**				**47,831.00**
Account No. **EHRLICH** **PO BOX 13848** **READING, PA 19612-3848**	X	-	**VARIOUS TRADE DEBT**				**2,563.50**
Account No. **EILEEN VEGA** **C/O YOUNG & BARTLETT** **81 MAIN STREET** **White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **EMERGE** **PO BOX 206** **GOSHEN, NY 10924-0206**		-	**VARIOUS TRADE DEBT**				**8,200.00**

Sheet no. **59** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **77,903.50**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **EMERGENCY MEDICAL ASSOC** **651 W MT PLEASANT AVE** **LIVINGSTON, NJ 07039**	X	-	**Various Trade Debt**				**512,207.03**
Account No. **EMERGMED ASSOC SOUND SH** **651 W MT PLEASANT AVE** **LIVINGSTON, NJ 07039**		-	**VARIOUS TRADE DEBT**				**10,640.00**
Account No. **EMILIA PRINCE** **C/O KILEY KILEY & KILEY** **107 NORTHERN BLVD** **Great Neck, NY 11021**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **EMPIRE HEALTH ADVISORS** **40 RAILROAD PL** **SUITE 101** **SARATOGA SPRINGS, NY 12866**		-	**VARIOUS TRADE DEBT**				**3,002.50**
Account No. **EMPLOYEE UNIVERSITY** **PO BOX 871** **ATT DARIN HANKS** **SUGAR GROVE, OH 43155**		-	**VARIOUS TRADE DEBT**				**391.50**

Sheet no. **60** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **526,241.03**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ENDOLOGIX INC** **PO BOX 201781** **DALLAS, TX 75320**		-	**VARIOUS TRADE DEBT**				**43,195.00**
Account No. **ENG RITA** **22-40 128TH ST** **COLLEGE POINT, NY 11356**		-	**VARIOUS TRADE DEBT**				**40.00**
Account No. **ENRICH PRODUCTS INC** **PO BOX 86116** **PITTSBURGH, PA 28161**	X	-	**Various Trade Debt**				**13,880.00**
Account No. **ENTELLUS MEDICAL INC** **3600 HOLLY LANE N** **STE 40** **PLYMOUTH, MN 55447**		-	**VARIOUS TRADE DEBT**				**12,044.00**
Account No. **ENTERPRISE SYSTEMS SFTWAR** **5151 MONROE STREET** **SUITE 101** **TOLEDO, OH 43623**		-	**Various Trade Debt**				**410,489.11**

Sheet no. **61** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **479,648.11**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ENVIRONMENTAL SERVICES PRO PO BOX 205 HAWTHORNE, NY 10532**		-	**VARIOUS TRADE DEBT**				**1,133.00**
Account No. **EPARTNERS INCORPORATED 1231 GREENWAY DRIVE SUITE 200 IRVING, TX 75038**		-	**VARIOUS TRADE DEBT**				**20,300.00**
Account No. **ESOLUTIONS INC 401 WEST FRONTIER LANE SUITE 101 OLATHE, KS 66061**	X	-	**Various Trade Debt**				**28,976.50**
Account No. **ESOTERIX GENETIC LAB LLC P O BOX 12140 BURLINGTON, NC 27216-2140**		-	**VARIOUS TRADE DEBT**				**1,954.68**
Account No. **ESTATE OF DRYI SHIN MD 50 VALENTINE ROAD MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**25,440.00**

Sheet no. **62** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **77,804.18**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **EV3** **3033 CAMPUS DR** **PLYMOUTH, MN 55441**	X	-	**VARIOUS TRADE DEBT**				**1,080.00**
Account No. **EVEREST RECEIVABLE SERVICE** **5165 BROADWAY** **112** **DEPEW, NY 14043**		-	**VARIOUS TRADE DEBT**				**5,825.14**
Account No. **EVOLOGICS LLC** **4766 RESEARCH DR** **SAN ANTONIO, TX 78240**		-	**VARIOUS TRADE DEBT**				**270,799.00**
Account No. **EXACTECH** **PO BOX 917738** **ORLANDO, FL 32891-7738**		-	**VARIOUS TRADE DEBT**				**3,745.00**
Account No. **EXECUTEX OFFICE TECHNOLOG** **75 NORTH CENTRAL AVE** **SUITE 201** **ELMSFORD, NY 10523**	X	-	**VARIOUS TRADE DEBT**				**3,892.50**

Sheet no. **63** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **285,341.64**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **EXER-SERVICE** **96 ST MARKS PLACE** **MT KISCO, NY 10549**		-	**VARIOUS TRADE DEBT**				**125.00**
Account No. **F AND E CHECK PROTECTOR SALE** **PO BOX 18** **YONKERS, NY 10703**		-	**VARIOUS TRADE DEBT**				**225.00**
Account No. **FAMILY SERVICE OF WEST-PC** **1 GATEWAY PLAZA** **PORTCHESTER, NY 10573**		-	**VARIOUS TRADE DEBT**				**1,200.00**
Account No. **FEDERAL EXPRESS CORP** **PO BOX 371461** **PITTSBURGH, PA 15250-7461**	X	-	**Various Trade Debt**				**13,638.66**
Account No. **FENWAL INC** **LOCKBOX 17924** **PALATINE, IL 60055**		-	**VARIOUS TRADE DEBT**				**1,338.51**

Sheet no. **64** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **16,527.17**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **FERGUSONMD ALEXIS DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**763.33**
Account No. **FERNANDEZ GRACE 19 YALE DR NEW CITY, NY 10956**		-	**VARIOUS TRADE DEBT**				**15.99**
Account No. **FFF ENTERPRISES DEPT 70150 LOS ANGELES, CA 90084-0150**		-	**VARIOUS TRADE DEBT**				**1,084.22**
Account No. **FIDELITY INVESTMENTS PO BOX 770002 CINCINNATI, OH 45277-0089**		-	**VARIOUS TRADE DEBT**				**5,887.86**
Account No. **FILTERFRESH 382 ROUTE 59 SUITE 324 MONSEY, NY 10952**		-	**VARIOUS TRADE DEBT**				**344.88**

Sheet no. **65** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **8,096.28**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **FISHER HEALTHCARE** **300 INDUSTRY DRIVE** **3RD FLOOR CREDIT** **PITTSBURGH, PA 15275**		-	**VARIOUS TRADE DEBT**				**82,525.84**
Account No. **FITNESS EQUIPMENT UPHOLSTE** **PO BOX 63** **HUNTER, NY 12442**		-	**VARIOUS TRADE DEBT**				**135.31**
Account No. **FLORENCE MAMONE** **15 COLONIAL PL** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**76.40**
Account No. **FOLLETT CORP** **PO BOX 8500** **PHILADELPHIA, PA 19178-2806**	X	-	**VARIOUS TRADE DEBT**				**4,715.00**
Account No. **FORD MOTOR CREDIT CO** **PO BOX 220564** **PITTSBURGH, PA 15257-2564**	X	-	**VARIOUS TRADE DEBT**				**349.79**

Sheet no. **66** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **87,802.34**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **FORT DEARBORN LIFE INS CO** **26012 NETWORK PLACE** **CHICAGO, IL 60673-1260**	X	-	**Various** **Trade Debt**				**62,572.31**
Account No. **FOUNDOF HUDSON VALLEY HOS** **1980 CROMPOND RD** **CORTLANDT, NY 10567**		-	**VARIOUS** **TRADE DEBT**				**6,000.00**
Account No. **FOUR RIVERS SOFTWARE SYS** **400 PENN CENTER BLVD** **SUITE 450** **PITTSBURGH, PA 15235**		-	**VARIOUS** **TRADE DEBT**				**17,765.65**
Account No. **FOURTEENTH ANNUAL GOLF OUT** **107 WEST 4TH STREET** **MOUNT VERNON, NY 10550**		-	**VARIOUS** **TRADE DEBT**				**1,700.00**
Account No. **FOX NORRIS MD** **947 SHORE ACRES DR** **MAMARONECK, NY 10573**		-	**VARIOUS** **TRADE DEBT**				**2,983.77**

Sheet no. **67** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **91,021.73**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **FRANCIS MASSARO C/O MARTINO & WEISS 800 WESTCHESTER AVE, STE 608S Port Chester, NY 10573**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **FRANK ALLGAIER C/O JOEL M. SHAFFERMAN 18 EAST 41 STREET, ST 1201 New York, NY 10017**		-	**ALLEGED MEDICAL MALPRACTICE**	X	X	X	**Unknown**
Account No. **FREEDOM MEDICAL INC PO BOX 822704 PHILADELPHIA, PA 19182-2704**	X	-	**VARIOUS TRADE DEBT**				**6,038.00**
Account No. **FRESENIUS KABI USA LLC 25476 NETWORK PL CHIGAGO, IL 60673-1254**		-	**VARIOUS TRADE DEBT**				**1,063.25**
Account No. **FRESENIUS MANAGEMENT SERV 3 CORPORATE DRIVE ATTN: NANCY REDMOND Lake Zurich, IL 60047**		-	**Various Trade Debt**				**346,664.72**

Sheet no. **68** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **353,765.97**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **FRESH AND TASTY BAKED PROD** **1568 STILLWELL AVE** **BRONX, NY 10461**	X	-	**Various** **Trade Debt**				**22,468.98**
Account No. **FRIED BROTHERS** **467 NORTH 7TH ST** **PHILADELPHIA, PA 19123**	X	-	**VARIOUS** **TRADE DEBT**				**4,951.12**
Account No. **FRIENDS OF PELHAM CIVIC AS** **66 BOULEVARD** **PELHAM, NY 10803**		-	**VARIOUS** **TRADE DEBT**				**1,000.00**
Account No. **FRIENDS OF PELHAM PUBLIC** **530 COLONIAL AVE** **PELHAM, NY 10803**		-	**VARIOUS** **TRADE DEBT**				**1,000.00**
Account No. **FRIENDS OF WESTPARKS INC** **25 MOORE AVENUE** **MT KISCO, NY 10549**		-	**VARIOUS** **TRADE DEBT**				**500.00**

Sheet no. **69** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **29,920.10**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **G AND M NAMEPLATE CO** **383 HUGUENOT ST** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**1,256.67**
Account No. **GAETANA INGRASSIA** **C/O WORBY GRONER EDELMAN** **11 MARITINE AVE, PENTHOUSE** **White Plains, NY 10606**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **GARAN ARED MD** **10 WESTELY LANE SOUTH** **THORNWOOD, NY 10594**		-	**VARIOUS TRADE DEBT**				**21,798.00**
Account No. **GARFUNKEL WILD PC** **111 GREAT NECK RD** **GREAT NECK, NY 11021**	X	-	**Various Trade Debt**				**14,457.50**
Account No. **GARVEY RICHARD MD** **500 MAMARONECK AVENUE** **SUITE 211** **HARRISON, NY 10528**		-	**VARIOUS TRADE DEBT**				**22,500.00**

Sheet no. **70** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **60,012.17**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GAYLE DIANE NRHMC**		-	**VARIOUS TRADE DEBT**				**75.00**
Account No. **GE CAPITAL FORMERLY CITICA PO BOX 644479 PITTSBURGH, PA 15264-4479**		-	**VARIOUS TRADE DEBT**				**202,772.51**
Account No. **GE HEALTHCARE PO BOX 640944 PITTSBURGH, PA 15264-0944**		-	**VARIOUS TRADE DEBT**				**2,159.00**
Account No. **GE HEALTHCARE FINANCIAL SE PO BOX 641419 PITTSBURGH, PA 15264-1419**		-	**VARIOUS TRADE DEBT**				**60.40**
Account No. **GE MEDICAL SYSTEMS-BOX64 5517 COLLECTIONS CTR DR CHICAGO, IL 60693**	X	-	**VARIOUS TRADE DEBT**				**2,269.10**

Sheet no. **71** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **207,336.01**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GEISINGER MEDICAL MGMT** **100 NORTH ACADEMY AVE** **DANVILLE, PA 17822-2412**	X	-	**VARIOUS TRADE DEBT**				**7,650.00**
Account No. **GENERAL HOSP SUPPLY** **2844 GRAY FOX RD** **MONROE, NC 28110**	X	-	**VARIOUS TRADE DEBT**				**4,421.00**
Account No. **GEORGE TIEMANN AND COINC** **25 PLANT AVE** **HAUPPAUGE, NY 11788**		-	**VARIOUS TRADE DEBT**				**3,385.20**
Account No. **GIOVANNA MORALES** **C/O DINKES & SCHWITZER** **112 MADISON AVE, 10TH FL** **New York, NY 10016**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **GIVEN IMAGING** **PO BOX 932928** **ATLANTA, GA 31193-2928**		-	**VARIOUS TRADE DEBT**				**15,631.09**

Sheet no. **72** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **31,087.29**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GLAXO SMITH KLINE PHARM** **PO BOX 740415** **ATLANTA, GA 30374**		-	**VARIOUS TRADE DEBT**				**1,236.95**
Account No. **GLEN ISLAND HARBOUR CLUB** **WEYMAN AVENUE** **NEW ROCHELLE, NY 10805**	X	-	**Various Trade Debt**				**25,816.80**
Account No. **GLOBAL COMPLIANCE SERVICES** **PO BOX 60941** **CHARLOTTE, NC 28260-0941**	X	-	**VARIOUS TRADE DEBT**				**2,300.00**
Account No. **GLOBALSTAR USA LLC** **PO BOX 30519** **LOS ANGELES, CA 90030-0519**		-	**VARIOUS TRADE DEBT**				**56.52**
Account No. **GLOBUS MEDICAL** **PO BOX 203329** **DALLAS, TX 75320**		-	**VARIOUS TRADE DEBT**				**16,058.00**

Sheet no. **73** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **45,468.27**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GLOBUS MEDICAL** **C/O MONTGOMERY MCCKACKEN** **437N MADISON AVE, 29TH FL** **New York, NY 10022**		-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **GLORIA FELTON** **C/O SANDERS VIENER GROSSMAN** **100 HERRICKS ROAD** **Mineola, NY 11501**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **GOLDING TALIA** **101 ELLWOOD AVENUE** **6K** **MT VERNON, NY 10552**		-	**VARIOUS** **TRADE DEBT**				**1,250.00**
Account No. **GOLSTON PRODUCT SOLUTIONS** **521 S STEMMONS** **SANGER, TX 76266**		-	**VARIOUS** **TRADE DEBT**				**493.32**
Account No. **GRAINGER** **PO BOX 807194469** **PALATINE, IL 06003-8001**		-	**VARIOUS** **TRADE DEBT**				**787.51**

Sheet no. **74** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **2,530.83**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GRANGE DAVID** **8316 BOLD EAGLE LANE** **WILMINGTON, NC 28411**		-	**VARIOUS TRADE DEBT**				**371.62**
Account No. **GRAPHIC CONTROLS MEDI-TRAC** **400 EXCHANGE ST** **BUFFALO, NY 14240-1271**		-	**VARIOUS TRADE DEBT**				**151.06**
Account No. **GRAYBAR ELECTRIC** **C/O JOSEPH & TERRACCIANO** **2 ROOSEVELT AVE, STE 200** **Syosset, NY 11791**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **GRAYBAR ELECTRIC COMPANY** **401 FRANKLIN AVE** **SUITE 220** **GARDEN CITY, NY 11530**	X	-	**Various Trade Debt**				**17,270.24**
Account No. **GREATER NY HOSP ASSOC** **555 W 57TH ST** **15TH FLOOR** **NEW YORK, NY 10019**		-	**VARIOUS TRADE DEBT**				**40,204.00**

Sheet no. **75** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **57,996.92**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GREEN MOUNTAIN ENERGY** **PO BOX 660838** **DALLAS, TX 75266-0838**	X	-	**Various Trade Debt**				**207,592.19**
Account No. **GREENBURG POLICE ASSOC** **PO BOX 194** **ELMSFORD, NY 10523**		-	**VARIOUS TRADE DEBT**				**1,000.00**
Account No. **GREENKEY TEMP LLC** **475 PARK AVENUE SOUTH** **7TH FLOOR** **NEW YORK, NY 10016**	X	-	**Various Trade Debt**				**56,162.60**
Account No. **GREGORY FOSTER** **C/O RICE & RICE** **270 NORTH AVENUE, ST 202** **New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **GREYSTONE SERVICING CORP** **111 ROCKVILLE PIKE** **SUITE 1150** **ROCKVILLE, MD 20850**	X	-	**Various Trade Debt**				**12,200.00**

Sheet no. **76** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **276,954.79**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **GROUP J HEALTHCARE SOLUTIO** **600 HICKSVILLE RD** **BETHPAGE, NY 11714**		-	**VARIOUS TRADE DEBT**				**5,072.80**
Account No. **GUARDIAN FIRE TESTING LAB** **15 WENONAH TERR** **TONAWANDA, NY 14150**		-	**VARIOUS TRADE DEBT**				**2,450.00**
Account No. **GUNDELACH'S EQUIPMENT** **70 PORTMAN RD** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**315.51**
Account No. **GWENDOLYN SNIPES** **C/O SILBOWITZ GARAFOLA** **25 WEST 43RD ST, STE 711** **New York, NY 10036**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	**X**	**X**	**X**	**Unknown**
Account No. **H WEISS CO INC** **12 LABRIOLA COURT** **SOUTH STATION** **ARMONK, NY 10504-0497**		-	**VARIOUS TRADE DEBT**				**83.40**

Sheet no. **77** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **7,921.71**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HAEMONETICS CORP** **1001 CHERI WAY** **ACCTS RECEIVABLES** **LOUISVILLE, KY 40118**		-	**VARIOUS TRADE DEBT**				**17,728.22**
Account No. **HARRIS O'BRIEN ST LAURENT** **53-18 37TH ROAD** **WOODSIDE, NY 11377**		-	**VARIOUS TRADE DEBT**				**6,790.00**
Account No. **HASHEMI PANTEA** **DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**650.00**
Account No. **HAVEL'S INC** **3726 LONSDALE STREET** **CINCINNATI, OH 45227**		-	**VARIOUS TRADE DEBT**				**721.50**
Account No. **HCPRO INC** **PO BOX 3049** **PEABODY, MA 961-3049**		-	**VARIOUS TRADE DEBT**				**349.00**

Sheet no. **78** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **26,238.72**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HD SUPPLY FACILITIES MAINT** **PO BOX 509058** **SAN DIEGO, CA 92150**		-	**VARIOUS TRADE DEBT**				**2,139.96**
Account No. **HEALTH ROI** **344 MAIN ST** **METUCHEN, NJ 08840**	X	-	**Various Trade Debt**				**465,001.49**
Account No. **HEALTH CARE COMPLIANCE ASS** **6500 BARRIE RD** **STE 250** **MINNEAPOLIS, MN 55435**		-	**VARIOUS TRADE DEBT**				**958.17**
Account No. **HEALTH CARE COMPLIANCE STR** **30 JERICHO EXECUTIVE PLAZA** **STE 400C** **JERICHO, NY 11753**	X	-	**Varous Trade Debt**				**55,000.00**
Account No. **HEALTH CARE LOGISTICS INC** **PO BOX 25** **CIRCLEVILLE, OH 43113-0025**	X	-	**VARIOUS TRADE DEBT**				**1,127.68**

Sheet no. **79** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **524,227.30**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HEALTH FACILITY ASSESS FU JALAIMOASSESSFUND ADMIN OFFPOOL ADM PO BOX 4757 SYRACUSE, NY 13221-4757**	X	-	**Various Trade Debt**				**47,614.00**
Account No. **HEALTH RESEARCH INC 1979 MARCUS AVENUE LAKE SUCCESS, NY 11042-1002**		-	**VARIOUS TRADE DEBT**				**228.00**
Account No. **HEALTH RESOURCES C/O NORRIS MCLAUGHLIN 875 THIRD AVE, 8TH FL New York, NY 10022**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Account No. **HEALTHCARE ASSOC NYS P O BOX 5535 GPO NEW YORK, NY 10087-5535**		-	**VARIOUS TRADE DEBT**				**16,822.75**
Account No. **HEALTHCARE ASSOC OF NYS PO BOX 5535 GPO NEW YORK, NY 10087-5535**	X	-	**Various Trade Debt**				**27,355.50**

Sheet no. **80** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **92,020.25**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HEALTHCARE ASSOC OF NYSIN** **PO BOX 5535** **GPO** **NEW YORK, NY 10087-5535**	X	-	**Various** **Trade Debt**				**326,036.00**
Account No. **HEALTHCARE HUMAN RESOURCES** **50 MAIN STREET** **10TH FLOOR** **WHITE PLAINS, NY 10606**		-	**VARIOUS** **TRADE DEBT**				**3,500.00**
Account No. **HEALTHCARE LEADERS OF NEW** **PO BOX 7025** **WANTAGH, NY 11793**		-	**VARIOUS** **TRADE DEBT**				**3,000.00**
Account No. **HEALTHCARE RETROACTIVE AUD** **PO BOX 228295** **DORAL, FL 33172**	X	-	**Various** **Trade Debt**				**40,379.77**
Account No. **HEALTHSTREAM INC** **PO BOX 102817** **ATLANTA, GA 30368-2817**	X	-	**Various** **Trade Debt**				**15,405.00**

Sheet no. **81** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **388,320.77**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HEINEGG PHILIP MD** **1890 PALMER AVENUE** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**40,000.00**
Account No. **HERMAN MILLER FOR HEALTHCA** **22891 NETWORK PL** **CHICAGO, IL 60673-1228**		-	**VARIOUS TRADE DEBT**				**22,821.67**
Account No. **HERZBERGGILBERT MD** **8 COOLIDGE ST** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**600.00**
Account No. **HILL ROM CO INC** **1069 STATE ROUTE 46 EAST** **CREDIT DEPT** **BATESVILLE, IN 47006-9164**		-	**VARIOUS TRADE DEBT**				**3,734.31**
Account No. **HILL-ROM** **PO BOX 643592** **PITTSBURGH, PA 15264-3592**		-	**VARIOUS TRADE DEBT**				**13,515.36**

Sheet no. **82** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **80,671.34**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HIM ON CALL INC** **1033 HAMILTON ST** **ALLENTOWN, PA 18101-1049**	X	-	**VARIOUS TRADE DEBT**				**7,302.81**
Account No. **HISTOLOGY CONTROL INC** **70 CLEVELAND AVE** **BAY SHORE, NY 11706**		-	**VARIOUS TRADE DEBT**				**320.10**
Account No. **HISTOPATHOLOGY SERVICES** **PO BOX 206** **GOSHEN, NY 10924**		-	**VARIOUS TRADE DEBT**				**8,300.00**
Account No. **HLS MEDFREIGHT** **P O BOX 70539** **CHICAGO, IL 60673**		-	**VARIOUS TRADE DEBT**				**100.00**
Account No. **HOLGERSEN LEIF DR** **141 S CENTRAL PARK AVE** **SUITE 102** **HARTSDALE, NY 10530**		-	**VARIOUS TRADE DEBT**				**43,750.00**

Sheet no. **83** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **59,772.91**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HOLOGIC INC** **24506 NETWORK PLACE** **CHICAGO, IL 60673-1245**	X	-	**VARIOUS TRADE DEBT**				**7,912.00**
Account No. **HOLOGIC LTD PARTCYTYC** **24506 NETWORK PLACE** **CHICAGO, IL 60673-1245**		-	**VARIOUS TRADE DEBT**				**907.00**
Account No. **HOLSTEINDR STANLEY B** **140 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**450.00**
Account No. **HOLY NAME MEN'S CLUB** **37 STATE ST** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**740.00**
Account No. **HOOPER LUNDY AND BOOKMAN PC** **975 F STREET NW** **SUITE 1050** **WAHINGTON, DC 20004**	X	-	**VARIOUS TRADE DEBT**				**2,842.76**

Sheet no. **84** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **12,851.76**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HOPE COMMUNITY SERVICE** **50 WASHINGTON AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**5,153.84**
Account No. **HORIZON ENGINEERING ASSOC** **1200 VETERAN'S HIGHWAY** **SUITE 110** **HAUPPAUGE, NY 11788**	X	-	**Various Trade Debt**				**30,920.09**
Account No. **HOSPICE CARE WEST PUTNAM** **540 WHITE PLAINS RD** **STE 300** **TARRYTOWN, NY 10591-5132**		-	**VARIOUS TRADE DEBT**				**1,980.00**
Account No. **HOSPIRA WORLD WIDE INC** **75 REMITTANCE DR** **SUITE 6136** **CHICAGO, IL 60675-6136**	X	-	**Various Trade Debt**				**17,504.91**
Account No. **HOSPITAL RECEIVABLES SYS** **1598 BELLMORE AVE** **BELLMORE, NY 11710**	X	-	**VARIOUS TRADE DEBT**				**239.71**

Sheet no. **85** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **55,798.55**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HOWARD GALE C/O CERTAIN & ZILBERG 909 THIRD AVENUE, 28TH FL New York, NY 10022**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **HP PRODUCTS CORP 5 ARDIS LANE PLAINVIEW, NY 11803**		-	**VARIOUS TRADE DEBT**				**5,150.00**
Account No. **HPC FOOD SERVICE P O BOX 150473 HARTFORD, CT 06115-0473**		-	**VARIOUS TRADE DEBT**				**5,524.60**
Account No. **HSLANJ-HEALTH SCIENCES LIB ASSOC OF NEW JERSEY PO BOX 790 PRINCETON, NJ 08543-7908**	X	-	**VARIOUS TRADE DEBT**				**4,340.00**
Account No. **HUAZHONGXUE MD-PHD 455 MAIN ST PENTHOUSE 1E NEW YORK, NY 10044**		-	**VARIOUS TRADE DEBT**				**2,500.00**

Sheet no. **86** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **17,514.60**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **HUBERT COMPANY** **9555 DRY FORK ROAD** **HARRISON, OH 45030-1994**		-	**VARIOUS TRADE DEBT**				**803.11**
Account No. **HUDSON ENERGY SERVICES** **4 EXECUTIVE BLVD** **STE 301** **SUFFERN, NY 10901**	X	-	**Various Trade Debt**				**57,937.00**
Account No. **HUDSON VALLEY NAT'L FOUND** **21 SCARSDALE RD** **YONKERS, NY 10707**		-	**VARIOUS TRADE DEBT**				**2,700.00**
Account No. **HUDSON WEST RADIO** **1 BROADCAST FORUM** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**121,000.00**
Account No. **I JANVEY AND SONS** **PO BOX 335** **HEMPSTEAD, NY 11550**	X	-	**Various Trade Debt**				**15,167.25**

Sheet no. **87** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **197,607.36**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **IBM CORP** **PO BOX 676673** **DALLAS, TX 75267-6673**	X	-	**VARIOUS TRADE DEBT**				**3,215.04**
Account No. **ICCBBA INC** **PO BOX 748016** **LOS ANGELES, CA 90074-8016**		-	**VARIOUS TRADE DEBT**				**206.00**
Account No. **IMAGING ON CALL LLC** **1510 COTNER AVENUE** **LOS ANGELES, CA 90025**	X	-	**Various Trade Debt**				**78,999.68**
Account No. **IMD INC** **560 HIGHWAY 39** **PO BOX510** **HUNTSVILLE, UT 84317**		-	**VARIOUS TRADE DEBT**				**3,906.00**
Account No. **IMMUCOR INC** **PO BOX 102118** **ATLANTA, GA 30368-2118**	X	-	**Various Trade Debt**				**49,003.83**

Sheet no. **88** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **135,330.55**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **IMPACT ADVISORS LLC 931 W 75TH STREET SUITE 137-304 NAPERVILLE, IL 60565**	X	-	**Various Trade Debt**				**19,853.06**
Account No. **IN-DEMAND EXECUTIVE ASSOC 4470 WEST SUNSET BLVD BOX239 LOS ANGELES, CA 90027**		-	**VARIOUS TRADE DEBT**				**9,703.00**
Account No. **INCISIVE SURGICAL 14405 21ST AVE N SUITE 130 PLYMOUTH, MN 55447-4685**		-	**VARIOUS TRADE DEBT**				**1,156.30**
Account No. **INNOMED INC PO BOX 116888 ATLANTA, GA 30368-6888**	X	-	**VARIOUS TRADE DEBT**				**4,013.23**
Account No. **INNOVATIVE MED PRODUCTS 87 SPRING LANE PLAINVILLE, CT 06062**		-	**VARIOUS TRADE DEBT**				**10,484.39**

Sheet no. **89** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **45,209.98**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **INNOVATIVE PRODUCT ACHIEVE** **2775 PREMIERE PKWY** **SUITE 100** **DULUTH, GA 30097**		-	**VARIOUS TRADE DEBT**				**2,386.59**
Account No. **INSIGHT INVESTMENTS** **611 ANTON BLVD** **STE 700** **COSTA MESA, CA 92626**		-	**VARIOUS TRADE DEBT**				**4,860.00**
Account No. **INSTRUMENT SPECIALISTS INC** **32390 IH-10 WEST** **BOERNE, TX 78006**		-	**VARIOUS TRADE DEBT**				**641.35**
Account No. **INSTRUMENTATION LABORATORY** **PO BOX 83189** **WOBURN, MA 01813-3189**		-	**VARIOUS TRADE DEBT**				**48,659.14**
Account No. **INTEGRA LIFE SCIENCES CORP** **311 ENTERPRISE DRIVE** **PLAINSBORO, NJ 08536**	X	-	**Various Trade Debt**				**84,931.99**

Sheet no. **90** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **141,479.07**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **INTERIOR CONSTRUCTION CORP** **C/O VENABLE, LLP** **1270 AVENUE OF THE AMERICAS** **New York, NY 10020**		-	**TRADE DEBT**		X	X	**Unknown**
Account No. **INTERNAL REVENUE SERVICES** **Dept of the Treasury** **FRESNO, CA 93888**		-	**VARIOUS TRADE DEBT**				**500.00**
Account No. **INTERRELIGIOUS COUNCIL OF** **PO BOX 256** **NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**240.00**
Account No. **INTUITIVE SURGICAL INC** **PO BOX 39000** **SAN FRANCISCO, CA 94139**		-	**VARIOUS TRADE DEBT**				**65,160.00**
Account No. **IONA COLLEGE** **715 NORTH AVENUE** **NEW ROCHELLE, NY 10801-9981**		-	**VARIOUS TRADE DEBT**				**592.00**

Sheet no. **91** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **66,492.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **IONA COLLEGE ADVANCEMENT** **715 NORTH AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**5,000.00**
Account No. **IRIS INTERNATIONAL INC** **PO BOX 101055** **PASADENA, CA 91189-1055**		-	**VARIOUS TRADE DEBT**				**34,063.83**
Account No. **ISHIKAWAWOLF ANA** **214 EAST 87TH ST** **NEW YORK, NY 10128**		-	**VARIOUS TRADE DEBT**				**856.00**
Account No. **J AND J BACKFLOW DEV** **115 WOODLAND AVE** **NEW ROCHELLE, NY 10805**	X	-	**VARIOUS TRADE DEBT**				**6,670.00**
Account No. **J-K PROSTHETICS ORTHOTICS** **694 LOCUST ST** **MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**1,500.00**

Sheet no. **92** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **48,089.83**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JA MAJORS** **PO BOX 277930** **ATLANTA, GA 30384-7938**	X	-	**VARIOUS TRADE DEBT**				**2,000.00**
Account No. **JACOB SUNITHA** **585 NORTH AVE** **REAR HOUSE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **JACOBS LOCK CO** **685 MAIN STREET** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,788.92**
Account No. **JAMES FERGUSON** **C/O KRAMER DILLOF & MORE** **217 BROADWAY** **New York, NY 10007**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JAN-MAR TROPHY COMPANY** **524 NORTH AVENUE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**363.55**

Sheet no. **93** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **6,652.47**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JANET WHITE C/O RICHARD WEISS 481 MAIN STREET, STE 304 New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JANET WHITE C/O RICHARD WEISS 481 MAIN STREET, STE 304 New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JASEXAUER PO BOX 404284 ATLANTA, GA 30384-4284**	X	-	**VARIOUS TRADE DEBT**				**8,796.45**
Account No. **JAVIER ROSENZWAIG C/O SINEL & ASSOCIATES 7 PENN PLAZA, 8TH FL New York, NY 10001**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JC EHRLICH CO INC PO BOX 13848 READING, PA 19612-3848**		-	**VARIOUS TRADE DEBT**				**700.00**

Sheet no. **94** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **9,496.45**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JEAN SINATRA** **C/O MIRMAN, MARKOVITZ & LANDAU** **291 BROADWAY, 6TH FL** **New York, NY 10007**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JEFFREY MULLOOLY** **C/O MULLOOLY, JEFFREY, ROONEY** **6851 JERICHO TPKE** **Syosset, NY 11791**	X	-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JENNIFER SLADE** **C/O PETER E. TANGREDI** **202 MAMARONECK AVE** **White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JESMAJIAN MD STEPHEN** **121 EDGARS LANE** **HASTINGS ON HUDSON, NY 10706**		-	**VARIOUS TRADE DEBT**				**4,579.89**
Account No. **JESSAMY BRIDGET** **155 SEARS AVENUE** **ELMSFORD, NY 10523**		-	**VARIOUS TRADE DEBT**				**2,500.00**

Sheet no. **95** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **7,079.89**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JIN JING** **167 CENTRE AVENUE** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **JIN YU** **RADIOLOGY DEPT** **16 GUION STREET** **New Rochelle, NY 10802**		-	**VARIOUS TRADE DEBT**				**15.00**
Account No. **JOANN FARAONE** **C/O SAM ROSMARIN** **11 MARTINE AVENUE, 9TH FL** **White Plains, NY 10606**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JOCELYN CARTER** **C/O WALLACE & ASSOCIATES** **66 MAIN STREET, STE 811** **Yonkers, NY 10701**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JOHN A COLEMANN SCHOOL** **317 NORTH STREET** **WHITE PLAINS, NY 10605**		-	**VARIOUS TRADE DEBT**				**2,300.00**

Sheet no. **96** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **4,815.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JOHN LOMBARDI C/O MEAGHER & MEAGHER 111 CHURCH STREET White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JOHNSON AND JOHNSON HC 6000 FELDWOOD RD COLLEGE PARK, GA 30349**	X	-	**Various Trade Debt**				**92,545.27**
Account No. **JOHNSON AND JOHNSON HOSP 6000 FELDWOOD RD BOA LOCKBX COLLEGE PARK, GA 30349**	X	-	**Various Trade Debt**				**40,098.01**
Account No. **JOHNSTONE SUPPLY OF WHITE 66 BROCKWAY PLACE WHITE PLAINS, NY 10601**	X	-	**VARIOUS TRADE DEBT**				**1,421.39**
Account No. **JOINT COMMISSION RESOURCES 1515 W22ND STREET SUITE 1300W OAK BROOK, IL 60523**		-	**VARIOUS TRADE DEBT**				**1,600.00**

Sheet no. **97** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **135,664.67**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JOINT RESTORATION FOUND** **PO BOX 843549** **KANSAS CITY, MO 64184-3549**	X	-	**Various** **Trade Debt**				**15,512.00**
Account No. **JONES JUANITA** **3369 SW SOUTHBROOK CT** **TOPEKA, KS 66614**	X	-	**VARIOUS** **TRADE DEBT**				**7,147.40**
Account No. **JONES SHELLY** **550 5TH AVENUE** **3F** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **TRADE DEBT**				**155.00**
Account No. **JORGE JOANEN** **C/O SHELDON E. GREEN** **566 SUNSET DRIVE, STE 202** **Woodmere, NY 11598**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **JOSE SALAZAR** **C/O GREGORY PECK** **350 FIFTH AVENUE, STE 2716** **New York, NY 10118**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **98** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **22,814.40**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **JT PACKARD** **275 INVESTMENT CT** **VERONA, WI 53593**		-	**VARIOUS TRADE DEBT**				**3,377.00**
Account No. **JUNIOR LEAGUE OF WEST SOU** **149 LARCHMONT AVE** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**375.00**
Account No. **JURGAN DEVELOPMENT AND MFG** **6018 S HIGHLANDS AVE** **MADISON, WI 53705**		-	**VARIOUS TRADE DEBT**				**458.00**
Account No. **JWP INFORMATION SYSTEMS** **175 LOUIS ST** **S HACKENSACK, NJ 07606**		-	**VARIOUS TRADE DEBT**				**7,309.00**
Account No. **JZANUS LTD** **170 JERICHO TURNPIKE** **FLORAL PARK, NY 11001**	X	-	**Various Trade Debt**				**67,111.29**

Sheet no. **99** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **78,630.29**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **KDM MEDICAL EQUIPMENT** **5507-10 NESCONSET HWY** **PMB 345 SUITE 10** **MOUNT SINAI, NY 11766**	X	-	**Various** **Trade Debt**				**87,111.60**
Account No. **KELLY MICHAEL J** **4-6 STARRS CROSSING** **WAPPINGER FALLS, NY 12590**		-	**VARIOUS** **TRADE DEBT**				**150.00**
Account No. **KELLY RANDALL ESQ** **12 EAST 86TH ST** **APT 1228** **NEW YORK, NY 10028**	X	-	**VARIOUS** **TRADE DEBT**				**2,100.00**
Account No. **KEY SURGICAL INC** **8101 WALLACE RD** **EDEN PRAIRIE, MN 55344-2114**	X	-	**VARIOUS** **TRADE DEBT**				**365.00**
Account No. **KHANGURA HARKANDER** **INTERNAL MEDICINE**		-	**VARIOUS** **TRADE DEBT**				**184.04**

Sheet no. **100** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **89,910.64**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **KHITHANI AMIT MD** **16 GUION PLACE** **NEW ROCHELLE, NY 10801-5502**		-	**VARIOUS TRADE DEBT**				**650.00**
Account No. **KINETIC CONCEPTS THER SER** **PO BOX 203086** **HOUSTON, TX 77216-3086**	X	-	**VARIOUS TRADE DEBT**				**2,839.59**
Account No. **KING GRAPHICS** **100 PLAISTOW RD** **PO BOX 181** **PLAISTOW, NH 03865**		-	**VARIOUS TRADE DEBT**				**387.00**
Account No. **KINGSLEY NOBUKO SERA** **830 PELHAMDALE AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**13,755.00**
Account No. **KIRWAN SURGICAL PRODUCTS** **180 ENTERPRISE DR** **MARSHFIELD, MA 02060**		-	**VARIOUS TRADE DEBT**				**2,924.55**

Sheet no. **101** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **20,556.14**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **KIWANIS CLUB MOUNT VERN** **625 5TH AVENUE** **PELHAM, NY 10803**	X	-	**VARIOUS TRADE DEBT**				**1,600.00**
Account No. **KOPP ELECTRIC CORPORATION** **59-27 GRAND AVENUE** **MASPETH, NY 11378**		-	**VARIOUS TRADE DEBT**				**27,180.00**
Account No. **KRAMER MARSHALLMD** **10 KENILWORTH LANE** **RYE, NY 10580**		-	**VARIOUS TRADE DEBT**				**18,333.32**
Account No. **KRAMES STAYWELL** **780 TOWNSHIP LINE RD** **YARDLEY, PA 19067**		-	**VARIOUS TRADE DEBT**				**15,360.96**
Account No. **KRAUS EVAN MD** **526 NE SILVER OAK TERRACE** **JENSEN BEACH, FL 34957**		-	**VARIOUS TRADE DEBT**				**3,541.90**

Sheet no. **102** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **66,016.18**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **KRESSNER MICHAEL MD** **200 STEVENS AVE** **MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**8,750.00**
Account No. **LAB SAFETY SUPPLY INC** **PO BOX 5004** **JANESVILLE, WI 53547-5004**	X	-	**VARIOUS TRADE DEBT**				**1,033.60**
Account No. **LAGARDE DIANA** **2 DIKE DRIVE** **MONSEY, NY 10952**		-	**VARIOUS TRADE DEBT**				**189.99**
Account No. **LAGRAVINESE JEANETTE** **99 FIFTH AVENUE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**597.96**
Account No. **LANDAUER** **PO BOX 809051** **CHICAGO, IL 60680-9051**	X	-	**VARIOUS TRADE DEBT**				**760.13**

Sheet no. **103** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **11,331.68**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LANWEHR BERNHARD MD** **7 BEDELL ROAD** **AMAWALK, NY 10501**		-	**VARIOUS TRADE DEBT**				**936.00**
Account No. **LANX INC** **PO BOX 122035** **DALLAS, TX 75312**		-	**VARIOUS TRADE DEBT**				**56,480.00**
Account No. **LARCHMAMAR'K BABE RUTH LE** **PO BOX 61** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**800.00**
Account No. **LARRY LUCADAMO** **C/O ROBERT O. CORINI** **542 MAIN STREET, STE. 101** **New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **LARYWON JONATHAN** **5 FELLOWSHIP LANE** **RYE BROOK, NY 10573**		-	**VARIOUS TRADE DEBT**				**1,325.63**

Sheet no. **104** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **59,541.63**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LAW OFFOF STEPHEN M PERLI** **110 WEST 34TH STREET** **STE 300** **NEW YORK, NY 10001**		-	**VARIOUS TRADE DEBT**				**500.00**
Account No. **LDR** **PO BOX 671716** **DALLAS, TX 75267**		-	**VARIOUS TRADE DEBT**				**25,720.00**
Account No. **LE MAITRE VASCULAR** **63 SECOND AVE** **BURLINGTON, MA 01803-4403**		-	**VARIOUS TRADE DEBT**				**1,153.00**
Account No. **LEAGUE OF VOLUNTARY HOSP** **555 WEST 57TH STREET** **NEW YORK, NY 10019**	X	-	**Various Trade Debt**				**40,865.00**
Account No. **LEGEND EMPLOYEE BENEFIT** **BANK OF AMERICA** **PO BOX 551073** **TAMPA, FL 33655-1073**		-	**VARIOUS TRADE DEBT**				**300.00**

Sheet no. **105** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **68,538.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LEICA MICRO SYSTEMS INC** **14008 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**333.35**
Account No. **LESLIE TRAMMELL** **C/O SAM ROSMARIN, ESQ.** **11 MARTINE AVEN, 9TH FLOOR** **White Plains, NY 10606**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **LEVENTOGLU FUSUN** **82 HAIGHTS CROSS RD** **CHAPPAQUA, NY 10514**		-	**VARIOUS TRADE DEBT**				**570.00**
Account No. **LEVITT MARGARET MD** **50 ELK AVENUE** **NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**2,131.28**
Account No. **LEWIS ROWENA** **1180 MIDLAND AVE** **APT 3L** **BRONXVILLE, NY 10708**		-	**VARIOUS TRADE DEBT**				**1,200.00**

Sheet no. **106** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **4,234.63**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LEXI-COMP** **ATTN: LAUREN LAVIN** **1100 TEREX RD** **HUDSON, OH 44236-3771**		-	**VARIOUS TRADE DEBT**				**35,800.00**
Account No. **LEXIS NEXIS** **PO BOX 7247-7090** **PHILADELPHIA, PA 19170-7090**		-	**VARIOUS TRADE DEBT**				**3,254.80**
Account No. **LIFE INSTRUMENTS CORP** **14 WOOD RD** **BRAINTREE, MA 02180**		-	**VARIOUS TRADE DEBT**				**9,788.48**
Account No. **LIFE MED OF CALIFORNIA** **1216 SOUTH ALLEC ST** **ANAHEIM, CA 92805-6301**		-	**VARIOUS TRADE DEBT**				**449.87**
Account No. **LIFE NET** **PO BOX 79636** **BALTIMORE, MD 21279-0636**	X	-	**Various Trade Debt**				**26,652.10**

Sheet no. **107** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **75,945.25**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LIFECELL CORPORATION P O BOX 203888 HOUSTON, TX 77216-3888**		-	**VARIOUS TRADE DEBT**				**12,228.00**
Account No. **LINDORA GOODMAN 626 A E 226TH ST BRONX, NY 10466**		-	**VARIOUS TRADE DEBT**				**1,770.00**
Account No. **LINTONPETER W 926 BURKE AVENUE 2ND FLOOR BRONX, NY 10469**		-	**VARIOUS TRADE DEBT**				**2,320.00**
Account No. **LISSMARK MD 115 EAST 86TH ST NEW YORK, NY 10028**		-	**VARIOUS TRADE DEBT**				**7,733.49**
Account No. **LITTLE LEAGUE OF NEW ROCHE TOCCI FIELD 30 TRINITY PL NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**300.00**

Sheet no. **108** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **24,351.49**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LIZETTE RODRIGUEZ** **C/O LOUIS G. SOLIMANO** **1180 MORRIS PARK AVE** **Bronx, NY 10461**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **LLOYD ELIZABETH** **115 IROQUOIS ROAD** **YONKERS, NY 10710**		-	**VARIOUS** **TRADE DEBT**				**100.00**
Account No. **LOCKWOOD REALTY GREENR** **701 WESTCHESTER AVE** **SUITE 310W** **WHITE PLAINS, NY 10604**	X	-	**Various** **Trade Debt**				**121,070.51**
Account No. **LOCKWOOD REALTY, LLC** **C/O REICH REICH & REICH** **235 MAIN STREET, ST 450** **White Plains, NY 10601**		-	**LEASE CLAIM**	X	X	X	**Unknown**
Account No. **LONG KATIE** **16 FRENCH RIDGE** **PH** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **TRADE DEBT**				**1,033.50**

Sheet no. **109** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **122,204.01**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LORD ABBET SERVICE CENTER** **P O BOX 219604** **KANSAS CITY, MO 64121-9604**	X	-	**Various Trade Debt**				**16,169.85**
Account No. **LORETINI ELAINE** **151 MAYFLOWER AVE** **NEW ROCHELLE, NY 10801**		-	**Various Trade Debt**				**45.00**
Account No. **LORETTA DOLPHUS** **C/O ROSENBERG, MINC FALKOFF** **122 EAST 42ND STREET, ST 3800** **New York, NY 10168**	X	-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **LORI'S HOSPITAL GIFT SHOPS** **2125 CHENAULT DR** **STE 100** **CARROLLTON, TX 75006**		-	**Various Trade Debt**				**2,221.85**
Account No. **LOUIS GALGANO** **C/O O'CONNOR HINTZ & DEVENEY** **ONE HUNTINGTON QUADRANGLE** **Melville, NY 11747**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **110** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **18,436.70**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **LYNX MEDICAL** **PO BOX 349620** **SEATTLE, WA 98124-1960**		-	**Various** **Trade Debt**				**5,019.86**
Account No. **LYOROSIE MD** **DEPARTMENT OF MEDICINE**		-	**Various** **Trade Debt**				**371.99**
Account No. **M AND M TORRES** **220 FIFTH AVE** **10 FLOOR** **NEW YORK, NY 10001**		-	**9/16/2009** **Malpractice Settlment**				**1,850,000.00**
Account No. **MACCLARING BLANCHARD** **C/O NYS DIV. HUMAN RIGHTS** **JOHN WALSH BLVD** **Peekskill, NY 10566**		-	**DISCRIMINATION CLAIM**	**X**	**X**	**X**	**Unknown**
Account No. **MACHAON DIAGOSTICS** **3023 SUMMIT STREET** **OAKLAND, CA 94609**		-	**Various** **Trade Debt**				**980.71**

Sheet no. **111** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **1,856,372.56**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MACKENZIE AUTOMATIC DOORS** **72 READE ST** **NEW YORK, NY 10007**	X	-	**Various** **Trade Debt**				**5,048.28**
Account No. **MAGENTA REALTY** **C/O KENNETH M. BUSHELL** **6132 RIVERDALE AVENUE** **Bronx, NY 10471**	X	-	**NONPAYMENT OF LEASE CLAIM**	X	X	X	**Unknown**
Account No. **MAGENTA REALTY LLC** **369 GLOUCESTER ST** **ENGLEWOOD, NJ 07631**		-	**Various** **Trade Debt**				**18,372.00**
Account No. **MAGUIRE ENTERPRISES INC** **10289 NW 46TH ST** **FT LAUDERDALE, FL 33351**		-	**Various** **Trade Debt**				**1,379.84**
Account No. **MAINE STANDARDS COMPANY** **765 ROOSEVELT TRAIL** **SUITE 9A** **WINDHAM, ME 04062**		-	**VARIOUS** **TRADE DEBT**				**1,124.68**

Sheet no. **112** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **25,924.80**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MAINLINE MEDICAL INC** **3250-J PEACHTREE CORNERS CIR** **NORCROSS, GA 30092-4301**		-	**VARIOUS TRADE DEBT**				**349.35**
Account No. **MALTESE LIZA** **51 WOODLAND AVE** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **MAMANGAKIS JOHN P** **50 FULTON AVENUE** **RYE, NY 10580**		-	**VARIOUS TRADE DEBT**				**251.54**
Account No. **MANDEL MICHAELMD** **33 CROFTS LA** **STAMFORD, CT 06903**		-	**VARIOUS TRADE DEBT**				**1,615.00**
Account No. **MANOHAR SANDHYA** **DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**683.60**

Sheet no. **113** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **5,399.49**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MARIA DIFATTA** **C/O DE CARO & DE CARO** **480 MAMARONECK AVE** **Harrison, NY 10528**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **MARIO BULFAMANTE AND SONS** **75 PORTMAN RD** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**25,135.00**
Account No. **MARSDEN MEDICAL PHYSICS** **266 LONG MEADOW RD** **KINNELON, NJ 07405**	X	-	**VARIOUS TRADE DEBT**				**2,000.00**
Account No. **MARTAB MEDICAL** **300-F ROUTE 17 SOUTH** **MAHWAH, NJ 07430**	X	-	**VARIOUS TRADE DEBT**				**12,250.00**
Account No. **MARTHA GUADAGNOLO** **C/O SIMONSON HESS & LEIBOWITZ** **15 MAIDEN LANE** **New York, NY 10038**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **114** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **39,385.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MARTINOROSEMARY** **SSHSW - ADM**		-	**VARIOUS TRADE DEBT**				**249.86**
Account No. **MARY MAHER** **C/O KRINSKY & MUSUMECI** **274 MADISON AVE, STE 402** **New York, NY 10016**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **MASE CODING SERVICES** **170 NEW YORK AVENUE** **STE 8** **BROOKLYN, NY 11216**		-	**VARIOUS TRADE DEBT**				**27,541.00**
Account No. **MASSA AND ASSOCIATES INC** **100 NORTH CENTRE AVE** **SUITE 400** **ROCKVILLE CENTER, NY 11570**	X	-	**VARIOUS TRADE DEBT**				**17,249.00**
Account No. **MASSMUTUAL** **1295 STATE STREET** **SPRINGFIELD, MA 01111**		-	**VARIOUS TRADE DEBT**				**20,052.93**

Sheet no. **115** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **65,092.79**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MASTER LOCK** **POBOX 927** **OAK CREEK, WI 53154**		-	**VARIOUS TRADE DEBT**				**20.96**
Account No. **MATHEW LEENA** **16 SIMPSON PLACE** **YONKERS, NY 10710**		-	**VARIOUS TRADE DEBT**				**2,280.00**
Account No. **MAXIM HEALTHCARE SERVICES** **12558 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**10,211.50**
Account No. **MAXIM MEDICAL SERVICES** **12632 US HWY 33 NO** **CHURUBUSCO, IN 46723**		-	**VARIOUS TRADE DEBT**				**6,450.00**
Account No. **MCCLAVE ENGINEERING PC** **125 OAKLAND AVE** **SUITE 201** **PORT JEFFERSON, NY 11777**		-	**VARIOUS TRADE DEBT**				**18,480.00**

Sheet no. **116** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **37,442.46**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MCENEANEYES Q JANET** **4919 PARKVIEW DR** **MCCULLOM LAKE, IL 60050**		-	**VARIOUS TRADE DEBT**				**3,750.00**
Account No. **MCKESSON INFO SOLUTIONS** **PO BOX 98347** **CHICAGO, IL 60693-8347**	X	-	**Various Trade Debt**				**496,130.59**
Account No. **MCQUAY FACTORY SERVICE** **72 GRAYS BRIDGE ROAD** **SUITE 1** **BROOKFIELD, CT 06804**		-	**VARIOUS TRADE DEBT**				**2,983.34**
Account No. **MCROBERTS SEC TECHPROSE** **46 THROCKMORTON ST** **FREEHOLD, NJ 07728**	X	-	**VARIOUS TRADE DEBT**				**10,157.50**
Account No. **MD RESOURCE CORP** **5981 GRAHAM CT** **LIVERMORE, CA 94550**		-	**VARIOUS TRADE DEBT**				**462.00**

Sheet no. **117** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **513,483.43**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MED ALLIES** **300 WESTAGE BUS CTR DR** **FISHKILL, NY 12524**		-	**VARIOUS TRADE DEBT**				**40,053.39**
Account No. **MED ONE** **10712 SOUTH** **1300 EAST** **SANDY, UT 84094**	X	-	**Various Trade Debt**				**26,543.75**
Account No. **MED-LABEL INC** **PO BOX 721** **FLANDERS, NJ 07836**		-	**VARIOUS TRADE DEBT**				**682.15**
Account No. **MEDCOMP** **1499 DELP DR** **HARLEYSVILLE, PA 19438-2936**		-	**VARIOUS TRADE DEBT**				**7,170.00**
Account No. **MEDI DRAPES INC** **1000 MAPLE AVENUE** **SUITE GW** **DOWNERS GROVE, IL 60515**		-	**VARIOUS TRADE DEBT**				**976.00**

Sheet no. **118** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **75,425.29**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MEDI-COURIER INC** **15 EAST PUTNAM AVENUE** **SUITE 251** **GREENWICH, CT 06830**		-	**VARIOUS TRADE DEBT**				**41,678.43**
Account No. **MEDI-FILE** **615 CENTER AVENUE** **MAMARONECK, NY 10543**		-	**VARIOUS TRADE DEBT**				**16,125.00**
Account No. **MEDICAL ARTS SUPPORT** **57 IRA ROAD** **188** **SYOSSET, NY 11791**		-	**VARIOUS TRADE DEBT**				**7,538.75**
Account No. **MEDICAL DOCTOR ASSOCIATES** **PO BOX 277185** **ATLANTA, GA 30384-7185**		-	**VARIOUS TRADE DEBT**				**17,000.00**
Account No. **MEDICAL IMAGE ENHANCEMENT** **815 MONTGOMERY ST** **FALL RIVER, MA 02720**		-	**VARIOUS TRADE DEBT**				**12,500.00**

Sheet no. **119** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **94,842.18**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MEDICAL SOC CTY OF WESTCH** **333 WESTCHESTER AVE** **STE LN01** **NEW ROCHELLE, NY 10604**		-	**VARIOUS** **TRADE DEBT**				**1,650.00**
Account No. **MEDICAL SOC OF STATE OF NY** **865 MERICK AVE** **WESTBURY, NY 11590**		-	**VARIOUS** **TRADE DEBT**				**970.00**
Account No. **MEDICAL SPECIALISTS DIST** **PO BOX 11407** **BIRMINGHAM, AL 35246-1729**		-	**VARIOUS** **TRADE DEBT**				**26,760.00**
Account No. **MEDICAL SPECIALTIES** **C/O KLEINMAN SALTZMAN** **151 NORTH MAIN STREET, 4TH FL** **New City, NY 10956**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **MEDIFAX-EDI LLC** **PO BOX 572490** **MURRAY, UT 84157-2490**	X	-	**Various** **Trade Debt**				**16,268.91**

Sheet no. **120** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **45,648.91**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MEDITAB CONSULTING CORP** **407 AIRPORT EXECUTIVE PARK** **NANUET, NY 10954**		-	**VARIOUS TRADE DEBT**				**27,955.46**
Account No. **MEDIWARE INFOSYSTEMS** **PO BOX 414938** **KANSAS CITY, MO 64141-4938**		-	**VARIOUS TRADE DEBT**				**145,863.97**
Account No. **MEDLINE INDUSTRIES** **ONE MEDLINE PLACE** **MUNDELEIN, IL 60060-4485**	X	-	**Various Trade Debt**				**599,733.26**
Account No. **MEDRAD INC** **1025 NORTH MICHIGAN ST** **ELKHART, IN 46514**	X	-	**VARIOUS TRADE DEBT**				**11,541.13**
Account No. **MEDSEEK INC** **PO BOX 36843** **BIRMINGHAM, AL 35236**		-	**VARIOUS TRADE DEBT**				**27,068.78**

Sheet no. **121** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **812,162.60**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MEDTRONIC POWERED SURGSOL** **4642 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**23,717.10**
Account No. **MEDTRONIC SOFAMOR DANEK** **12099 COLLECTION CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**3,665.00**
Account No. **MEDTRONIC USA INC** **4642 COLLECTION CTR DR** **CHICAGO, IL 60693**	X	-	**Various Trade Debt**				**336,588.84**
Account No. **MELVIN BEACHER - ARCHITECT** **50 WEBSTER AVENUE** **NEW ROCHELLE, NY 10801**	X	-	**Various Trade Debt**				**31,875.00**
Account No. **MENTOR WORLDWIDE LLC** **15600 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**18,125.25**

Sheet no. **122** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **413,971.19**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MERCURY MEDICAL** **11300 49TH ST NO** **CLEARWATER, FL 33762-4807**		-	**VARIOUS TRADE DEBT**				**332.50**
Account No. **MERCY COLLEGE** **OFFICE OF INSTITUTIONAL ADV** **555 BROADWAY** **DOBBS FERRY, NY 10522**		-	**VARIOUS TRADE DEBT**				**250.00**
Account No. **MERIT MEDICAL SYSTEMS INC** **PO BOX 951129** **SOUTH JORDAN, UT 84095**		-	**VARIOUS TRADE DEBT**				**3,000.00**
Account No. **MERRIT MEDICAL INC** **21495 RIDGETOP CIR** **201 SUITE 201** **STERLING, VA 20166-6512**		-	**VARIOUS TRADE DEBT**				**431.15**
Account No. **METRO BLOOD SERVICE** **1150 YONKERS AVE** **YONKERS, NY 10704-3214**		-	**VARIOUS TRADE DEBT**				**151,796.00**

Sheet no. **123** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **155,809.65**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **METROPOLITAN DATA SOLN** **PO BOX 11394** **NEWARK, NJ 07101-4394**		-	**VARIOUS TRADE DEBT**				**1,759.40**
Account No. **METROPOLITAN MEDICAL** **360-4 MCGHEE ROAD** **WINCHESTER, VA 22603**		-	**VARIOUS TRADE DEBT**				**2,253.83**
Account No. **MICROAIRE SURGICAL INSTR** **LOCK BOX 96565** **CHICAGO, IL 60693**	X	-	**VARIOUS TRADE DEBT**				**8,177.65**
Account No. **MICROMAGIC CO INC** **1785 78TH STREET** **BROOKLYN, NY 11214**		-	**VARIOUS TRADE DEBT**				**209.95**
Account No. **MICRONIX SYSTEM INC** **44 COMMERCE ST** **SPRINGFIELD, NJ 07081**		-	**VARIOUS TRADE DEBT**				**471.50**

Sheet no. **124** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **12,872.33**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MIDWEST MEDICAL RECORD ASS** **PO BOX 59498** **SCHAUNBURG, IL 60159**	X	-	**Various** **Trade Debt**				**27,311.01**
Account No. **MILLER AND MILONE PC** **100 QUENTIN ROOSEVELT BLVD** **GARDEN CITY, NY 11530**	X	-	**Various** **Trade Debt**				**131,712.11**
Account No. **MIRAMED REVENUE GROUP LLC** **991 OAK CREEK DR** **LOMBARD, IL 60148**	X	-	**Various** **Trade Debt**				**14,588.90**
Account No. **MJSL** **156 SOUNDVIEW DR** **MAMARONECK, NY 10543**		-	**VARIOUS** **TRADE DEBT**				**250.00**
Account No. **MMI** **6060 POPLAR AVE** **SUITE 254** **MEMPHIS, TN 38119**	X	-	**Various** **Trade Debt**				**34,450.00**

Sheet no. **125** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **208,312.02**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MODERN MEDICAL SYSTEMS** **170 FINN COURT** **SUITE 1** **FARMINGDALE, NY 11735**	X	-	**Various** **Trade Debt**				**360,382.30**
Account No. **MONTOYA JANNETH MD** **830 PELHAMDALE AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **TRADE DEBT**				**2,185.86**
Account No. **MORAN-RACANELLO PLBG** **PO BOX 238** **NEW ROCHELLE, NY 10804**	X	-	**VARIOUS** **TRADE DEBT**				**8,650.00**
Account No. **MOUNT SINAI SCHOOL OF MED** **25 PLAZA ST** **APT 2C** **BROOKLYN, NY 11237**		-	**VARIOUS** **TRADE DEBT**				**20,833.34**
Account No. **MSDS ONLINE** **350 N ORLEANS** **SUITE 950** **CHICAGO, IL 60654**		-	**VARIOUS** **TRADE DEBT**				**2,473.00**

Sheet no. **126** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **394,524.50**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MT SINAI SCHOOL OF MED OB** **1176 FIFTH AVENUE** **BOB 1170** **NEW YORK, NY 10029**		-	**VARIOUS TRADE DEBT**				**62,500.02**
Account No. **MT VERNON CHAMBER OF COMM** **PO BOX 351** **MT VERNON, NY 10551**		-	**VARIOUS TRADE DEBT**				**1,275.00**
Account No. **MT VERNON HEIGHTS CON CHU** **258 S COLUMBUS AVE** **MOUNT VERNON, NY 10553**		-	**VARIOUS TRADE DEBT**				**750.00**
Account No. **MT VERNON POLICE FOUND** **800 CANAL STREET** **MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**800.00**
Account No. **MULLOOLY JEFFREY ROONEY** **6851 JERICHO TPK** **STE 220** **SYOSSET, NY 11791-9036**		-	**VARIOUS TRADE DEBT**				**90,680.66**

Sheet no. **127** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **156,005.68**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **MUSCULOSKELETAL TRANSPLANT** **125 MAY STREET** **SUITE 300** **EDISON, NJ 08837**		-	**VARIOUS TRADE DEBT**				**57,247.00**
Account No. **MYEVALUATIONS COM** **1275 FIRST AVE** **SUITE 234** **NEW YORK, NY 10021**		-	**VARIOUS TRADE DEBT**				**7,164.00**
Account No. **N R Y T L** **PO BOX 1243** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**250.00**
Account No. **NADELBACH JAY ESQ** **147-10 78TH AVE** **FLUSHING, NY 11367**		-	**VARIOUS TRADE DEBT**				**6,300.00**
Account No. **NASCO** **901 JANESVILLE AVE** **FORT ATKINSON, WI 53538-0901**	X	-	**VARIOUS TRADE DEBT**				**1,606.65**

Sheet no. **128** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **72,567.65**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NAT'L FIRE PROASSOMBR** **11 TRACY DRIVE** **AVON, MA 02322-9908**		-	**VARIOUS TRADE DEBT**				**1,615.50**
Account No. **NATIONAL DUST CONTROL** **200 BLACKFORD AVE** **MIDDLESEX, NJ 08846-2599**		-	**VARIOUS TRADE DEBT**				**4,010.00**
Account No. **National Government Services** **P.O. Box 4900** **Syracuse, NY 13221**		-	**Various Trade Debt**	X			**2,535,800.00**
Account No. **NATUS MEDICAL INC** **DEPT 33768** **PO BOX 39000** **SAN FRANCISCO, CA 94139**		-	**VARIOUS TRADE DEBT**				**1,821.77**
Account No. **NATUS NEUROLOGY** **88059 EXPEDITE WAY** **CHICAGO, IL 60695-0001**		-	**VARIOUS TRADE DEBT**				**145.73**

Sheet no. **129** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **2,543,393.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NAVILYST MEDICAL NAMIC** **10 GLEN FALLS TECH PARK** **GLEN FALLS, NY 12801-3864**		-	**VARIOUS TRADE DEBT**				**3,545.37**
Account No. **NCADDWESTCHESTER INC** **5 WALLER AVE** **SUITE 105** **WHITE PLAINS, NY 10601**		-	**VARIOUS TRADE DEBT**				**250.00**
Account No. **NCI COMMUNICATIONS LLC** **560 WHITE PLAINS RD** **SUITE 410** **TARRYTOWN, NY 10591**		-	**VARIOUS TRADE DEBT**				**225.00**
Account No. **NCO FINANCIAL SYSTATTN KG** **24886 NETWORK PLAZA** **CHICAGO, IL 60673-1248**		-	**VARIOUS TRADE DEBT**				**83.94**
Account No. **NEAT HEAT CLIMATE CONTROL** **35 ALABAMA AVE** **ISLAND PARK, NY 11558**		-	**VARIOUS TRADE DEBT**				**4,250.00**

Sheet no. **130** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **8,354.31**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NEOMEND INC DEPT CH 16886 PALATINE, IL 60055-6886**	X	-	**VARIOUS TRADE DEBT**				**6,894.44**
Account No. **NEOPOST INC PO BOX 45800 SAN FRANCISCO, CA 94145-0800**		-	**VARIOUS TRADE DEBT**				**266.00**
Account No. **NEOPOST NEW ENGLAND METALS DRIVE PO BOX 392 SOUTHINGTON, CT 06489**		-	**VARIOUS TRADE DEBT**				**1,829.00**
Account No. **NEPTUNE PROFESSIONAL CLEAN 2841 TIEMAN AVE BRONX, NY 10469**		-	**VARIOUS TRADE DEBT**				**200.00**
Account No. **NEUROLOGICAL ASSOC OF W 421 HUGUENOT STREET NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**2,125.00**

Sheet no. **131** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **11,314.44**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NEUROLOGY ASSO OF WEST NEW YORK MEDICAL COLLEGE MUNGER PAVILION VALHALLA, NY 10595**		-	**VARIOUS TRADE DEBT**				**171,168.10**
Account No. **NEW INNOVATIONS INC 3743 BOETTLER OAKS DR STE B UNIOTOWN, OH 44685**		-	**VARIOUS TRADE DEBT**				**525.00**
Account No. **NEW JERSEY WAFFLE CO PO BOX 1489 TOM RIVER, NJ 08754**	X	-	**VARIOUS TRADE DEBT**				**109.68**
Account No. **NEW ROCH HIGH SCHOOL FOOT 42 WEST CASTLE PLACE CO FRANK A MICELIE NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**800.00**
Account No. **NEW ROCHELLE FIRE DEPT 90 BEAUFORT PL NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**662.00**

Sheet no. **132** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **173,264.78**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NEW ROCHELLE PARKS REC** **515 NORTH AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,050.00**
Account No. **NEW ROCHELLE POLICE FOUND** **475 NORTH AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**4,100.00**
Account No. **NEW ROCHELLE RAD ASSOC** **175 MEMORIAL HWY** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,050.00**
Account No. **NEW ROCHELLE SOUND SHORE** **16 GUION PLACE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**64,363.94**
Account No. **NEW WAVE SURGICAL CORP** **3890 PARK CENTRAL BLVD NO** **POMPANO BEACH, FL 33064**		-	**VARIOUS TRADE DEBT**				**403.50**

Sheet no. **133** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **70,967.44**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NEW YORK BLOOD CENTER ACCOUNTS RECEIVABLE PO BOX 9674 UNIONDALE, NY 11553-9814**	X	-	**Various Trade Debt**				**35,872.03**
Account No. **NEW YORK DIALYSIS C/O NEIL COHEN 555 MADISON AVENUE New York, NY 10022**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Account No. **NEW YORK DIALYSIS SERVICES 861 MARCON BLVD STE 2 ALLENTOWN, PA 18109**		-	**VARIOUS TRADE DEBT**				**36,050.00**
Account No. **NEW YORK HOME HEALTH CARE 30 HOPPER STREET WESTBURY, NY 11590**	X	-	**VARIOUS TRADE DEBT**				**6,170.60**
Account No. **NEW YORK MED COLLEGE 40 SUNSHINE COTTAGE RD ATTN DR MARC WALLACK VALHALLA, NY 10595**		-	**Various Trade Debt**				**77,934.09**

Sheet no. **134** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **156,026.72**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NEW YORK MEDICAL COLLEGE C/O BLEAKLEY PLATT & SCHMIDT 1 NORTH LEXINGTON AVE White Plains, NY 10602**		-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **NEW YORK RAD ALLIANCE 25983 NETWORK PLACE CHICAGO, IL 60673-1259**	X	-	**Various Trade Debt**				**654,771.86**
Account No. **NEXERA INC 555 WEST 57TH ST NEW YORK, NY 10019**	X	-	**Various Trade Debt**				**150,000.00**
Account No. **NEXTEL COMMUNICATIONS PO BOX 4181 CAROL STREAM, IL 60197-4181**	X	-	**Various Trade Debt**				**23,559.83**
Account No. **NIHON KOHDEN AMERICA INC 6017 SOLUTIONS CTR LOCKBOX776017 CHICAGO, IL 60677-6000**		-	**VARIOUS TRADE DEBT**				**5,439.58**

Sheet no. **135** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **833,771.27**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NIMSOFT LLC** **1919 S BASCOM AVE** **STE 600** **CAMPBELL, CA 95008**		-	**VARIOUS** **TRADE DEBT**				**16,897.50**
Account No. **NIXON PEABODY LLP** **50 JERICHO QUAD** **SUITE 300** **JERICHO, NY 11753-2728**		-	**Various** **Trade Debt**				**373,029.25**
Account No. **NNAEMEKA PETER MD** **140 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **TRADE DEBT**				**4,445.00**
Account No. **NOODLE SOUPWEINGART** **4614 PROSPECT AVE** **328** **CLEVELAND, OH 44103-4314**		-	**VARIOUS** **TRADE DEBT**				**867.50**
Account No. **NORTHERN METROPOLITAN HOS** **400 STONY BROOK CT** **NEWBURGH, NY 12550**	X	-	**VARIOUS** **TRADE DEBT**				**5,059.00**

Sheet no. **136** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **400,298.25**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NOTIFY MDPROCALL** **25661 NETWORK PL** **CHICAGO, IL 60673-1256**		-	**VARIOUS TRADE DEBT**				**1,306.22**
Account No. **NR FUND EDUCATIONAL EXC** **265 CLOVE ROAD** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,300.00**
Account No. **NR UNIFORMED FIREFIGHTERS** **PO BOX 1534** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**750.00**
Account No. **NUENERGEN** **C/O DANIELS & PORCO** **517 RTE 22** **PAWLING, NY**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **NUENERGEN LLC** **50 MAIN STREET** **WHITE PLAINS, NY 10606**	X	-	**Various Trade Debt**				**17,247.60**

Sheet no. **137** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **20,603.82**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NURSES NETWORK OF AMERICA** **1362 PELHAMDALE AVE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **NUTRITION MGMT SERVICES CO** **2071 KIMBERTON RD** **KIMBERTON, PA 19442**	X	-	**Various Trade Debt**				**492,079.95**
Account No. **NY HEALTH INFO MGMT ASSOC** **19 AVIATION RD** **ALBANYN PARK, NY 12205-1142**		-	**VARIOUS TRADE DEBT**				**50.00**
Account No. **NY IMAGING INC** **5 JEANNE DRIVE** **SUITE 3** **NEWBURGH, NY 12550**	X	-	**VARIOUS TRADE DEBT**				**3,050.00**
Account No. **NY SOCIETY FOR HEALTH PLAN** **706 BLOOMFIELD AVE** **WEST CALDWELL, NJ 07006**		-	**VARIOUS TRADE DEBT**				**450.00**

Sheet no. **138** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **498,129.95**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NYACP** **744 BROADWAY** **ALBANY, NY 12207**		-	**VARIOUS TRADE DEBT**				**900.00**
Account No. **NYH-CUMC PATHOLOGISTS** **BOX 29409 GPO** **NEW YORK, NY 10087-9409**		-	**VARIOUS TRADE DEBT**				**900.00**
Account No. **NYS DEPT HEALTH** **SPARCS 122 ESP-CORNING TOWER** **ROOM 1223** **ALBANY, NY 12237**	X	-	**Various Trade Debt**				**76,229.30**
Account No. **NYS DEPT OF HEALTH** **1218 CENTRAL AVE** **ALBANY, NY 12205**	X	-	**Various Trade Debt**				**28,698.25**
Account No. **NYS Dept of Health** **Corning Tower Building** **Room 1043** **Albany, NY 12237**		-	**Various Trade Debt**	X			**1,584,800.00**

Sheet no. **139** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **1,691,527.55**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NYS DEPT OF TRANS** **50 WOLF ROAD** **ALBANY, NY 12232**		-	**VARIOUS TRADE DEBT**				**152,664.23**
Account No. **NYS EXCESS LIABILITY POOL** **217 GREAT OAKS BLVD** **ALBANY, NY 12203**	X	-	**Various Trade Debt**				**92,000.00**
Account No. **NYS HESC** **PO BOX 1290** **NEWARK, NJ 07101-1290**	X	-	**VARIOUS TRADE DEBT**				**527.00**
Account No. **NYS OMIGTPL** **PO BOX 414974** **BOSTON, MA 02241-4974**	X	-	**Various Trade Debt**				**16,454.82**
Account No. **NYSCSPC** **PO BOX 15361** **ALBANY, NY 12212-5361**	X	-	**VARIOUS TRADE DEBT**				**3,504.94**

Sheet no. **140** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **265,150.99**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **NYSCSPC BRONX PO BOX 15363 ALBANY, NY 12212-5363**		-	**VARIOUS TRADE DEBT**				**2,608.00**
Account No. **NYSCSPC WESTCHESTER PO BOX 15363 ALBANY, NY 12212-5363**		-	**VARIOUS TRADE DEBT**				**14,246.16**
Account No. **OCEAN SIDE INSTITUTIONAL 2525 LONG BEACH RD OCEANSIDE, NY 11572**	X	-	**Various Trade Debt**				**171,408.29**
Account No. **OCEGUERA MILIA ANA 238 UNION AVENUE NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**100.00**
Account No. **ODYSSEY AUDIOLOGY INC 207 MAYFLOWER AVE WILLISTON PARK, NY 11596**		-	**VARIOUS TRADE DEBT**				**2,160.00**

Sheet no. **141** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **190,522.45**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **OFFICE DIMENSIONS PO BOX 2180 TEANECK, NJ 07666-1580**		-	**VARIOUS TRADE DEBT**				**20,035.00**
Account No. **OFS BRANDS INC FIRST OFF 1204 EAST SIXTH ST HUNTINGBURG, IN 47542**		-	**VARIOUS TRADE DEBT**				**4,813.25**
Account No. **OHIO MEDICAL CORPORATION 1111 LAKESIDE DRIVE GURNEE, IL 60031-4099**		-	**VARIOUS TRADE DEBT**				**20,808.88**
Account No. **OLUYSANYA OLAJUMOLE 608 MAPLE AVE TEANECK, NJ 07666**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **OLYMPUS AMERICA INC BOX 200194 PITTSBURGH, PA 15251-0194**	**X**	-	**Various Trade Debt**				**20,286.46**

Sheet no. **142** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **68,443.59**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **OMEGA ENV SERV** **280 HUYLER ST** **SO HACKENSACK, NJ 07606**		-	**VARIOUS TRADE DEBT**				**138,742.00**
Account No. **OMNITECH HEALTH INC** **1980-A CHEMIN DU FER A CHEVAL** **SAINTE-JULIE, QUEBEC CANADA** **J3E2T7**		-	**VARIOUS TRADE DEBT**				**875.00**
Account No. **ON ASSIGNMENT HEALTH** **FILE 54318** **LOS ANGELES, CA 80074-4318**		-	**VARIOUS TRADE DEBT**				**35,960.00**
Account No. **ON POINT PARTNERS** **234 SILVERLAKE BLVD** **CARLE PLACE, NY 11514**		-	**VARIOUS TRADE DEBT**				**71,437.50**
Account No. **ONWARD HEALTHCARE** **C/O SMITH & SHAPIRO** **116 EAST 27TH , 3RD FL** **New York, NY 10016**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**

Sheet no. **143** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **247,014.50**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ONWARD HEALTHCARE INC** **P O BOX 27421** **NEW YORK, NY 10087-7421**		-	**VARIOUS TRADE DEBT**				**40,630.72**
Account No. **OPEN DOOR** **2 CHURCH STREET** **SUITE 201** **OSSINING, NY 10562**		-	**VARIOUS TRADE DEBT**				**2,000.00**
Account No. **OPOKU BENJAMIN** **4050 GRACE AVE** **1** **BRONX, NY 10466**		-	**VARIOUS TRADE DEBT**				**2,100.00**
Account No. **OPTICAL ARCHIVES** **550 MAMARONECK AVE** **HARRISON, NY 10528**		-	**VARIOUS TRADE DEBT**				**25,457.80**
Account No. **OPTO-SYSTEMS INC** **120 TERRY DRIVE** **PO BOX 1187** **NEWTON, PA 18940**		-	**VARIOUS TRADE DEBT**				**5,140.12**

Sheet no. **144** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **75,328.64**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **OPTUMINSIGHT INC** **PO BOX 27116** **SALT LAKE CITY, UT 84127-0116**		-	**VARIOUS TRADE DEBT**				**4,957.06**
Account No. **ORANGE PATHOLOGY ASSOC** **156 ROUTE 59** **SUITE B4** **SUFFERN, NY 10901**		-	**Various Trade Debt**				**321,804.33**
Account No. **ORASURE TECHNOLOGIES INC** **DEPARTMENT 269701** **PO BOX 67000** **DETROIT, MI 48267-2697**	X	-	**VARIOUS TRADE DEBT**				**5,574.80**
Account No. **ORGANOGENESIS INC** **PO BOX 842958** **BOSTON, MA 02284-2958**	X	-	**Various Trade Debt**				**69,263.30**
Account No. **ORTEGA KWEN R** **DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**995.00**

Sheet no. **145** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **402,594.49**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ORTHO RANGE LTD** **49 HALSTEAD AVE** **HARRISON, NY 10528**	X	-	**VARIOUS TRADE DEBT**				**1,613.90**
Account No. **ORTHOFIX INC** **PO BOX 849806** **DALLAS, TX 75284-9806**	X	-	**Various Trade Debt**				**70,619.04**
Account No. **ORTHOFIX SPINAL IMPLANTS** **BLACKSTONE MEDICAL INC** **PO BOX 842452** **DALLAS, TX 75284-2452**		-	**VARIOUS TRADE DEBT**				**87,775.00**
Account No. **ORTHOHELIX SURG DESIGNS** **75 REMITTANCE DR** **STE 6688** **CHICAGO, IL 60675**		-	**VARIOUS TRADE DEBT**				**7,417.70**
Account No. **ORTHOPRO FOOT AND ANKLE** **PO BOX 9552** **SALT LAKE CITY, UT 84106**		-	**VARIOUS TRADE DEBT**				**1,285.00**

Sheet no. **146** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **168,710.64**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ORTHOSONICS LTD** **71 PASSAIC AVE** **FLORHAM PARK, NJ 07932**		-	**VARIOUS TRADE DEBT**				**2,700.00**
Account No. **ORTHOVITA INC** **POBOX 8500-1286** **PHILADELPHIA, PA 19178**		-	**VARIOUS TRADE DEBT**				**4,332.00**
Account No. **OSPREY BIOMEDICAL CORP** **OSPREYY BIOMEDICAL CORP** **PO BOX 510793** **PHILADELPHIA, PA 19175-0793**		-	**VARIOUS TRADE DEBT**				**27,329.00**
Account No. **OSTEOMED LP** **2241 COLLECTION CTR DR** **CHICAGO, TX 60693**	X	-	**VARIOUS TRADE DEBT**				**821.50**
Account No. **OSTEOTECH INC** **51 JAMES WAY** **EATONTOWN, NJ 07724**		-	**VARIOUS TRADE DEBT**				**6,557.22**

Sheet no. **147** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **41,739.72**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **OSTROWITZ MATTHEW MD** **16 Guion Street** **New Rochelle, NY 10802**	X	-	**VARIOUS TRADE DEBT**				**1,159.00**
Account No. **OTTOBOCK HEALTHCARE** **2801 SOUTH FAIR LANE** **STE 101** **TEMPE, AZ 85282**	X	-	**Variuos Trade Debt**				**13,495.00**
Account No. **OUTCOME** **PO BOX 983022** **BOSTON, MA 02298-3032**		-	**VARIOUS TRADE DEBT**				**8,861.00**
Account No. **OWENS AND MINOR** **2975 W CORP LAKES BLVD** **WESTON, FL 33331-3626**	X	-	**VARIOUS TRADE DEBT**				**2,488.46**
Account No. **OXFORD - BRIDGEPORT** **PO BOX 7082** **BRIDGEPORT, CT 06601**		-	**VARIOUS TRADE DEBT**				**597.78**

Sheet no. **148** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **26,601.24**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **P2W INC NFP** **2111 MCDONALDS DRIVE** **OAK BROOK, IL 60523**		-	**VARIOUS TRADE DEBT**				**125.00**
Account No. **PALCO MECHANICAL LLC** **925 SAW MILL RIVER RD** **YONKERS, NY 10710**		-	**VARIOUS TRADE DEBT**				**8,301.00**
Account No. **PALL MEDICAL** **1001 CHERI WAY** **LOUISVILLE, KY 40118**		-	**VARIOUS TRADE DEBT**				**1,386.96**
Account No. **PARIS-KIRWIN** **802 WEST PARK AVENUE** **STE 302** **OCEAN, NJ 07712**		-	**VARIOUS TRADE DEBT**				**38,247.75**
Account No. **PARKER JOAN DR** **48 TURNBRIDGE RD** **HAVERFORD, PA 19041**		-	**VARIOUS TRADE DEBT**				**1,016.00**

Sheet no. **149** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **49,076.71**

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In re **Sound Shore Medical Center of Westchester** Case No. **13-22840**
Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PASSPORT HEALTH COMMUNICAT** **720 COOL SPRINGS BLVD** **FRANKLIN, TN 37067**		-	**VARIOUS TRADE DEBT**				**15,107.34**
Account No. **PATCH** **PO BOX 29933** **NEW YORK, NY 10087**		-	**VARIOUS TRADE DEBT**				**3,648.00**
Account No. **PATEL PARITA** **38 CARUTH AVE** **ELMWOOD PARK, NJ 07407**		-	**VARIOUS TRADE DEBT**				**188.11**
Account No. **PATRICIA HENRY** **C/O PARKER WAICHMAN** **6 HARBOR PARK DRIVE SOUTH** **Port Washington, NY 11050**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **PATRICIA NARDOZZI** **C/O MIRMAN MARKOVITS & LANDAU** **291 BROADWAY, 6TH FL** **New York, NY 10007**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **150** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **18,943.45**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PATTERSON OFF SUPP COLWEL** **PO BOX 9009** **CHAMPAIGN, IL 61826-9009**		-	**VARIOUS TRADE DEBT**				**73.08**
Account No. **PAYROLL FORMS COM** **DIVCHARTER HOUSE LLC** **8101 SE 138 DRIVE** **PORTLAND, OR 97236-7200**		-	**VARIOUS TRADE DEBT**				**37.05**
Account No. **PCI MEDICAL** **PO BOX 188** **12 BRIDGE STREET** **DEEP RIVER, CT 06417**	X	-	**VARIOUS TRADE DEBT**				**1,917.00**
Account No. **PEACHTREE BUSINESS PRODUCT** **PO BOX 13290** **ATLANTA, GA 30324**		-	**VARIOUS TRADE DEBT**				**370.00**
Account No. **PEAK PERFORMANCE** **C/O PETER B. ACKERMAN** **222 MAMARONECK AVE, STE. 202** **White Plains, NY 10605**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Sheet no. **151** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				**2,397.13**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PEAK PERFORMANCE GROUP** **7 BAYVILLE PARK BLVD** **BAYVILLE, NY 11709**		-	**VARIOUS TRADE DEBT**				**154,523.80**
Account No. **PEDRO GONZALEZ** **c/o GREENBERG & STEIN** **275 MADISON AVE, STE 1100** **New York, NY 10016**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **PELHAM CHAMBER OF COMMERCE** **225 FIFTH AVE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**365.00**
Account No. **PELHAM LUMBER AND MASON SUPP** **437 FIFTH AVE** **PELHAM, NY 10803**	X	-	**VARIOUS TRADE DEBT**				**4,341.26**
Account No. **PELHAM WEEKLY** **225 FIFTH AVENUE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**715.00**

Sheet no. **152** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **159,945.06**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PENSION BENEFIT GRNTY CORP** **PO BOX 64880** **BALTIMORE, MD 21264-4880**	X	-	**Various** **Unsecured Debt**				**9,620,000.00**
Account No. **PEPIN MANUEL** **634 LELAND AVE** **BRONX, NY 10473**		-	**VARIOUS** **TRADE DEBT**				**282.25**
Account No. **PERCEPTIVE HEALTHCARE** **162 PARK STREET** **SUITE 202** **NORTH READING, MA 01864**		-	**VARIOUS** **TRADE DEBT**				**42,539.70**
Account No. **PERKINS EASTMAN ARCH** **115 FIFTH AVENUE** **NEW YORK, NY 10003**		-	**VARIOUS** **TRADE DEBT**				**235,616.61**
Account No. **PERRY-BOTTINGER MD** **140 A LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **DRAFT DEBT**				**1,750.00**

Sheet no. **153** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **9,900,188.56**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PERSONNEL CONCEPTS** **PO BOX 5750** **CAROL STREAM, IL 60197**		-	**VARIOUS TRADE DEBT**				**99.60**
Account No. **PETRILLO CAROL** **3 CAROL LANE** **MAMARONECK, NY 10543**		-	**VARIOUS TRADE DEBT**				**816.05**
Account No. **PHARMACY HEALTHCARE SOL** **24042 NETWORK PLACE** **CHICAGO, IL 60673-1240**		-	**VARIOUS TRADE DEBT**				**31,562.66**
Account No. **PHARMCO PRODUCTS INC** **PO BOX 67000** **DETROIT, MI 48267-2675**		-	**VARIOUS TRADE DEBT**				**1,788.00**
Account No. **PHCL CO MARY ANN BEASON** **240 ELK AVE** **NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**150.00**

Sheet no. **154** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **34,416.31**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PHILIPS MED HEWLETT PACK** **PO BOX 100355** **ATLANTA, GA 30384-0355**		-	**VARIOUS TRADE DEBT**				**18,247.58**
Account No. **PHILIPS MEDICAL CAPITAL** **1111 OLD EAGLE SCHOOL RD** **WAYNE, PA 19087**		-	**VARIOUS TRADE DEBT**				**3,706.88**
Account No. **PHOENIX MEDCOM INC** **10 MEADOW SWEET RD** **CORTLANDT MANOR, NY 10567**	X	-	**VARIOUS TRADE DEBT**				**707.53**
Account No. **PHOENIX SURGICAL** **PO BOX 356** **SOUTHPORT, CT 06890-0356**		-	**VARIOUS TRADE DEBT**				**99,541.00**
Account No. **PHYLLIS CARCIA** **C/O SCOTT A. WOLINETZ, ESQ.** **233 BROADWAY, 18TH FL** **New York, NY 10279**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Sheet no. **155** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				**122,202.99**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PHYSICIANS RECIPROCAL INS** **1800 NORTHERN BLVD** **ROSLYN, NY 11576**	X	-	**Various** **Trade Debt**				**15,805.00**
Account No. **PICIS INC** **PO BOX 34960** **SEATTLE, WA 98124-1960**	X	-	**Various** **Trade Debt**				**27,434.40**
Account No. **PIMCO** **PO BOX 55060** **BOSTON, MA 02205-5060**	X	-	**VARIOUS** **TRADE DEBT**				**500.00**
Account No. **PIPELINE HEALTH HOLDING** **601 MONTGOMERY ST** **SUITE 1800** **SAN FRANCISCO, CA 94111**		-	**VARIOUS** **TRADE DEBT**				**112,114.00**
Account No. **PITI RICHARD** **2523 WESTERVELT AVE** **BRONX, NY 10469**	X	-	**VARIOUS** **TRADE DEBT**				**420.00**

Sheet no. **156** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **156,273.40**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PITNEY BOWES** **PO BOX 371896** **PITTSBURGH, PA 15250-7896**		-	**VARIOUS TRADE DEBT**				**503.33**
Account No. **POHL STANLEY** **352 GRAND BLVD** **SCARSDALE, NY 10583**		-	**VARIOUS TRADE DEBT**				**50.00**
Account No. **POLANCO DERBY** **1656 HAIGHT AVE** **BRONX, NY 10461**		-	**VARIOUS TRADE DEBT**				**383.00**
Account No. **POLY SCIENTIFIC** **70 CLEVELAND AVE** **BAY SHORE, NY 11706**		-	**VARIOUS TRADE DEBT**				**1,038.00**
Account No. **POMERANTZDANIEL MD** **34 BON AIR AVE** **NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**2,391.11**

Sheet no. **157** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **4,365.44**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **POSITIVE PROMOTIONS** **15 GILPIN AVENUE** **HAUPPAUGE, NY 11788**	X	-	**VARIOUS TRADE DEBT**				**7,774.61**
Account No. **POSTMASTER NR** **255 NORTH AVE** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**835.00**
Account No. **PRECISION BUILT FENCES** **1617 MAIN STREET** **PEEKSKILL, NY 10566**		-	**VARIOUS TRADE DEBT**				**19,700.00**
Account No. **PRECISION DYNAMICS CORP** **4193 SOLUTIONS CTR** **CHICAGO, IL 60677-4001**		-	**VARIOUS TRADE DEBT**				**1,402.75**
Account No. **PREFERRED BUSINESS INC** **635 OLD WHITE PLAINS RD** **TARRYTOWN, NY 10591**	X	-	**Various Trade Debt**				**74,881.69**

Sheet no. **158** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **104,594.05**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PREMIER MERCHANT PROCESSIN** **3601 HEMPSTEAD TPKE** **LEVTTOWN, NY 11756**		-	**VARIOUS TRADE DEBT**				**211.78**
Account No. **PREMIER TRANSPORTATION** **271 NORTH AVE** **STE 1200** **NEW ROCHELLE, NY 10801**	X	-	**VARIOUS TRADE DEBT**				**160.00**
Account No. **PRESS GANEY ASSOC INC** **404 COLUMBIA PL** **SOUTH BEND, IN 46601**	X	-	**Various Trade Debt**				**47,898.00**
Account No. **PRESSCOTT ASSOCIATES LTD** **21A ARTS CENTER COURT** **AVON, CT 06001**		-	**VARIOUS TRADE DEBT**				**52,360.65**
Account No. **PRICEWATERHOUSE COOPERS** **PO BOX 7247-8001** **PHILADELPHIA, PA 19170-8001**	X	-	**Various Trade Debt**				**237,650.00**

Sheet no. **159** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **338,280.43**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PRIDE HEALTHCARE C/O SCHNAUFER & METIS 280 N. CENTRAL AVE, STE 200 Hartsdale, NY 10530**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **PRIDE HEALTHCARE LLC 420 LEXINGTON AVE SUITE 2220 NEW YORK, NY 10171**	X	-	**Various Trade Debt**				**43,038.97**
Account No. **PRN VASCULAR 218 SHOVE STREET FALL RIVER, MA 02724**		-	**VARIOUS TRADE DEBT**				**4,500.00**
Account No. **PRO-TEK 270 NORTH BROADWAY HICKSVILLE, NY 11801**		-	**VARIOUS TRADE DEBT**				**7,975.90**
Account No. **PROFESSIONAL OFFICE BLDG 421 HUGUENOT ST NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**9,646.65**

Sheet no. **160** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **65,161.52**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PROFORMANCE PLUMBING** **49 NATHAN HALE DR** **STORMVILLE, NY 12582**		-	**VARIOUS TRADE DEBT**				**13,890.00**
Account No. **PROGRAM DESIGN AND DEVELOP** **47 WAYSIDE DRIVE** **WHITE PLAINS, NY 10607**		-	**VARIOUS TRADE DEBT**				**20,000.00**
Account No. **PROMETHEUS HEALTHCARE** **11405 RAMSBURG CT** **NORTH POTOMAC, MD 20878**		-	**VARIOUS TRADE DEBT**				**7,040.80**
Account No. **PROSPECTIVE PAYMENT SPEC** **PO BOX 79707** **CITY OF INDUSTRY, CA 91716-9707**		-	**VARIOUS TRADE DEBT**				**8,150.00**
Account No. **PROVIDENCE REST** **3304 WATERBURY AVE** **BRONX, NY 10462**	**X**	-	**VARIOUS TRADE DEBT**				**1,000.00**

Sheet no. **161** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **50,080.80**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PROVIDENT LIFE AND ACCINS** **1 FOUNTAIN SQUARE** **CHATTANOOGA, TN 37402**	X	-	**VARIOUS TRADE DEBT**				**932.60**
Account No. **PROVIDER CONSULTING SOL** **3 CORPORATE DRIVE** **SUITE 102** **CLIFTON PARK, NY 12065**	X	-	**Various Trade Debt**				**124,259.28**
Account No. **PRUDENTIAL ANNUITIES** **P O BOX 7960** **PHILADELPHIA, PA 19176**		-	**VARIOUS TRADE DEBT**				**2,595.75**
Account No. **PS WOLF MEDIA LLC** **15 CORPORATE DRIVE** **5** **WAYNE, NJ 07470**		-	**VARIOUS TRADE DEBT**				**54,955.20**
Account No. **PSS WORLD MEDICAL INC** **62046 COLLECTIONS CTR DR** **CHICAGO, IL 60693-0620**		-	**VARIOUS TRADE DEBT**				**1,492.23**

Sheet no. **162** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **184,235.06**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **PUBLIC ADMIN OF WESTCH C/O RICE & RICE 270 NORTH AVENUE, STE 202 New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **PUBLIC GOODS POOL 2 344 SOUTH WARREN ST SYRACUSE, NY 13202**	X	-	**Various Trade Debt**				**184,063.00**
Account No. **PURCHASE POWER PO BOX 371874 PITTSBURGH, PA 15250-7874**	X	-	**VARIOUS TRADE DEBT**				**60.00**
Account No. **QUALCODE INC 5030 BROADWAY SUITE 609 NEW YORK, NY 10034**	X	-	**Various Trade Debt**				**18,251.20**
Account No. **QUEST DIAGNOSTICS INC ONE MALCOLM AVE RAY STOLBA DEPT 50 TETERBORO, NJ 07608-1070**	X	-	**Various Trade Debt**				**261,963.88**

Sheet no. **163** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **464,338.08**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **R TECH HEALTHCARE REV** **120 FIFTH AVENUE** **3RD FLOOR** **NEW YORK, NY 10011**	X	-	**Various** **Trade Debt**				**115,051.54**
Account No. **RAC MONITOR LLC** **10 MECHANIC ST** **STE 140** **RED BANK, NJ 07701**		-	**VARIOUS** **TRADE DEBT**				**796.00**
Account No. **RADIOMETER AMERICA INC** **13217 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS** **TRADE DEBT**				**5,360.00**
Account No. **RAMOSVIVIAN** **WIC**		-	**VARIOUS** **TRADE DEBT**				**241.72**
Account No. **RANGRAJMA DHU MD** **DEPT OF SURGERY**		-	**VARIOUS** **TRADE DEBT**				**2,213.49**

Sheet no. **164** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **123,662.75**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **RCM TECHNOLOGIES** **PO BOX 7777 -W0570** **PHILADELPHIA, PA 19175-0570**		-	**VARIOUS TRADE DEBT**				**6,225.00**
Account No. **REACH OUT AND READ OF GRT** **30 EAST 33RD STREET** **6TH FLOOR** **NEW YORK, NY 10016**		-	**VARIOUS TRADE DEBT**				**2,150.00**
Account No. **RECOVER CARE LLC** **1920 STANLEY GAULT PKWY** **SUITE 100** **LOUISVILLE, KY 40223**		-	**VARIOUS TRADE DEBT**				**1,625.00**
Account No. **REFLECTX ONCOLOGY** **PO BOX 863539** **ORLANDO, FL 32886-3539**		-	**VARIOUS TRADE DEBT**				**1,800.00**
Account No. **REINA IMAGING** **6107 W LOU AVE** **CRYSTAL LAKE, IL 60014**		-	**VARIOUS TRADE DEBT**				**6,232.00**

Sheet no. **165** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **18,032.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **REINALDO DA COSTA C/O PETER E. TANGREDI 202 MAMARONECK AVE White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **RELAYHEALTH PO BOX 403421 ATLANTA, GA 30364-3421**		-	**VARIOUS TRADE DEBT**				**58,041.69**
Account No. **RELIASTAR LIFE INS OF NY PO BOX 970244 DALLAS, TX 75397-0244**		-	**VARIOUS TRADE DEBT**				**113.49**
Account No. **REMEDY EHR LLC 9350 SOUTH 150 EAST STE850 SANDY, UT 84070**		-	**VARIOUS TRADE DEBT**				**18,000.00**
Account No. **RHONDA METZ C/O RICE & RICE 270 NORTH AVE, STE 202 New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**

Sheet no. **166** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **76,155.18**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **RICHARD LEBLANC DEPUTY** **717 KIMBALL AVE** **YONKERS, NY 10704**		-	**VARIOUS TRADE DEBT**				**476.38**
Account No. **RICHARD WOLF MED INSTR** **2573 MOMENTUM PL** **CHICAGO, IL 60061**		-	**VARIOUS TRADE DEBT**				**4,819.05**
Account No. **RICHARDS STEPHEN K** **241 SOUTH 9TH AVENUE** **APT 6A** **MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**1,800.00**
Account No. **RIVERSOURCE LIFE INS CO OF** **70100 AMERPRISE FIN CTR** **MINNEAPOLIS, MN 55474**		-	**VARIOUS TRADE DEBT**				**31,963.09**
Account No. **RIVKIN RADLER** **926 RXR PLAZA** **UNIONDALE, NY 11556-0926**	X	-	**VARIOUS TRADE DEBT**				**1,049.12**

Sheet no. **167** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **40,107.64**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **RNB ENTERPRISES INC** **15 COMMERCE ROAD** **NEWTOWN, CT 06470**		-	**VARIOUS TRADE DEBT**				**89.99**
Account No. **ROBINSON CALVIN** **539 THIRD STREET** **MAMARONECK, NY 10543**		-	**VARIOUS TRADE DEBT**				**107.77**
Account No. **ROI CODING SOLUTIONS** **42 PEBBLE BEACH BLVD** **JACKSON, NJ 08527**		-	**VARIOUS TRADE DEBT**				**768.00**
Account No. **RONALD HARRIS** **C/O IAN BELINFANTI, ESQ.** **481 8TH AVENUE, ST 924** **New York, NY 10001**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **RONAN KEVIN** **11-28 123 ST** **COLLEGE POINT, NY 11356**		-	**VARIOUS TRADE DEBT**				**80.00**

Sheet no. **168** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **1,045.76**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **RONCO SPECIALIZED SYS PO BOX 91027 ROCHESTER, NY 14692**		-	**VARIOUS TRADE DEBT**				**1,801.00**
Account No. **RONDEEN WALTERS C/O SCAFFIDI & ASSOCIATES 747 THIRD AVENUE, STE. 10-B New York, NY 10017**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **ROSARIO IRIS 16 GUION PL NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**50.00**
Account No. **ROSE ZAIR C/O STEVEN NORTH 148 E. 74TH STREET NEW YORK, NY**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **ROSENFELD NATHAN MD 391 OXFORD RD NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**2,803.52**

Sheet no. **169** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **4,654.52**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ROSENTHAL BARBARA** **965 WILMOT RD** **SCARSDALE, NY 10583**	X	-	**VARIOUS TRADE DEBT**				**2,650.00**
Account No. **ROSS LABS DIV ABBOTT-OHIO** **PO BOX 30** **HAVERSTRAW, NY 10927**		-	**VARIOUS TRADE DEBT**				**105.00**
Account No. **ROTARY CLUB OF NEW ROCHELL** **271 NORTH AVENUE** **SUITE 816** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,873.00**
Account No. **ROTHMAN SHEILA** **546 W BROADWAY** **CEDARHURST, NY 11516**		-	**VARIOUS TRADE DEBT**				**592.77**
Account No. **RR HEALTH STRATEGIES LLC** **926 RXR PLAZA** **UNIONDALE, NY 11556**		-	**VARIOUS TRADE DEBT**				**67,946.33**

Sheet no. **170** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **73,167.10**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **RT SOLUTIONS** **4302 E ROCKLEDGE CR** **PHOENIX, AZ 85044**	X	-	**VARIOUS TRADE DEBT**				**1,280.00**
Account No. **RTI BIOLOGICS** **PO BOX 11404** **COLUMBIA, SC 29211-1404**		-	**VARIOUS TRADE DEBT**				**6,875.00**
Account No. **RYDER TRANSPORTATION** **PO BOX 96723** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**1,462.38**
Account No. **S AND S FIRE SUPPRESSION SYS** **425 WESTERN HWY** **TAPPAN, NY 10983**		-	**VARIOUS TRADE DEBT**				**18,778.26**
Account No. **SACCENTE'S HOUSE OF PRINTI** **621 SOUTH COLUMBUS AVE** **MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**374.50**

Sheet no. **171** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **28,770.14**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SAF-T-PAK** **17827 111TH AVENUE** **EDMONTON, CANADA AB T5S 2X3**		-	**VARIOUS TRADE DEBT**				**486.00**
Account No. **SAFETY MANAGEMENT SERV INC** **3800 NORTH WILKE RD** **SUITE 125** **ARLINGTON HGTS, IL 60004**		-	**VARIOUS TRADE DEBT**				**945.00**
Account No. **SALESIAN MISSIONS** **2 LEFEVRE LANE** **PO BOX 30** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**550.00**
Account No. **SALVATORE PORRETTO** **C/O PIRROTTI LAW FIRM** **2 OVERHILL RD, STE 200** **Scarsdale, NY 10583**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **SALVEO HEALTHCARE SOLUTION** **60 EAST 42ND STREET** **SUITE 2517** **NEW YORK, NY 10165**	X	-	**VARIOUS TRADE DEBT**				**902.00**

Sheet no. **172** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **2,883.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SAMUELS GLORIA** **50 GUION PLACE** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**500.00**
Account No. **SANDRA WEINSTEIN** **C/O WEINSTEIN CHASE** **26 COURT STREET, STE 2100** **Brooklyn, NY 11242**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **SANITATION SALVAGE CORP** **421 MANIDA ST** **BRONX, NY 10474**		-	**VARIOUS TRADE DEBT**				**332.74**
Account No. **SANOFI PASTEUR INC** **12458 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**2,380.56**
Account No. **SANSONE KRISTIN** **55 TEMPLE ST** **HARRISON, NY 10528**		-	**VARIOUS TRADE DEBT**				**500.00**

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Subtotal (Total of this page) **3,713.30**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SCALES INDUSTRIAL TECHNOLO** **110 VOICE RD** **CARLE PLACE, NY 11514**		-	**VARIOUS TRADE DEBT**				**1,082.71**
Account No. **SEJAS ANAMARIA** **32 GREENWOOD AVE** **PORTCHESTER, NY 10573**		-	**VARIOUS TRADE DEBT**				**155.40**
Account No. **SELECT EXTERMINATING** **332 FRANKLIN AVE** **FRANKLIN SQUARE, NY 11010**		-	**VARIOUS TRADE DEBT**				**2,247.75**
Account No. **SEMA SONILA** **29 CASTLE PLACE** **BOX 415** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **SERA-KINGSLEY NOBUKO MD** **830 PELHAMDALE AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**17,316.30**

Sheet no. **174** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **23,302.16**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SERGIO LOPEZ** **C/O PAMELA GABIGER** **9 VASSAR STREET, STE. 39** **Poughkeepsie, NY 12601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **SERLIN PHILIP** **9 HARRISON DR** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**300.00**
Account No. **SERWITZ IRVING** **1017 SAW MILL RIVER RD PL** **ARDSLEY, NY 10502**		-	**VARIOUS TRADE DEBT**				**200.00**
Account No. **SETON IDENTIFICATION** **PO BOX 95904** **CHICAGO, IL 60694**	X	-	**VARIOUS TRADE DEBT**				**2,003.42**
Account No. **SEYMOUR ROSHEER** **426 ROCKAWAY PKWY** **C3** **BROOKLYN, NY 11212**		-	**VARIOUS TRADE DEBT**				**2,500.00**

Sheet no. **175** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **5,003.42**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SHAMROCK SCIENTIFIC SPECI** **34 DAVIS DRIVE** **BELLWOOD, IL 60104**		-	**VARIOUS TRADE DEBT**				**528.24**
Account No. **SHARIF WASHINGTON** **C/O RICE & RICE, ESQ.** **270 NORTH AVENUE, STE 202** **New Rochelle, NY 10801**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X		**Unknown**
Account No. **SHARMA MUKTA MD** **DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**846.71**
Account No. **SHARN INC** **PO BOX 21666** **SUITE 200** **TAMPA, FL 33622-3166**	X	-	**VARIOUS TRADE DEBT**				**1,306.06**
Account No. **SHEA'S VENT-A-HOOD SERVICE** **26 OAKDALE AVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**7,200.00**

Sheet no. **176** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **9,881.01**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SHEPPY KIRK** **347 HUGUENOT STREET** **APT 4B** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**131.03**
Account No. **SHORELINE PUBLISHING INC** **629 FIFTH AVE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**775.00**
Account No. **SHUKLA MEDICAL** **1 GRISSOM DRIVE** **BRONXVILLE, NY 10708**		-	**VARIOUS TRADE DEBT**				**131.61**
Account No. **SIEMENS CORPORATION** **PO BOX 7777** **W 3580** **PHILADELPHIA, PA 19175**	X	-	**VARIOUS TRADE DEBT**				**7.11**
Account No. **SIEMENS HEALTHCARE DIAG** **PO BOX 121102** **DALLAS, TX 75312-1102**	X	-	**VARIOUS TRADE DEBT**				**5,647.26**

Sheet no. **177** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **6,692.01**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SIEMENS MED SOLUTIONS USA** **PO BOX 7777** **W3580** **PHILADELPHIA, PA 19175**	X	-	**Various** **Trade Debt**				**16,275.93**
Account No. **SIEMENS MEDICAL SOLUT -** **51 VALLEY STREAM PKWY** **MS-K21** **MALVERN, PA 19355-1406**	X	-	**VARIOUS** **TRADE DEBT**				**1,440.00**
Account No. **SIEMENS WATER TECHFKA US** **10 TECHNOLOGY DR** **LOWELL, MA 01851**		-	**VARIOUS** **TRADE DEBT**				**8,477.63**
Account No. **SIGN DESIGN AND JC AWNING** **501 WILLETT AVE** **PORT CHESTER, NY 10573**		-	**VARIOUS** **TRADE DEBT**				**3,100.00**
Account No. **SIMEX MEDICAL IMAGING INC** **68 ALDEN RD** **PARAMUS, NJ 07652-3731**		-	**VARIOUS** **TRADE DEBT**				**10,688.00**

Sheet no. **178** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **39,981.56**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SIMPLEX GRINNELL LP** **12 JEANNE DRIVE** **NEWBURGH, NY 12550-1702**		-	**VARIOUS** **TRADE DEBT**				**2,942.60**
Account No. **SIMPLEX GRINNELL LP** **4 COMMERCE DRIVE S** **SUITE 3** **HARRIMAN, NY 10926**	X	-	**VARIOUS** **TRADE DEBT**				**1,132.43**
Account No. **SLEEP SERVICES OF AMERICA** **PO BOX 198320** **ATLANTA, GA 30384-8320**	X	-	**Various** **Trade Debt**				**75,106.72**
Account No. **SMART SOURCE SERVICES** **PO BOX 716** **NEW YORK, NY 10018**	X	-	**Various** **Trade Debt**				**27,135.83**
Account No. **SMITH AND NEPHEW ENDOSCOPY** **150 MINUTEMAN ROAD** **ANDOVER, MA 01810**	X	-	**Various** **Trade Debt**				**36,584.31**

Sheet no. **179** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **142,901.89**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SMITH HAYDEN** **40 FERNWOOD ROAD** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**1,445.20**
Account No. **SMITH SYLVIA** **1036 PELHAMDALE AVE** **PELHAM MANOR, NY 10803**		-	**VARIOUS TRADE DEBT**				**73.72**
Account No. **SMITHS MEDICAL ASD** **C/O MEYERS SAXON & COLE** **3620 QUENTIN ROAD** **Brooklyn, NY 11234**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Account No. **SMITHS MEDICAL DELTEC** **5200 UPPER METRO PLACE** **SUITE 200** **DUBLIN, OH 43017**		-	**VARIOUS TRADE DEBT**				**25,833.74**
Account No. **SOLOMON-PAGE GROUP LLC** **PO BOX 768** **MIDTOWN STATION** **NEW YORK, NY 10018**		-	**VARIOUS TRADE DEBT**				**24,647.50**

Sheet no. **180** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **52,000.16**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SONOMA ORTHOREDIC PRODUCTS** **3589 WEST WIND BLVD** **SANTA ROSA, CA 95403**		-	**VARIOUS TRADE DEBT**				**11,677.00**
Account No. **SONOSITEINC** **4332 SOLUTIONS CTR** **CHICAGO, IL 60677-4003**		-	**VARIOUS TRADE DEBT**				**9,169.71**
Account No. **SOUND EQUIPMENT CORP** **PO BOX 417124** **BOSTON, MA 02241-7124**		-	**VARIOUS TRADE DEBT**				**2,462.00**
Account No. **SOUND SHORE 401A PLANBP** **16 GUION PL** **NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**310,162.99**
Account No. **SOUND SHORE CHORALE OF NR** **67 TRENO STREET** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**350.00**

Sheet no. **181** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **333,821.70**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SOUND SHORE MEDCTR** **16 GUION PLACE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**111,754.74**
Account No. **SOUND SHORE MEDCTR-MED** **16 GUION PLACE** **ATTN K BROWNE** **NEW ROCHELLE, NY 10801-5503**		-	**VARIOUS TRADE DEBT**				**50.00**
Account No. **SOUND SHORE PHARMACY INC** **107 W 4TH STREET** **MT VERNON, NY 10550**	X	-	**Various Trade Debt**				**37,287.64**
Account No. **SOUNDVIEW MANAGEMENT ASSOC** **PO BOX 501** **GREENWICH, CT 06836**		-	**VARIOUS TRADE DEBT**				**23,831.25**
Account No. **SOURCEONE HEALTHCARE TECH** **PO BOX 8004** **MENTOR, OH 44061-8004**	X	-	**VARIOUS TRADE DEBT**				**4,229.49**

Sheet no. **182** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **177,153.12**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SOUTH SHORE OFFICE PRODUCT** **100 MILBAR BLVD** **FARMINGDALE, NY 11735**		-	**VARIOUS TRADE DEBT**				**18,067.04**
Account No. **SOUTHEAST ID** **3155 SW 10TH STR** **SUITE L** **DEERFIELD BEACH, FL 33442**		-	**VARIOUS TRADE DEBT**				**1,069.75**
Account No. **SPINAL GRAFT TECHNOLOGIES** **12099 COLLECION CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**4,605.00**
Account No. **ST JOHN'S UNIVERSITY** **8000 UTOPIA PARKWAY** **QUEENS, NY 11439**		-	**VARIOUS TRADE DEBT**				**1,700.00**
Account No. **ST JOSEPH'S MEDICAL CTR** **127 SOUTH BROADWAY** **YONKERS, NY 10701-4080**		-	**VARIOUS TRADE DEBT**				**2,000.00**

Sheet no. **183** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **27,441.79**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ST JUDE MEDICAL INC 22400 NETWORK PLACE CHICAGO, IL 60673-1224**	X	-	**Various Trade Debt**				**84,495.00**
Account No. **ST VINCENT'S HOSPITAL WES 275 NORTH ST HARRISON, NY 10528**		-	**VARIOUS TRADE DEBT**				**500.00**
Account No. **STANLEY BLACK AND DECKER DEPT CH14234 PALATINE, IL 60055-4234**		-	**VARIOUS TRADE DEBT**				**465.00**
Account No. **STANOVIC MARIA 161 AUSTIN ROAD MAHOPAC, NY 10541**		-	**VARIOUS TRADE DEBT**				**1,500.00**
Account No. **STAPLES ADVANTAGE PO BOX 71217 CHICAGO, IL 60694-1217**	X	-	**VARIOUS TRADE DEBT**				**238.00**

Sheet no. **184** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **87,198.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **STAR ENVIRONMENTAL INC 5004 KINGS HIGHWAY BROOKLYN, NY 00011-2345**	X	-	**VARIOUS TRADE DEBT**				**4,800.00**
Account No. **STAT-TECH SURGICAL SUPP 20 ORLANDO DR FAIRFIELD, NJ 07004**		-	**VARIOUS TRADE DEBT**				**8,082.69**
Account No. **STATE INSURANCE FUND 199 CHURCH STREET NEW YORK, NY 10007**	X	-	**Various Trade Debt**				**160,080.31**
Account No. **STATE OF NEW YORK OMIG 800 NORTH PEARL STREET ALBANY, NY 12204**	X	-	**Various Trade Debt**				**20,445.38**
Account No. **STEPHEN BLUTH C/O DARREN JAY EPSTEIN 254 SOUTH MAIN ST, STE 406 New City, NY 10956**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**

Sheet no. **185** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **193,408.38**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **STERICYCLE INC** **PO BOX 6582** **CAROL STREAM, IL 60197-6582**	X	-	**Various** **Trade Debt**				**53,756.25**
Account No. **STERIS CORPORATION** **2424 WEST 23ST** **ERIE, PA 16506**		-	**VARIOUS** **TRADE DEBT**				**1,016.02**
Account No. **STERLING DIAGNOSTIC IMAGIN** **PO BOX 6020** **NEWARK, DE 19714-6020**		-	**VARIOUS** **TRADE DEBT**				**737.00**
Account No. **STERLING INFOSYSTEMSINC** **PO BOX 35626** **NEWARK, NJ 07193-5626**	X	-	**VARIOUS** **TRADE DEBT**				**3,274.46**
Account No. **STRYKER CRANIOMAXILLOFAC** **21343 NETWORK PLACE** **CHICAGO, IL 60673-1213**		-	**VARIOUS** **TRADE DEBT**				**21,178.63**

Sheet no. **186** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **79,962.36**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **STRYKER INSTRUMENTS** **PO BOX 70119** **CHICAGO, IL 60673-0119**	X	-	**Various** **Trade Debt**				**62,291.86**
Account No. **STRYKER MEDICAL** **PO BOX 93308** **CHICAGO, IL 60673-3308**		-	**VARIOUS** **TRADE DEBT**				**15,817.19**
Account No. **STRYKER ORTHOBIOLOGICS** **PO BOX 93213Q** **CHICAGO, IL 60673**		-	**VARIOUS** **TRADE DEBT**				**84,365.09**
Account No. **STRYKER ORTHOPAEDICS** **131 SOUTH DEARBORN** **6TH FLOOR** **CHICAGO, IL 60603**	X	-	**Various** **Trade Debt**				**3,492,390.41**
Account No. **STRYKER SUSTAINABILITY SOL** **PO BOX 29387** **PHOENIX, AZ 85038-9387**	X	-	**Various** **Trade Debt**				**40,063.76**

Sheet no. **187** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **3,694,928.31**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SUBURBAN CARTING CO** **566 NORTH STATE ROAD** **BRIARCLIFF MANOR, NY 10510**	X	-	**Various Trade Debt**				**45,056.31**
Account No. **SUMM IT HEALTHCARE CONSULT** **1123 GALWAY BLVD** **APOPKA, FL 32703**		-	**VARIOUS TRADE DEBT**				**302,634.41**
Account No. **SUMM-IT HEALTHCARE** **C/O ALEX KRIEGSMAN ROONEY** **10 EAST 40TH STREET, 42ND FL** **New York, NY 10016**		-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **SUMMIT APPL DIV FELIX STOR** **770 GARRISON AVE** **BRONX, NY 00010-4724**	X	-	**VARIOUS TRADE DEBT**				**165.00**
Account No. **SUNDARESAN PRIYA** **602 NORTH STREET** **WHITE PLAINS, NY 10605**		-	**VARIOUS TRADE DEBT**				**2,500.00**

Sheet no. **188** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **350,355.72**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SUNRISE DAY CAMP** **15 NEIL COURT** **OCEANSIDE, NY 11572**		-	**VARIOUS TRADE DEBT**				**3,000.00**
Account No. **SURGICAL MONITORING ASSOC** **900 OLD MARPLE RD** **SPRINGFIELD, PA 19064**		-	**VARIOUS TRADE DEBT**				**41,524.00**
Account No. **SUTTON FLORIST INC** **296 HUGUENOT ST** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,631.04**
Account No. **SWISSLOG TRANSLOGIC** **10825 E 47 AVE** **DEVER, CO 80239**		-	**VARIOUS TRADE DEBT**				**2,190.00**
Account No. **SYMMETRY SURICAL** **PO BOX 759159** **BALTIMORE, MD 21275-9159**		-	**VARIOUS TRADE DEBT**				**9,075.72**

Sheet no. **189** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **57,420.76**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **SYNTHES** **1302 WRIGHTS LANE EAST** **WESTCHESTER, PA 19380**	X	-	**Various** **Trade Debt**				**499,878.85**
Account No. **TEAM VIEWER GMBH** **KUHNBERGSTR 16** **GOPPINGEN, GERMANY 73037-0000**		-	**VARIOUS** **TRADE DEBT**				**999.00**
Account No. **TECH AIR** **PO BOX 0021** **BRATTLEBORO, VT 05302-0021**		-	**VARIOUS** **TRADE DEBT**				**2,487.14**
Account No. **TELEFLEX MEDICAL** **PO BOX 601608** **CHARLOTTE, NC 28260-1608**		-	**VARIOUS** **TRADE DEBT**				**794.95**
Account No. **TELEHEALTH SERVICES** **C/O HISCOCK & BARCLAY** **ONE PARK PLACE** **Syracuse, NY 13202**		-	**LITIGATION CLAIM**	X	X	X	**Unknown**

Sheet no. **190** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **504,159.94**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **TELERENT LEASING CORP** **PO BOX 890063** **CHARLOTTE, NC 28289-0063**		-	**VARIOUS TRADE DEBT**				**8,965.34**
Account No. **TELIGENT, INC.** **C/O KIRKLAND & ELLIS** **601 LEXINGTON AVENUE** **New York, NY 10022**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **TELMAR YESENIA** **PO BOX 4243** **MIDDLETOWN, NY 10941**		-	**VARIOUS TRADE DEBT**				**777.65**
Account No. **TELSERV LLC** **98 SOUTH TURNPIKE ROAD** **WALLINGFORD, CT 06492**	X	-	**Various Trade Debt**				**49,886.40**
Account No. **TENER JEFFREY B** **301N HARRISON ST** **STE 482** **PRINCETON, NJ 08540**		-	**VARIOUS TRADE DEBT**				**2,025.00**

Sheet no. **191** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **61,654.39**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **TGC LLC PO BOX 130 HIGHLAND, MD 20777**	X	-	**Various Trade Debt**				**615,929.00**
Account No. **THDAMERICA INC 8920 BRITTANY WAY TAMPA, FL 33619**		-	**VARIOUS TRADE DEBT**				**6,532.47**
Account No. **THE JOINT COMMISSION 1 RENAISSANCE BLVD Villa Park, IL 60181**	X	-	**Various Trade Debt**				**29,210.00**
Account No. **THE ADULT LEARNING CENTER 4 OBRY DRIVE SCARDSDALE, NY 10583**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **THE ADVISORY BOARD CO 2445 M STREET NW WASHINGTON, DC 20037**		-	**VARIOUS TRADE DEBT**				**40,000.00**

Sheet no. **192** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **694,171.47**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **THE ALLEN J FLOOD COMPANI** **TWO MADISON AVE** **LARCHMONT, NY 10538**		-	**VARIOUS TRADE DEBT**				**524.00**
Account No. **THE BUSINESS COUNCIL OF WE** **108 CORPORATE PARK DR** **SUITE 101** **WHITE PLAINS, NY 10604**		-	**VARIOUS TRADE DEBT**				**1,258.00**
Account No. **THE COLLEGE OF NEW ROCHEL** **29 CASTLE PLACE** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**7,500.00**
Account No. **THE CRIMSON INITIATIVE** **2445 M STREET NW** **WASHINGTON, DC 20037**		-	**VARIOUS TRADE DEBT**				**33,866.00**
Account No. **THE ESTATE OF DESIREE** **C/O GEORGE D. ROSENBAUM** **110 WALL STREET, STE 2100** **New York, NY 10005**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Sheet no. **193** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				**43,148.00**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **THE MAX GROUP** **7 PONDFIELD ROAD** **BRONXVILLE, NY 10708**		-	**VARIOUS TRADE DEBT**				**154,059.00**
Account No. **THE MEDICAL LETTER** **145 HUGUENOT STREET** **SUITE 312** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**189.00**
Account No. **THE MIRACLE LEAGUE OF WEST** **30 GLEN STREET** **SUITE 307** **WHITE PLAINS, NY 10603**		-	**VARIOUS TRADE DEBT**				**900.00**
Account No. **THE MIS FELLOWSHIP COUNCIL** **11300 W OLYMPIC BLVD** **STE 600** **LOS ANGELES, CA 90064**		-	**VARIOUS TRADE DEBT**				**300.00**
Account No. **THE MODERN PRESS** **10 LOCKWOOD AVE** **NEW ROCHELLE, NY 10801**	**X**	-	**VARIOUS TRADE DEBT**				**1,945.00**

Sheet no. **194** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **157,393.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **THE OUTSOURCE GROUP** **39867 TREASURY CENTER** **CHICAGO, IL 60694-9800**	X	-	**Various** **Trade Debt**				**52,389.97**
Account No. **THE OUTSOURCE GROUP** **C/O FOX ROTHSCHILD** **100 PARK AVE, STE 1500** **New York, NY 10017**		-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **THE SARATOGA HILTON** **534 BROADWAY** **SARATOGA SPRINGS, NY 12866**		-	**VARIOUS** **TRADE DEBT**				**104.00**
Account No. **THE TRIO COMPANY** **32 HIGHWOOD ROAD** **EAST NORWICH, NY 11732**		-	**VARIOUS** **TRADE DEBT**				**73,655.32**
Account No. **THE TRIO COMPANY** **C/O PHILIP NOVEMBER** **291 BROADWAY** **New York, NY 10007**		-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**

Sheet no. **195** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **126,149.29**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **THE WESTCHESTER CTY ASSO** **1133 WESTCHESTER AVE** **SUITE 217** **WHITE PLAINS, NY 10604**		-	**VARIOUS TRADE DEBT**				**25,000.00**
Account No. **THE WESTCHESTER ROAD RUN** **179 EAST POST RD** **WHITE PLAINS, NY 10601**		-	**VARIOUS TRADE DEBT**				**1,600.00**
Account No. **THE ZACHARY FOUNDATION** **30 JERICHO TURNPIKE** **178** **COMMACK, NY 11725**		-	**VARIOUS TRADE DEBT**				**1,500.00**
Account No. **THERICS LLC** **16527 COLLECTIONS CTR DR** **CHICAGO, IL 60693**		-	**VARIOUS TRADE DEBT**				**2,370.00**
Account No. **THERMO FISHER SCIENTIFIC** **4481 CAMPUS DR** **KALAMAZOO, MI 49006-2590**		-	**VARIOUS TRADE DEBT**				**10,094.97**

Sheet no. **196** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **40,564.97**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **THOMPSON AND BENDER LLC** **1192 PLEASANTVILLE RD** **BRIARCLIFF MANOR, NY 10510**	X	-	**VARIOUS TRADE DEBT**				**5,837.50**
Account No. **TIAA CREF** **PO BOX 933326** **ATLANTA, GA 31193-3326**		-	**VARIOUS TRADE DEBT**				**7,640.70**
Account No. **TIFFANY AND CO** **PO BOX 121193** **DALLAS, TX 75312**		-	**VARIOUS TRADE DEBT**				**652.50**
Account No. **TISO APPLIANCES** **107 WOLFS LANE** **PELHAM, NY 10803**		-	**VARIOUS TRADE DEBT**				**3,032.00**
Account No. **TOBY ORTHOPAEDICS** **3773 MATHESON AVE** **COCONUT GROVE, FL 33133**		-	**VARIOUS TRADE DEBT**				**525.00**

Sheet no. **197** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **17,687.70**

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **TODAY'S STUDENTS TOMORROW** **3 WEST MAIN STREET** **SUITE 200** **ELMSFORD, NY 10523**		-	**VARIOUS TRADE DEBT**				**500.00**
Account No. **TODAYMEDIA** **3301 LANCASTER PIKE** **SUITE 5C** **WILMINGTON, DE 19805**		-	**VARIOUS TRADE DEBT**				**4,115.00**
Account No. **TORIBIO FRANCISCO** **1601 MACOMBS RD** **APT 5I** **BRONX, NY 10452**		-	**VARIOUS TRADE DEBT**				**1,200.00**
Account No. **TORNIER INC** **PO BOX 4631** **HOUSTON, TX 77210-4631**		-	**VARIOUS TRADE DEBT**				**6,280.00**
Account No. **TOTAL REPAIR EXPRESS** **BUILDING 10** **1 ILENE COURT** **HILLSBOROUGH, NJ 08844**		-	**VARIOUS TRADE DEBT**				**5,195.18**

Sheet no. **198** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **17,290.18**

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **TOURE EDJANG** **C/O MEAGHER & MEAGHER** **111 CHURCH STREET** **White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **TRANS CONTL CREDIT** **PO BOX 5055** **WHITE PLAINS, NY 10602**	X	-	**VARIOUS** **TRADE DEBT**				**1,937.65**
Account No. **TRANS UNION LLC** **P O BOX 99506** **CHICAGO, IL 60693**	X	-	**Various** **Trade Debt**				**57,629.27**
Account No. **TRANSCARE AMBULANCE** **1 METROTECH CENTER** **20TH FLOOR** **BROOKLYN, NY 11201**	X	-	**Various** **Trade Debt**				**143,985.29**
Account No. **TRANSCARE NY INC DBA TRANS** **PO BOX 785586** **PHILADELPHIA, PA 19178-5586**	X	-	**VARIOUS** **TRADE DEBT**				**3,694.90**

Sheet no. **199** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **207,247.11**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **TRAVAUN WRIGHT** **C/O NAPOLI BERN & RIPKA** **115 BROADWAY, 12TH FL** **New York, NY 10006**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **TRIBRIDGE** **4830 W KENNEDY BLVD** **SUITE 890** **TAMPA, FL 33609**		-	**VARIOUS** **TRADE DEBT**				**49,696.01**
Account No. **TRILLIANT SURGICAL LTD** **602 SAWYER STREET** **SUITE 120** **HOUSTON, TX 77007-7510**		-	**VARIOUS** **TRADE DEBT**				**5,385.00**
Account No. **TRUSTAFF** **PO BOX 73426** **CLEVELAND, OH 44193**		-	**VARIOUS** **TRADE DEBT**				**36,204.50**
Account No. **TUGMAN CHERYL** **76 ECHO DRIVE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS** **TRADE DEBT**				**1,250.00**

Sheet no. **200** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **92,535.51**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **TUNNEY COURTNEY** **30 CLINTON PLACE** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**253.80**
Account No. **TURN-KEY TECHNOLOGIES** **2400 MAIN STREET EXTENSION** **SUITE 12** **SAYERVILLE, NJ 08872**		-	**VARIOUS TRADE DEBT**				**4,727.11**
Account No. **TYCO HEALTHCARE GROUP LP** **PO BOX 120823** **DALLAS, TX 75312-0823**	X	-	**VARIOUS TRADE DEBT**				**10,616.00**
Account No. **UGC FOUNDATION** **391 PELHAM RD** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**2,000.00**
Account No. **ULRICH MEDICAL** **754 SPIRIT** **40 PARK DRIVE** **ST LOUIS, MO 63005**		-	**VARIOUS TRADE DEBT**				**32,486.96**

Sheet no. **201** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **50,083.87**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **UNIFORMED FIRE FIGHTERS PO BOX 994 NEW ROCHELLE, NY 10802**		-	**VARIOUS TRADE DEBT**				**600.00**
Account No. **UNITED CALIFORNIA FACTORS PO BOX 1658 MONROVIA, CA 91017-5658**		-	**VARIOUS TRADE DEBT**				**1,100.00**
Account No. **UNITED HOSPITAL FUND NY 1411 BROADWAY 12TH FLOOR NEW YORK, NY 10018**		-	**VARIOUS TRADE DEBT**				**2,500.00**
Account No. **UNITED INDUSTRIES INC 202 EAST CLEVELAND AVE STERLING, KS 67579**		-	**VARIOUS TRADE DEBT**				**369.99**
Account No. **UNITED OVERHEAD DOOR CORP 21 SAW MILL RIVER RD YONKERS, NY 10701**		-	**VARIOUS TRADE DEBT**				**263.50**

Sheet no. **202** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **4,833.49**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **UNITED PARCEL SERVICE** **PO BOX 7247-0244** **PHILADELPHIA, PA 19170-0001**	X	-	**VARIOUS TRADE DEBT**				**498.50**
Account No. **UNITED RENTALS** **C/O FORCHELLI & FORCHELLI** **32-02 30TH AVE** **Astoria, NY 11102**	X	-	**BREACH OF CONTRACT CLAIM**	X	X	X	**Unknown**
Account No. **UNITED VETMEM AND PAT ASSO** **112 NORTH AVENUE** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**5,000.00**
Account No. **UNITED WATER NEW ROCHELLE** **2525 PALMER AVENUE** **NEW ROCHELLE, NY 10801**	X	-	**Various Trade Debt**				**98,382.53**
Account No. **UNITED WAY OF WEST AND PUTN** **PO BOX 520** **HARTSDALE, NY 10530**		-	**VARIOUS TRADE DEBT**				**2,514.00**

Sheet no. **203** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **106,395.03**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **UNIV OF MIAMI TISSUE BANK** **1951 NW 7TH AVENUE** **SUITE 200** **MIAMI, FL 33136**	X	-	**VARIOUS TRADE DEBT**				**7,884.68**
Account No. **UPMC PRESBYTERIAN SHADY** **UPMC HEALTH SYSTEM** **PO BOX 382007** **PITTSBURGH, PA 15250-8007**		-	**VARIOUS TRADE DEBT**				**1,060.00**
Account No. **URESIL LLC** **5418 WEST TOUHY AVENUE** **SKOKIE, IL 60077**	X	-	**VARIOUS TRADE DEBT**				**582.00**
Account No. **UROLOGY CENTER OF WEST PC** **19 BRADHURST AVENUE** **STE1900** **HAWTHORNE, NY 10532**		-	**VARIOUS TRADE DEBT**				**249,999.96**
Account No. **US CHUTES** **132 FEDERAL ROAD** **BROOKFIELD, CT 06804**		-	**VARIOUS TRADE DEBT**				**675.00**

Sheet no. **204** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **260,201.64**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **US DOCUMENT SECURITY** **5 NORTH 11TH ST** **BROOKLYN, NY 11211**		-	**VARIOUS TRADE DEBT**				**2,040.00**
Account No. **US FOODS** **1051 AMBOY AVENUE** **PERTH AMBOY, NY 08861**		-	**VARIOUS TRADE DEBT**				**193,623.41**
Account No. **USA MOBILITY WIRELESS INC** **PO BOX 660324** **DALLAS, TX 75266-0324**	X	-	**Various Trade Debt**				**16,938.77**
Account No. **USENDOSCOPY GROUP INC** **5976 HEISLEY ROAD** **MENTOR, OH 44060**		-	**VARIOUS TRADE DEBT**				**450.00**
Account No. **VACCHELLIPA TRICIA** **858 PALMER ROAD** **BRONXVILLE, NY 10708**		-	**VARIOUS TRADE DEBT**				**3,400.00**

Sheet no. **205** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **216,452.18**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **VALIC** **CO CHASE BANK** **PO BOX 200777** **HOUSTON, TX 77216-0777**		-	**VARIOUS TRADE DEBT**				**14,970.75**
Account No. **VANDIS INC** **1 ALBERTSON AVE** **ALBERTSON, NY 11507**		-	**VARIOUS TRADE DEBT**				**7,223.04**
Account No. **VARMA NIDHI** **DEPT OF MEDICINE**		-	**VARIOUS TRADE DEBT**				**465.00**
Account No. **VELASQUEZ ANGEL** **907 PALMER AVE** **MAMARONECK, NY 10543**		-	**VARIOUS TRADE DEBT**				**103.77**
Account No. **VELEZ CLAUDIA** **67 CHURCH ST** **NEW ROCHELLE, NY 10805**		-	**VARIOUS TRADE DEBT**				**370.00**

Sheet no. **206** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **23,132.56**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. VELEZ GILBERTO G 3320 RESERVOIR OVAL EAST APT 6F BRONX, NY 10467		-	VARIOUS TRADE DEBT				602.30
Account No. VERATHON MEDICAL 20001 NORTH CREEK PKY BOTHELL, WA 98011		-	VARIOUS TRADE DEBT				336.00
Account No. VERIZON PO BOX 15124 ALBANY, NY 12212-5124	X	-	Various Trade Debt				98,083.82
Account No. VERIZON ACCESS BILLING PO BOX 1100 ALBANY, NY 12250-0001		-	VARIOUS TRADE DEBT				21,704.41
Account No. VERIZON NEW JERSEY PO BOX 4833 TRENTON, NJ 08650-4830		-	VARIOUS TRADE DEBT				4,873.91
Sheet no. 207 of 219 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	125,600.44

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **VERIZON WIRELESS PO BOX 408 NEWARK, NJ 07101-0408**	X	-	**VARIOUS TRADE DEBT**				**2,436.12**
Account No. **VERIZON WIRELESS SPR PO BOX 408 NEWARK, NJ 07101-0408**		-	**VARIOUS TRADE DEBT**				**191.80**
Account No. **VIDACARE CORPORATION PO BOX 122474 DALLAS, TX 75312-2474**		-	**VARIOUS TRADE DEBT**				**1,605.00**
Account No. **VILHENAROSANGELA 189 STEVENS AVENUE APT 5 MT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**46.00**
Account No. **VIRTUAL RADIOLOGIC PO BOX 4246 CAROL STREAM, IL 60197**		-	**VARIOUS TRADE DEBT**				**151.00**

Sheet no. **208** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **4,429.92**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **VISITING NURSE ASSOCIATION** **540 WHITE PLAINS RD** **STE 300** **TARRYTOWN, NY 10591-5132**		-	**VARIOUS TRADE DEBT**				**30,550.00**
Account No. **VISITING NURSE SERVHUDVA** **540 WHITE PLAINS RD** **SUITE 300** **TARRYTOWN, NY 10591**		-	**VARIOUS TRADE DEBT**				**17,100.00**
Account No. **VIVIAN GAGLIANO** **C/O KOSKOFF, KOSKOFF & BIEDER** **350 FAIRFIELD AVE** **Bridgeport, CT 06604**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **VNA AND HOSPICE CARE FOUND** **540 WHITE PLAINS RD** **SUITE 300** **TARRYTOWN, NY 10591**	X	-	**VARIOUS TRADE DEBT**				**12,000.00**
Account No. **VTA MANAGEMENT SERVICES** **PO OX 504884** **ST LOUIS, MO 63150-4884**	X	-	**VARIOUS TRADE DEBT**				**1,426.00**
Sheet no. **209** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				**61,076.00**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **W L GORE AND ASSOC INC ATTN: LISA MARIE LOPEZ 1505 NORTH 4TH ST FLAGSTAFF, AZ 86004**	X	-	**VARIOUS TRADE DEBT**				**4,352.00**
Account No. **WALDEN JUNE 450 BEECHMONT DRIVE NEW ROCHELLE, NY 10804**		-	**VARIOUS TRADE DEBT**				**92.50**
Account No. **WALDNERS 411 THEODORE FREMD AVE RYE, NY 10580**		-	**VARIOUS TRADE DEBT**				**165.00**
Account No. **WALLACK MARC MD DEPT OF SURGERY**		-	**VARIOUS TRADE DEBT**				**1,481.97**
Account No. **WALTER BROWN C/O FLANZIG & FLANZIG, LLP 323 WILLIS AVENUE Mineola, NY 11501**	X	-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Sheet no. **210** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				**6,091.47**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WARREN ANNASLISE** **18 TUNSTALL AVENUE** **SCARSDALE, NY 10583**		-	**VARIOUS TRADE DEBT**				**705.74**
Account No. **WE RECYCLE** **PO BOX 4699** **WALLINGFORD, CT 06492**	X	-	**VARIOUS TRADE DEBT**				**1,267.24**
Account No. **WEBHOST LLC** **555 SOUTH 300 EAST** **SALT LAKE CITY, UT 84111**		-	**VARIOUS TRADE DEBT**				**480.00**
Account No. **WEILL CORNELL MEDL COLLEGE** **520 E 70TH ST** **STARR 465** **NEW YORK, NY 10021**		-	**VARIOUS TRADE DEBT**				**13,888.00**
Account No. **WELCO-GTS** **PO BOX 382000** **PHILADELPHIA, PA 15250-8000**	X	-	**Various Trade Debt**				**27,935.69**

Sheet no. **211** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **44,276.67**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WELLS FARGO ADVISORS** **75 S BROADWAY** **FLR 4** **WHITE PLAINS, NY 10601**		-	**VARIOUS TRADE DEBT**				**2,653.86**
Account No. **WESSBACK LLC DBA DIVERS** **PO BOX 34** **ROCHDALE, MA 01542-0034**	X	-	**VARIOUS TRADE DEBT**				**1,859.25**
Account No. **WEST COUNTY DEPT OF HEALTH** **145 HUGUENOT STREET** **7TH FLOOR** **NEW ROCHELLE, NY 10801**		-	**VARIOUS TRADE DEBT**				**1,050.00**
Account No. **WEST CTY HEALTH CARE CORP** **100 WOODS ROAD** **VALHALLA, NY 10595**		-	**Various Trade Debt/ Unsecured Debt**				**700,000.00**
Account No. **WEST CTYCONSUMER PROTEC** **112 E POST RD** **4TH FLOOR** **WHITE PLAINS, NY 10601**		-	**VARIOUS TRADE DEBT**				**80.00**

Sheet no. **212** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **705,643.11**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WEST PUBPRIV PARTFOR AGI** **9 SOUTH FIRST AVE** **10TH FLR** **MOUNT VERNON, NY 10550**		-	**VARIOUS TRADE DEBT**				**600.00**
Account No. **WEST-WARD PHARMACEUTICALS** **PO BOX 847385** **DALLAS, TX 75284-7385**	X	-	**VARIOUS TRADE DEBT**				**1,063.34**
Account No. **WESTCHESTER ACADEMY MED** **333 WESTCHESTER AVE** **SUITE LN01** **WHITE PLAINS, NY 10604**		-	**VARIOUS TRADE DEBT**				**4,250.00**
Account No. **WESTCHESTER COUNTY ASSOC** **1133 WESTCHESTER AVE** **SUITE217** **WHITE PLAINS, NY 10604**		-	**VARIOUS TRADE DEBT**				**3,000.00**
Account No. **WESTCHESTER ELEC MOTOR** **50 VERNON LANE** **ELMSFORD, NY 10523**	X	-	**Various Trade Debt**				**35,989.00**

Sheet no. **213** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **44,902.34**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WESTCHESTER MEDICAL CTR** **VALHALLA, NY 10595**		-	**VARIOUS** **TRADE DEBT**				**7,500.00**
Account No. **WESTCO-DEPTOF WGHTSAND** **112 EAST POST ROAD** **4TH FLOOR** **WHITE PLAINS, NY 10601**		-	**VARIOUS** **TRADE DEBT**				**40.00**
Account No. **WESTCOHEALTH CARE CORP** **THE TAYLOR PAVILION** **FINANCE DEPT** **VALHALLA, NY 10595**		-	**VARIOUS** **TRADE DEBT**				**72,981.00**
Account No. **WESTCTYDEPT OF SOCIAL** **112 E POST RD** **6TH FLR RM 602** **WHITE PLAINS, NY 10601**	X	-	**Various** **Trade Debt**				**26,541.58**
Account No. **WHIDDEN JEAN** **1880 PALMER AVENUE** **LARCHMONT, NY 10538**		-	**VARIOUS** **TRADE DEBT**				**84.49**

Sheet no. **214** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **107,147.07**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WHITAKER MEDICAL C/O SILLS CUMMIS & GROSS 30 ROCKFELLER PLAZA New York, NY 10112**	X	-	**LITIGATION CLAIM**	X	X	X	**Unknown**
Account No. **WHITE GLOVE HEALTHCARE 85 BAETLETT ST BROOKLYN, NY 11206**		-	**Various Trade Debt**				**23,560.00**
Account No. **WHITE PLAINS GLASS ANDMIRROR 220 FERRIS AVENUE WHITE PLAINS, NY 10603**		-	**Various Trade Debt**				**541.88**
Account No. **WHITEHEAD WILLIAM 31 ROBINHOOD ROAD POUND RIDGE, NY 10576**		-	**Various Trade Debt**				**420.80**
Account No. **WIC ASSOCIATION OF NYS 1971 WESTERN AVE ALBANY, NY 12203**		-	**Various Trade Debt**				**300.00**

Sheet no. **215** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **24,822.68**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WILLIAM FUREY** **C/O YANKOWITZ LAW FIRM** **175 EAST SHORE ROAD** **Great Neck, NY 11023**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **WILLIAMSON MARCIA** **109 SOUTH 13TH AVE** **MT VERNON, NY 10550**		-	**Various** **Trade Debt**				**26.85**
Account No. **WING MARIA MD PC** **77 QUAKER RIDGE ROAD** **NEW ROCHELLE, NY 10804**		-	**Various** **Trade Debt**				**94,993.36**
Account No. **WINIFRED HAUGHEY** **C/O PETER TANGREDI** **202 MAMARONECK AVE** **White Plains, NY 10601**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **WINOLA LAKE** **PO BOX 2183** **DOYLESTOWN, PA 18901**		-	**Various** **Trade Debt**				**446.39**
Sheet no. **216** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)				**95,466.60**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WOLTERS KLUWER HEALTH INC PO BOX 1590 SUBSCRIPTION DEPT HAGERSTOWN, MD 21740**		-	**Various Trade Debt**				**520.48**
Account No. **WOMAN'S CLUB OF NEW ROCHEL 50 PINTARD AVENUE NEW ROCHELLE, NY 10801**		-	**Various Trade Debt**				**120.00**
Account No. **WORLD CLASS BUSINESS PROD 48-49 35TH ST LONG ISLAND CITY, NY 11101**		-	**Various Trade Debt**				**10,892.51**
Account No. **WOUND CARE INC 2485 MANLEY RD BOZEMAN, MO 59715**		-	**Various Trade Debt**				**1,849.00**
Account No. **WRIGHT MEDICAL TECH 5677 AIRLINE DRIVE ATTN CINDY WESCOTT ARLINGTON, TN 38002**	X	-	**Various Trade Debt**				**26,796.00**

Sheet no. **217** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **40,177.99**

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B6F (Official Form 6F) (12/07) - Cont.

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **WT FARLEY INC** **4450 SHOPPING LA** **SIMI VALLEY, CA 93063**		-	**Various** **Trade Debt**				**1,899.00**
Account No. **WYKAGYL COUNTRY CLUB** **1195 NORTH AVE** **NEW ROCHELLE, NY 10804**		-	**Various** **Trade Debt**				**12,379.58**
Account No. **YMCA** **50 WEYMAN AVE** **NEW ROCHELLE, NY 10805**		-	**Various** **Trade Debt**				**28,820.00**
Account No. **YORDI GUERRA** **C/O KRAMER DILLOF & MORE** **217 BROADWAY** **New York, NY 10007**		-	**ALLEGED MEDICAL MALPRACTICE CLAIM**	X	X	X	**Unknown**
Account No. **YOUTH BASEBALL NEW ROCH** **BOX 113** **NEW ROCHELLE, NY 10804**		-	**Various** **Trade Debt**				**800.00**

Sheet no. **218** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **43,898.58**

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Husband, Wife, Joint, or Community H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No. **ZAHIRUDDIN AYESHA MD** **20 OLD MAMARONECK RD** **2B** **WHITE PLAINS, NY 10605**		-	**Various** **Trade Debt**				**820.92**
Account No. **ZELICOF STEVEN B MD** **600 MAMARONECK AVENUE** **SUITE 101** **HARRISON, NY 10528-1613**		-	**Various** **Trade Debt**				**15,000.00**
Account No. **ZIMMER INC** **PO BOX 414666** **BOSTON, MA 82241-4666**		-	**Various** **Trade Debt**				**24,737.94**
Account No. **ZIMMET HEALTHCARE SERV** **4006 ROUTE 9 SO** **MORGANVILLE, NJ 07751**		-	**Various** **Trade Debt**				**140,638.51**
Account No. **ZOLL MEDICAL CORP** **PO BOX 27028** **NEW YORK, NY 10087-7028**		-	**Various** **Trade Debt**				**27.29**

Sheet no. **219** of **219** sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal (Total of this page) **181,224.66**

Total (Report on Summary of Schedules) **54,181,938.43**

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B6G (Official Form 6G) (12/07)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, 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).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
175 Medical Vision Properties 1084 78TH St BROOKLYN, NY 11228	**Real Estate Lease**
233rd Street Realty Corp 955 ESPLANADE Pelham Manor, NY 10803	**Real Estate Lease 1600 E 233rd St Bronx**
3M HEALTH INFORMATION SYS PO BOX 371227 PITTSBURGH, PA 15250	**Revenue Cycle Information Technology**
A PLUS COMPUTER SOLUTIONS 1 PADANARAM Rd SUITE 142 DANBURY, CT 06811	**Information Technology**
Aanu Sihota 16 Guion Place New Rochelle, NY 10801	**Resident Contract**
Ackerman Michael MD 345 Heathcode Rd Scarsdale, NY 10583	**Physician Contract**
Aditya Athanikar 16 Guion Place New Rochelle, NY 10801	**Resident Contract**
Adriana Lombardi 16 Guion Place New Rochelle, NY 10801	**Resident Contract**
ADVENT HEALTH PARTNERS 301 Plus Park Blvd Suite 215 Nashville, TN 37217	**Revenue Cycle**
AGFA 200 Ballardvale St Wilmington, MA 01887	**Capital Lease Agfa CR 85 SP +NX Package**
Aggarwal Richa 255 Huguenot St Apt 2206 New Rochelle, NY 10801	**Resident Contract**

42

_____ continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
ALERE NORTH AMERICA INC PO BOX 846153 BOSTON, MA 02284	Medical Supplies
Aleta Melissa Maghinay 16 Guion Place New Rochelle, NY 10801	Resident Contract
Alexis C Ferguson 16 Guion Place New Rochelle, NY 10801	Resident Contract
Allegiance Billing and Collection Servic 333 Jericho TpkE Suite 102 Jericho, NY 11753	Revenue Cycle
Allied Heath Care Physicians PPLC Allied Health Care Physicians PPLC c o Eyad Hijazin MD 2365 Boston Post Road Larchmont, NY 10538	Real Estate Lease 2365 Boston Rd Larchmont
Alper Barbera 236 Clayton Rd Scarsdale, NY 10583	Physician Contract
Alpha Medical 145 Saw Mill River Rd Yonkers, NY 10701	Capital Lease Toshiba R F System
Altman Jill 818 Wilmot Rd Scarsdale, NY 10583	Physician Contract
Amanda Weiss 16 Guion Place New Rochelle, NY 10801	Resident Contract
AMERISOURCEBERGEN DRUG CO 101 NORFOLK St MANSFIELD, MA 02048	Medical Supplies
Amurao Aurora MD BLANK	Physician Contract
Ang Jonathan 16 Guion Place New Rochelle, NY 10801	Fellow Contract

Sheet 1 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
APOGEE CONSULTING GROUP 2500 TANGLEWILDE SUITE 480 HOUSTON, TX 77063	Revenue Cycle
APOLLO HEALTH STREET INC Apollo 2 BRIGHTON Rd STE 300 CLIFTON, NJ 07012	Revenue Cycle
Arch Aaron Amon 16 Guion Place New Rochelle, NY 10801	Resident Contract
Arch Aaron Amon 16 Guion Place New Rochelle, NY 10801	Resident Contract
ARDENT SUPPORT TECHNOLOGIES 12 CROSBY Rd DOVER, NH 03820	Information Technology
Ardor Health Solutions 5830 Coral Ridge Dr 120 Coral Springs, FL 33076	Traveler Staffing
Arslanov Renat MD 555 Kappock St Apt 3C Bronx, NY 10463	Physician Contract
Ascom GE Capital 1010 Thomas Edison SW Attn: Melissa Teynor Cedar Rapids, IA 52404	Capital Lease W 220 Mail Machine Dynamic Weighing Platform Scale Accounting Package
Ashutossh Naaraayan 16 Guion Place New Rochelle, NY 10801	Resident Contract
AT T 5019 P O BOX 5019 CAROL STREAM, IL 60197	Telecommunications
Athanikar Aditya 16 Guion Place New Rochelle, NY 10801	Resident Contract
ATT 13146 P O BOX 13146 NEWARK, NJ 07101	Telecommunications

Sheet **2** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
AUTOMATIC DATA PROCESSING P O BOX 9001006 LOUISVILLE, KY 40290	Service Agreement
Ayesha Zahiruddin 16 Guion Place New Rochelle, NY 10801	Fellow Contract
Balakumar Mala Murthy MD 56 Shadetree Lane Roslyn Hgts, NY 11577	Capital Lease
Balakumar Mala Murthy MD 56 Shadetree Lane Roslyn Hgts, NY 11577	Resident Contract
Banini Bubu 16 Guion Place New Rochelle, NY 10801	Resident Contract
Banjade Rashmi 3908 Harvestmeade St 2426 Fort Worth, TX 76155	Resident Contract
Barone Richard 39 Holbrooke Rd White Plains, NY 10605	Physician Contract
BARR BARR INC 460 WEST 34TH St NEW YORK, NY 10001	Service Agreement HEAL Vendor
Basak Prasanta 19 Locust St Greenvale, NY 11548	Physician Contract
Baxter Healthcare Corp PO BOX 33037 NEWARK, NJ 07188	Medical Supplies
Baxter Healthcare Corp PO BOX 33037 NEWARK, NJ 07188	Medical Supplies
Baxter Healthcare Corp Baxter Healthcare Corp One Baxter Parkway DF6 3W Deerfield, IL 60015	Capital Lease

Sheet 3 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Baxter Healthcare Corp Baxter Healthcare Corp One Baxter Parkway DF6 3W Deerfield, IL 60015	Capital Lease
Beckman Coulter Inc 4300 North Harbor Blvd Fullerton, CA 92834	Capital Lease
Berenfeld Benjamin MD 457 Homans Ave Closter, NJ 07624	Physician Contract
Bernhardt Bernard MD 50 Guion Place New Rochelle, NY 10801	Real Estate Lease 50 Guion Place Sublease
Binaya Raman Dahal 16 Guion Place New Rochelle, NY 10801	Resident Contract
Blackbaud Sphere KINTERA RAISERS EDGE 2000 Daniel Island Dr Charleston, SC 29492	Information Technology
BLUEMARK LLC 101 MEMORIAL Dr ELMHURST TOWNSHIP, PA 18444	Revenue Cycle Information Technology
Blum David MD 185 Barnard Rd New Rochelle, NY 10802	Physician Contract
BOTTOMLINE REIMBURSEMENT 5342 CLARK Rd 136 SARASOTA, FL 34233	Revenue Cycle
Bouhlev Ognian 116 Hamilton Ave New Rochelle, NY 10801	Physician Contract
Bozic Stanimir MD 18 Doe View Lane Pound Ridge, NY 10576	Physician Contract
Brotea Cristiana MD 10 Cottage Place Unit 3C White Plains, NY 10601	Physician Contract

Sheet **4** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Bubu Banini 16 Guion Place New Rochelle, NY 10801	Resident Contract
Burger Steven MD 1874 Pelham Prkwy So Bronx, NY 10461	Physician Contract
CA NIMSOFT 1919 S BASCOM AVE STE 600 CAMPBELL, CA 95008	Information Technology
CABLEVISION LIGHTPATH INC Cablevision P PO BOX 360111 PITTSBURGH, PA 15251	Telecommunications
Cadman Gregory MD 36 Holly Dr New Rochelle, NY 10801	Physician Contract
California First Leasing 18201 Von Karman Ave Suite 800 Irvine, CA 92612	Capital Lease
CANNON DESIGN 360 MADISON AVE NEW YORK, NY 10017	Service Agreement HEAL Vendor
CARDINAL HEALTH PYXIS PHAR 1952 SOLUTIONS Ctr CHICAGO, IL 60677	Medical Services
Cardiology Consultants of Westchester 19 Bradhurst Ave Suite 700 Hawthorne, NY 10532	Service Agreement
Casino Joseph MD 22 Stone Fence Stamford, CT 06903	Physician Contract
CCH Inc Mediregs unit P O BOX 4307 CAROL STREAM, IL 60197	Medical Services
CDW GOVERNMENT 75 REMITTANCE Dr SUITE 1515 CHICAGO, IL 60675	Information Technology

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Central Admixture Pharmacy Services Inc P O Box 512435 Philadelphia, PA 19175	Physician Contract
Chamundeswari Subramanian 16 Guion Place New Rochelle, NY 10801	Resident Contract
Chhetri Mamta 16 Guion Place New Rochelle, NY 10801	Resident Contract
Children's Physicians of Westchester Let 40 SUNSHINE COTTAGE Rd MUNGER PAVILION RM125 VALHALLA, NY 10595	Physician Contract
Children's Physicians of Westchester Ped 40 SUNSHINE COTTAGE Rd MUNGER PAVILION RM125 VALHALLA, NY 10595	Physician Contract
CHIRUMAMILLA VASU 8 Samantha Way West Nyack New Rochelle, NY 10994	Physician Contract
Christine Ngo Pabilona 16 Guion Place New Rochelle, NY 10801	Resident Contract
Chua Milton Marvin Ang 16 Guion Place New Rochelle, NY 10801	Resident Contract
Chua Ruthie May 80 Guion Place Apt 10T New Rochelle, NY 10801	Resident Contract
Chubb Group of Insurance Co 15 Mountain View Rd Warren, NJ 07059	Insurance
Cisco Systems Inc 170 West Tasman Dr San Jose, CA 95134	Information Technology
Citicorp Vendor Finance Inc BLANK	Capital Lease

Sheet **6** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Citrix Strategic Headquarters 4988 Great America Pkwy Santa Clara, CA 95054	Information Technology
Clough Thomas MD 225 Loring Ave Pelham, NY 10803	Physician Contract
CMS COMPLIANCE GROUP INC 68 SOUTH SERVICE RD MELVILLE, NY 11747	Revenue Cycle
COACTIV LLC 900 ETHAN ALLEN Hwy RIDGEFIELD, CT 06877	Revenue Cycle Information Technology
Columbia University Health Sciences Divi 630 West 168th St New York, NY 10032	Service Agreement
Columbia University Surgery 630 West 168th St New York, NY 10032	Physician Contract
Conjeevaram Srinivasulu MD 166 Pearsall Dr 4C Mount Vernon, NY 10552	Physician Contract
Consuelo Rodriguez 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
CONTROL POINT ASSOCIATES 35 TECHNOLOGY Dr WARREN, NJ 07059	Service Agreement
CONVERGENT REVENUE CYCLE MANAGEMENT INC 1357 HEATHCOTE BLVD STE 300 GAINESVILLE, VA 20155	Revenue Cycle
Cooper Jerome MD 92 Wood Hollow Lane New Rochelle, NY 10804	Physician Contract
Cooper Jerome PCU 92 Wood Hollow Lane New Rochelle, NY 10804	Physician Contract

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Coron Roger MD 37 Carrington Dr Greenwich, CT 06831	Physician Contract
Creekridge Capital LLC 7808 Creekridge Circle Suite 250 Edina, MN 55439	Capital Lease Pyxsis Medstation
Creekridge Capital LLC 7808 Creekridge Circ1e Suite 250 Edina, MN 55439	Capital Lease SecondLook 300 v8 1 CAD System
CW North Ridge Plaza LLC CW North Ridge Plaza LLC c o Brixmor Property Group 420 Lexington Avenue 7th Fl New York, NY 10170	Real Estate Lease MVH 77 Quaker Ridge Rd Suite 205
CW North Ridge Plaza LLC CW North Ridge Plaza LLC c o Brixmor Property Group 420 Lexington Avenue 7th Fl New York, NY 10170	Real Estate Lease MVH 77 Quaker Ridge Rd Suite 200A
CXTEC PO B0X 5211 DEPT 116003 BINGHAMTON, NY 13902	Information Technology
CYRACOM LLC PO BOX 975652 DALLAS, TX 75397	Service Agreement
D D ELEVATOR INC 38 HAYES St ELMSFORD, NY 10523	Service Agreement HEAL Vendor
D?Allegro Diane Psychiatrist 229 ELK Ave NEW ROCHELLE, NY 10804	Physician Contract
Dahal Binaya Raman 16 Guion Place New Rochelle, NY 10801	Resident Contract
Das Kaushik MD P C 19 Bradhurst Ave Hawthorne, NY 10532	Physician Contract

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
DATABIT INC 200 ROUTE 17 SOUTH MAHWAH, NJ 07430	Information Technology
David Gutman 16 Guion Place New Rochelle, NY 10801	Resident Contract
De Jesus Diana 16 Guion Place New Rochelle, NY 10801	Resident Contract
de los Reyes Gino Gino Leila Olivia 16 Guion Place New Rochelle, NY 10801	Resident Contract
DEAF TALK LLC DTL 14 EAST MAIN St CARNEGIE, PA 15106	Service Agreement
Deliana Danila MD 680 West Boston Post Rd Apt 3R Mamaroneck, NY 10543	Physician Contract
DELL MARKETING PO BOX 643561 PITTSBURG, PA 15264	Information Technology
Delta Flex Travelers LLC Four Hickory 1755 Wittington Place Suite 175 Dallas, TX 75234	Traveler Staffing
Delta Healthcare Providers Four Hickory 1755 Wittington Place Suite 175 Dallas, TX 75234	Traveler Staffing
Devine Patricia MD 8 Hageman Court Katonah, NY 10536	Physician Contract
Dhar Yasmin MD 77 Glenwood Ave Demarest, NJ 07627	Physician Contract
Diana De Jesus 16 Guion Place New Rochelle, NY 10801	Resident Contract

Sheet **9** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Divya Sambandan 16 Guion Place New Rochelle, NY 10801	Resident Contract
Dockeray Alan MD 175 Memorial Hwy Suite 1 4 New Rochelle, NY 10801	Physician Contract
Dry Julia 16 Guion Place New Rochelle, NY 10801	Resident Contract
ECLIPSYS CORP NOW ALLSCRIPTS P O BOX 8538 0133 LOCKBOX 077133 PHILADELPHIA, PA 19171	Revenue Cycle Information Technology
EDIMS LLC 651 WEST MOUNT PLEASANT AVE LIVINGSTON, NJ 07039	Information Technology Software
Efiong James 171 Hanson Lane New Rochelle, NY 10804	Physician Contract
Elisa Mercedes Gard 16 Guion Place New Rochelle, NY 10801	Resident Contract
EMC2 PO BOX 651388 CHARLOTTE, NC 28265	Information Technology
Emergency Medical Associates Sound Sho 651 W Mt Pleasant Ave Livingston, NJ 07039	Medical Services
ENTERPRISE SYSTEMS SOFTWARE 5151 MONROE St SUITE 101 TOLEDO, OH 43623	Information Technology
ESOLUTIONS INC 401 WEST FRONTIER LANE SUITE 101 OLATHE, KS 66061	Information Technology
Execu Sys Ltd ONE PENN PLAZE SUITE 700 New York, NY 10119	Traveler Staffing

Sheet **10** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Fan Yang 16 Guion Place New Rochelle, NY 10801	Resident Contract
Ferguson Alexis 16 Guion Place New Rochelle, NY 10801	Resident Contract
FIRESTOP SOLUTIONS INC 1655 SYCAMORE AVE BOHEMIA, NY 11716	Service Agreement
First Financial 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease Fire Rated Access Doors
First Financial 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease Tyco Healthcare Vent and Kit
First Financial 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease Miscellaneous Surgical Equipment
First Financial 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease Kronos Workforce Timekeeper V6
First Financial 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease Vivid E9 BT11 and Echopac Software
First Financial 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease Olympus Gyrus ACMI
First Financial Corporate Leasing LLC d 711 Kimberly Ave Suite 160 Placentia, CA 92870	Capital Lease
Fishbowl Inventory Suite C2500 580 N Technology Way Orem, UT 84097	Information Technology

Sheet **11** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re Sound Shore Medical Center of Westchester, Debtor

Case No. 13-22840

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Florence Rasul 50 DARWOOD PLACE MT VERNON, NY 10553	Traveler Staffing
Foundation for Minimally Invasive Surger BLANK	Service Agreement
Fox Norris MD 947 Shore Acres Dr Mamaroneck, NY 10543	Physician Contract
Garan Ared MD 1 Sadore Lane Suite 1N Yonkers, NY 10710	Physician Contract
Gard Elisa Mercedes 16 Guion Place New Rochelle, NY 10801	Resident Contract
Garvey Richard MD 104 Peace St Pelham, NY 10803	Physician Contract
GE Capital P O Box 644479 Pittsburg, PA 15264	Capital Lease Bobcat Skid Steer Loader
GE Healthcare GE Healthcare Fin Svcs P O Box 641419 Pittsburgh, PA 15264	Capital Lease
GE Healthcare Financial Services P O Box 641419 Attn: Vijay Gould Pittsburgh, PA 15264	Capital Lease
GE OEC Medical 384 N Wright Brothers Attn: Chad Kendell Salt Lake City, UT 84110	Capital Lease
Gendler Seth MD 29 Springdale Rd Scarsdale, NY 10583	Physician Contract
General Electric Capital Corporation 1961 Hrrst Dr Moberly, MO 65270	Capital Lease

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
General Electric Company General Electric Co 20225 Watertower Blvd Suite 20C Brookfield, WI 53045	Capital Lease
Gennarelli Louis A MD 241 E 86th St New York, NY 10028	Physician Contract
Ginsberg Daniel MD 12 Taunton Rd Scarsdale, NY 10583	Physician Contract
Gish Realty Corp 830 Pelhamdale Ave New Rochelle, NY 10801	Real Estate Lease MVH 830 Pelhamdale Ave
Gitler Bernard MD 26 Prince Willows La Mamaroneck, NY 10543	Physician Contract
Gitler Bernard MD 26 Prince Willows La Mamaroneck, NY 10543	Physician Contract
Glassman Mark MD 7 Magnolia Dr Ryebrook, NY 10573	Physician Contract
Gonzalez Lillian 7705 Kennedy Blvd Apt 2 North Bergen, NJ 07047	Physician Contract
Good News Personnel One Northview Court Pleasantville, NY 10570	Traveler Staffing
Greiger Paola MD 12 North 7th Ave Mount Vernon, NY 10550	Real Estate License
Gresseau Shirley MD 40 Memorial Hwy Apt 32F New Rochelle, NY 10801	Physician Contract
Grettel Tesado 16 Guion Place New Rochelle, NY 10801	Resident Contract

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Gross Edelstein LLP 111 GREAT NECK Rd SUITE 204 GREAT NECK, NY 11021	Service Agreement
GROUP J 600 HICKSVILLE Rd BETHPAGE, NY 11714	Revenue Cycle
Guion Place Housing Company Inc 50 Guion Place New Rochelle, NY 10801	Real Estate Lease
Guion Place Housing Company Inc 50 Guion Place New Rochelle, NY 10801	Real Estate Lease
Gupta Sanjeev 50 Guion Place Apt 9F New Rochelle, NY 10801	Resident Contract
Gutman David 16 Guion Place New Rochelle, NY 10801	Resident Contract
Halpern Michelle MD 961 Green Meadow Ln Mamaroneck, NY 10543	Physician Contract
Harkinder Khangura 16 Guion Place New Rochelle, NY 10801	Resident Contract
Hashemi Pantea 518 E 80th St New York, NY 10075	Resident Contract
Hashemi Pantea 518 E 80th St New York, NY 10075	Resident Contract
Hassan Khaled A MD 71 Hoover Dr Cresskill, NJ 07626	Physician Contract
HEALTH ROI 344 MAIN ST METUCHEN, NJ 08840	Revenue Cycle

Sheet **14** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Health Care Compliance Strategies 30 JERICHO EXECUTIVE PLAZA STE 400C JERICHO, NY 11753	Information Technology
Health Resources Optimization Inc Heal 344 MAIN ST METUCHEN, NJ 08840	Revenue Cycle
HEALTHCARE RETROACTIVE AUD PO BOX 228295 DORAL, FL 33172	Information Technology
Hernandez Miguel MD 153 Homewood Ave Yonkers, NY 10701	Physician Contract
Herzberg Gilbert 31 Villa Rd Larchmont, NY 10538	Physician Contract
Hill Rom 1069 State Route 46 East Batesville, IN 47006	Capital Lease 77 CareAssist Beds with Scale 77 VersaCare Beds with Scale 9 TotalCare SpORT Bed System Among Other Items
Hill Rom 1069 State Route 46 East Batesville, IN 47006	Capital Lease
HIPLINE Mass Notification System	Information Technology
HLNCC Heather Lewis 400 WEST 56TH ST SUITE 1E NEW YORK, NY 10019	Information Technology
Holgersen Leif MD 141 South Central Park Ave Suite 102 Hartsdale, NY 10530	Physician Contract
Holstein Stanley MD 140 Lockwood Ave Suite 324 New Rochelle, NY 10801	Physician Contract
Holstein Stanley MD 140 Lockwood Ave Suite 324 New Rochelle, NY 10801	Physician Contract

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10801	Real Estate Sublease of Goldstein Pavilion from SSMC
HRA Healthcare Retroactive Audits Inc PO BOX 228295 DORAL, FL 33172	Revenue Cycle
IBM CORP POBOX 676673 PO BOX 676673 DALLAS, TX 75267	Information Technology
InsightInvestments 600 City Pkwy West Ffth Floor Oange, CA 92868	Capital Lease Arbua Multi Service Mobility Module Mark I Etc
InsightInvestments PO Box 74389 Chicago, IL 60690	Capital Lease Lenovo Thinkpads Cisco Connectivity
InsightInvestments 600 City Pkwy West 5th fl Attn: Zarifa Abdur Rahim Orange, CA 92868	Capital Lease
InsightInvestments 600 City Pkwy West Fifth Floor Orange, CA 92868	Capital Lease Arbua Multi Service Mobility Module Mark I Etc
InsightInvestments MB Financial Bank NA 6111 N River Road Rosemont, IL 60018	Capital Lease Dell Servers HP Computers HP Printers
InsightInvestments 600 City Pkwy West Fifth Floor Orange, CA 92868	Capital Lease Intuitive Surgical
InsightInvestments 600 City Pkwy West Fifth Floor Orange, CA 92868	Capital Lease Intuitive Surgical
INTERIOR CONSTRUCTION CORP the Contracto 314 E 34TH St NEW YORK, NY 10016	Service Agreement HEAL Vendor

Sheet **16** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
IRIS INTERNATIONAL INC P O Box 101055 Pasadena, CA 91189	Capital Lease iQ 200 Elite System
James Mussman MD 150 Lockwood Ave Ste 18 New Rochelle, NY 10801	Real Estate Lease MVH 150 Lockwood Ave Ste 18 License
Jazayeri Mogadass Benham M D 16 Guion Place New Rochelle, NY 10801	Physician Contract
Jesmajian Stephen MD 121 Edgars Lane Hasting On Hudson, NY 10706	Physician Contract
Jie Ling 16 Guion Place New Rochelle, NY 10801	Resident Contract
Jonathan Ang 16 Guion Place New Rochelle, NY 10801	Fellow Contract
Julia Dry 16 Guion Place New Rochelle, NY 10801	Resident Contract
Kamaswari Lakshmi MD 110 Lockwood Ave Ste 300 New Rochelle, NY 10801	Real Estate License 110 Lockwood Ave Ste 300
Kaminer Ruth MD 10 Byworth Rd New Rochelle, NY 10804	Physician Contract
Karanfilian Richard MD 5 Creemer Rd Armonk, NY 10504	Physician Contract
Katz Leah Minnie 16 Guion Place New Rochelle, NY 10801	Resident Contract
Katz Melanie 207 Mayflower Ave Williston Park, NY 11596	Traveler Staffing

Sheet 17 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Kazanskaya Anna 281 Garth Rd Apt C2D Scarsdale, NY 10583	Physician Contract
Kelly Lesa MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
Keltz Theodore MD 50 Vanehan Blvd New Rochelle, NY 10804	Physician Contract
Keltz Theodore MD 50 Vanehan Blvd New Rochelle, NY 10804	Physician Contract
Keltz Theodore MD 150 Lockwood Ave No 28 New Rochelle, NY 10801	Service Agreement
Keltz Theodore PCU 50 Vanehan Blvd New Rochelle, NY 10804	Physician Contract
Kern Kathleen 2 Louisiana Ave Apt 6D Bronxville, NY 10708	Traveler Staffing
Kessler Samuel BLANK	Physician Contract
Khangura Harkinder 16 Guion Place New Rochelle, NY 10801	Resident Contract
Kidsanne Realty Corporation BLANK	Real Estate Lease
Kilchevsky Eitan MD 9 Equestrian Ridge Newtown, CT 06470	Physician Contract
Klass Stephen 421 Huguenot St New Rochelle, NY 10801	Physician Contract
Klass Stephen 421 Huguenot St New Rochelle, NY 10801	Physician Contract

Sheet **18** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Kramer Marshall 10 Kenilworth Lane Rye Rye, NY 10580	Physician Contract
Kwon Hye Eun MD 3 Highview Dr Scarsdale, NY 10583	Physician Contract
Lakshmi Kameswari MD 218 Victory Blvd New Rochelle, NY 10804	Physician Contract
Lakshmi Kameswari MD 110 Lockwood Ave Ste 300 New Rochelle, NY 10801	Real Estate License 110 Lockwood Ave Ste 300
Lamsen Marie Louise 16 Guion Place New Rochelle, NY 10801	Resident Contract
Landau Thomas K MD 604 Fairway Green Mamaroneck, NY 10543	Physician Contract
Lanwehr Bernard 7 Bedell Rd Amawalk, NY 10501	Physician Contract
Larry Roberts MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
Leah Katz 16 Guion Place New Rochelle, NY 10801	Resident Contract
Leila Gino Gino 16 Guion Place New Rochelle, NY 10801	Resident Contract
Leomerto Somera 16 Guion Place New Rochelle, NY 10801	Resident Contract
Lesa Kelly MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License

Sheet **19** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Levitt Margaret MD 50 Elk Ave New Rochelle, NY 10804	Physician Contract
Ling Jie 16 Guion Place New Rochelle, NY 10801	Resident Contract
Liss Mark MD 115 East 86th St New York, NY 10028	Physician Contract
Lockwood Realty LLC Landlord Private Private Medical Group Irwin Kaplowitz M D and Samuel L Kes 150 Lockwood Avenue New Rochelle, NY 10801	Real Estate Lease
Lockwood Realty LLC 701 Westchester Ave White Plains, NY 10604	Real Estate Lease MVH 150 Lockwood Ave Ste 108
Lockwood Realty LLC 701 Westchester Ave White Plains, NY 10604	Real Estate Lease MVH 140 Lockwood Ave Ste 104
Lockwood Realty LLC c o Greenridge Manag 701 Westchester Ave White Plains, NY 10604	Real Estate Lease
Lombardi Adriana 16 Guion Place New Rochelle, NY 10801	Resident Contract
Luna Ronald 15 486 Quatsino Blvd Kitimat BC V8C1V2, Canada	Resident Contract
Lyo Rosie MD 1648 Lurting Ave Bronx, NY 10461	Physician Contract
Maffucci Leonard MD 92 Rosehill Ave New Rochelle, NY 10804	Physician Contract
MAGENTA REALTY LLC 369 GLOUCESTER ST ENGLEWOOD, NJ 07631	Real Estate Lease

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Mala Balakumar 56 Shadetree Lane Roslyn Hgts, NY 11577	Equipment Lease
Mamta Chhetri 16 Guion Place New Rochelle, NY 10801	Resident Contract
Manasi Nabar 16 Guion Place New Rochelle, NY 10801	Resident Contract
Mandel Michael MD 2365 Boston Post Rd Larchmont, NY 10538	Physician Contract
Manohar Sandhya 50 Guion Place Apt 2G New Rochelle, NY 10801	Resident Contract
Margaret Scarcella BLANK	Traveler Staffing
Maria Wing MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
Marie Louies Lamsen 16 Guion Place New Rochelle, NY 10801	Resident Contract
Marrero Lisa A MD 30 Harvard Ct White Plains, NY 10605	Physician Contract
Marsden Medical Physics Associates LLC 266 LONG MEADOW RD KINNELON, NJ 07405	Physician Contract
Marshall Kramer M D 10 Kenilworth Lane Rye, NY 10580	Service Agreement
Matos Marshall MD 115 Rolling Way New Rochelle, NY 10804	Physician Contract
Matos Marshall MD 115 Rolling Way New Rochelle, NY 10804	Physician Contract

Sheet 21 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Matos Marshall PCU 115 Rolling Way New Rochelle, NY 10804	Physician Contract
MB Financial Bank N A Assignee Insight MB Financial Bank N A Attn: Leasing Department 8th Floor 6111 North River Road Rosemont, IL 60018	Capital Lease
MCKESSON INFORMATION SOLUTIONS PO BOX 98347 CHICAGO, IL 60693	Information Technology
MCKESSON MEDICAL SURGICAL CPC REMITTANCE PROCESSING P O BOX 329000 OAD 74034 WESTON, FL 33332	Medical Supplies
McRoberts Security Technology PROSE 46 THROCKMORTON St FREEHOLD, NJ 07728	Information Technology
McWilliam James R MD 118 Midland Ave Rye, NY 10580	Physician Contract
Meacham Kevin MD 9 Silver Stream Dr W Harrison, NY 10604	Physician Contract
Med One Capital Funding LLC GE Healthcar 10712 South 1300 East Sandy, UT 84094	Capital Lease 9 Aespire Anesthesia Machines
Med One Capital Funding LLC Purian Benne GE Healthcare Fin Svcs P O Box 641419 Pittsburgh, PA 15264	Capital Lease
Medical Staffing Network Inc 334 Underhill Ave Bldg 5 Yorktown Heights, NY 10598	Traveler Staffing
Medina Emma MD 170 Coligni Ave New Rochelle, NY 10801	Physician Contract
Medina Emma PCU 170 Coligni Ave New Rochelle, NY 10801	Physician Contract

Sheet **22** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Medline Industries Inc ONE MEDLINE PLACE MUNDELEIN, IL 60060	Medical Supplies
Medseek Inc PO BOX 36843 BIRMINGHAM, AL 35236	Information Technology
Megan Ridley Lane 16 Guion Place New Rochelle, NY 10801	Resident Contract
Mehta Shikha 16 Guion Place New Rochelle, NY 10801	Fellow Contract
Melanie Katz 207 Mayflower Ave Williston Park, NY 11596	Traveler Staffing
Melissa Aleta 16 Guion Place New Rochelle, NY 10801	Resident Contract
Mercy College of Dobbs Ferry 555 BRdway Dobbs Ferry, NY 10522	Sound Shore Health System Department of Physicial Medicine and Rehabilitation Agreement
MICHAEL ANTHONY CONTRACTING 161 RAIL Rd AVE GARDEN CITY PARK, NY 11040	Service Agreement HEAL Vendor
Mignone Paul MD 250 Crow Hill Rd Mount Kisco, NY 10549	Physician Contract
Miller Marian Pediatrician BLANK	Physician Contract
Miller Donald MD 1 Avon Rd Larchmont, NY 10538	Physician Contract
Miller Donald MD 1 Avon Rd Larchmont, NY 10538	Physician Contract
Miller Donald PCU 1 Avon Rd Larchmont, NY 10538	Physician Contract

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
MILLER MILONE P C 100 QUENTIN ROOSEVELT BLVD GARDEN CITY, NY 11530	Legal Services
Milton Chua 16 Guion Place New Rochelle, NY 10801	Resident Contract
Minowitz Lawrence MD 26 Sherwood Ave Greenwich, CT 06831	Physician Contract
Mitamura John MD 40 Oak St White Plains, NY 10607	Physician Contract
Mitchell Onwochei 16 Guion Place New Rochelle, NY 10801	Resident Contract
Mitchell Martin Inc 485 A Route 1 South Suite 260 Iseline, NJ 08830	Traveler Staffing
Morey Rishikesh 50 Guion Place Apt 6F New Rochelle, NY 10801	Resident Contract
Mussman James MD 150 Lockwood Ave Ste 18 New Rochelle, NY 10801	Real Estate Lease MVH 150 Lockwood Ave Ste 18 License
Naaraayan Ashutossh 16 Guion Place New Rochelle, NY 10801	Resident Contract
Nabar Manasi 16 Guion Place New Rochelle, NY 10801	Resident Contract
Neurology Associates of Westchester N Y New York Medical College 40 Sunshine Cottage Road Valhalla, NY 10595	Service Agreement
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 2N

Sheet **24** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 2S
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 2X
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 3F
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 4F
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 6E
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 6K
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 6M
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 9A
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 9B
New Rochelle Sound Shore Housing LLC as 80 Guion Place New Rochelle, NY 10801	Real Estate Lease Residential Apt 10S
NEW YORK BLOOD CENTER ACCOUNTS RECEIVABLE DEPT P O BOX 9674 UNIONDALE, NY 11553	Medical Supplies
NEW YORK BOARD OF RABBIS 139 EAST 39TH St NEW YORK, NY 10016	Service Agreement
New York Dialysis Services 861 MARCON BLVD STE 2 ALLENTOWN, PA 18109	Service Agreement

Sheet **25** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
New York Dialysis Services Inc d b a 861 MARCON BLVD STE 2 ALLENTOWN, PA 18109	Medical Supplies
New York Dialysis Services Inc d b a 861 MARCON BLVD STE 2 ALLENTOWN, PA 18109	Real Estate Lease Dialysis Center
NEW YORK MEDICAL COLLEGE 40 SUNSHINE COTTAGE Rd ATTN: DR MARC WALLACK VALHALLA, NY 10595	Medical Services
New York Medical College Department of P Munger Pavilion Room 123 Valhalla, NY 10595	Service Agreement
New York Medical College of Valhalla th 40 Sunshine Cottage Rd Valhalla, NY 10595	Medical Services
New York Radiology Alliance 25983 NETWORK PLACE CHICAGO, IL 60673	Physician Contract
Newell Rosanne Margaret MD 12 Glenn Place Hastings on Hudson, NY 10706	Physician Contract
Nihon Kohden America Inc 90 Icon St Foothill Ranch, CA 92610	Capital Lease
Nimsoft LLC 1919 S BASCOM AVE STE 600 CAMPBELL, CA 95008	Information Technology
Nnaemeka Peter E MD 2 Pengilly Dr New Rochelle, NY 10804	Physician Contract
NRHMC Services Corp 16 Guion Place New Rochelle, NY 10801	Real Estate Lease MVH 140 Lockwood Ave Ste 104 Sublease
NRHMC Services Corp Sub Lessor 16 Guion Place New Rochelle, NY 10801	Real Estate Lease

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
NRHMC Services Corp Owner of Goldstein 16 Guion Place New Rochelle, NY 10801	Real Estate Lease of Goldstein Pavilion to SSMC
Nulu Shanti 12 Hamilton Terrace New York, NY 10031	Resident Contract
NUTRITION MANAGEMENT SERVICES COMPANY ? 2071 KIMBERTON RD KIMBERTON, PA 19442	Service Agreement
Nweke Chukumerge Obiageli MD BLANK	Physician Contract
NYMC Pediatrics G MURRAY ATLS COURSE COORD NYMC DEPT OF SURG MUNGER PAV VALHALLE, NY 10595	Service Agreement
NYS Department of Health Corning Tower Room 1821 Empire State Plaza Albany, NY 12237	Service Agreement
NYU Cardiothoracic Surgery Associates New York University School of Medicine 550 First Avenue New York, NY 10016	Physician Contract
Ocean Side Institutional Industries Inc 2525 Long Beach Rd Oceanside, NY 11572	Service Agreement
Olsewski John M MD 135 Bramble Brook Rd Ardsley, NY 10502	Physician Contract
Onwochei Mitchell 16 Guion Place New Rochelle, NY 10801	Resident Contract
OPTICAL ARCHIVES 550 MAMARONECK AVE HARRISON, NY 10528	Information Technology
Optumhealth Bank Inc 2525 Lake Park Blvd Salt Lake City, UT 84120	Capital Lease

Sheet **27** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Orange Pathology Associates P C OPA A **156 ROUTE 59** **SUITE B4** **SUFFERN, NY 10901**	**Physician Contract**
Pabilona Christine Ngo **16 Guion Place** **New Rochelle, NY 10801**	**Resident Contract**
Pali Rozafa L MD **89 Mill Spring Lane** **Stamford, CT 06903**	**Physician Contract**
Pandey Sanjay Prasad **50 Guion Place** **Apt 4D** **New Rochelle, NY 10801**	**Resident Contract**
Pantea Hashemi **16 Guion Place** **New Rochelle, NY 10801**	**Resident Contract**
Pantheon **CrossRds Corp Ctr** **Suite 624** **One International Boulvard** **Mahwah, NJ 07495**	**Capital Lease VMAX Encore Pulmonary Instruments**
Pantheon **CrossRds Corp Ctr** **Suite 624** **One International Boulvard** **Mahwah, NJ 07495**	**Capital Lease Olympus Video and Light Sources**
Pantheon **CrossRds Corp Ctr** **Suite 624** **One International Boulvard** **Mahwah, NJ 07495**	**Capital Lease Tribridge IT Equipment**
Pantheon **CrossRds Corp Ctr** **Suite 624** **One International Boulvard** **Mahwah, NJ 07495**	**Capital Lease Verathon Mobile Carts**
Pantheon **CrossRds Corp Ctr** **Suite 624** **One International Boulvard** **Mahwah, NJ 07495**	**Capital Lease Acuson Antares**

Sheet **28** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Pantheon CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease Acusson S2000
Pantheon CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease Palco Chilled water coils
Pantheon Capital LLC CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease VMAX Encore Pulmonary Instruments
Pantheon Capital LLC CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease Olympus Video and Light Sources
Pantheon Capital LLC CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease Tribridge IT Equipment
Pantheon Capital LLC CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease Verathon Mobile Carts
Pantheon Capital LLC CrossRds Corp Ctr Suite 624 One International Boulvard Mahwah, NJ 07495	Capital Lease 43 Copiers Scanners Fax Machines
Park Kyung Sun 85 Wilson Dr New Rochelle, NY 10801	Physician Contract
PASSPORT HEALTH COMMUNICATIONS INC Pass 720 COOL SPRINGS BLVD FRANKLIN, TN 37067	Revenue Cycle Information Technology

Sheet **29** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Paudel Rajiv 16 Guion Place New Rochelle, NY 10801	Fellow Contract
Paudel Rajiv 8 Intervale Ave White Plains, NY 10603	Fellow Contract
Paudel Rajiv M D 16 Guion Place New Rochelle, NY 10801	Fellow Contract
Pediatric Group of New Rochelle PC 77 Quaker Ridge Rd Suite 205 New Rochelle, NY 10804	Real Estate Lease MVH 77 Quaker Ridge Rd Suite 205 Sublease
PERCEPTIVE HEALTHCARE INC 162 PARK St SUITE 202 NORTH READING, MA 01864	Information Technology
PERKINS EASTMAN ARCHITECTS 115 FIFTH Ave NEW YORK, NY 10003	Service Agreement HEAL Vendor
Perry Botinger Lynne MD 140 A Lockwood Ave New Rochelle, NY 10801	Physician Contract
Perry Botinger Lynne MD 140 A Lockwood Ave New Rochelle, NY 10801	Physician Contract
Perry Botinger Lynne MD FACC 140A Lockwood Ave New Rochelle, NY 10801	Service Agreement
PHYSICIANS? RECIPROCAL INSURERS PRI 1800 Northern Blvd Roslyn, NY 11576	Malpractice Coverage
Piazza Stephan 24 Canfield Dr Stamford, CT 06902	Physician Contract
Pisano Richard MD 1802 Palmer Ave Larchmont, NY 10538	Physician Contract

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Pokharel Reha 3450 Wayne Ave Apt 2H Bronx, NY 10467	Resident Contract
Pomerantz Dan MD 34 Bon Air Ave New Rochelle, NY 10804	Physician Contract
Ponticiello Joseph MD 226 Carroll Ave Mamaroneck, NY 10543	Physician Contract
Poste Jennifer 16 Guion Place New Rochelle, NY 10801	Resident Contract
Premji Resmi 50 Guion Place Apt 7C New Rochelle, NY 10801	Resident Contract
Pride Healthcare 420 Lexington Ave 2220 New York, NY 10170	Traveler Staffing
PROFESSIONAL CLAIMS BUREAU 439 OAK St GARDEN CITY, NY 11530	Revenue Cycle
Professional Office Building Corporation 421 Huguenot St New Rochelle, NY 10801	Real Estate Lease
Protass Leon MD 233 Norman Rd New Rochelle, NY 10804	Physician Contract
Protass Leon MD 233 Norman Rd New Rochelle, NY 10804	Physician Contract
Pulmonary and Sleep Specialists 2365 BOSTON POST RD STE 103 LARCHMONT, NY 10538	Real Estate Lease
QS 1 DATA SYSTEMS PO BOX 75154 CHARLOTTE, NC 28275	Information Technology

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Quality Business Solutions 12701 Whitewater Dr Suite 180 Minnetonka, MN 55343	Revenue Cycle
Rachana Shukla 16 Guion Place New Rochelle, NY 10801	Resident Contract
Radiometer America Inc 810 Sharon Dr Westlake, OH 44145	Capital Lease
Rajiv Paudel 8 Intervale Ave White Plains, NY 10603	Fellow Contract
Rangraj Madhu S MD 110 Monterey Ave Pelham, NY 10803	Physician Contract
Rashmi Banjade 16 Guion Place New Rochelle, NY 10801	Resident Contract
Rasul Florence 50 DARWOOD PLACE MT VERNON, NY 10553	Traveler Staffing
Reha Pokharel 16 Guion Place New Rochelle, NY 10801	Resident Contract
RELAYHEALTH a division of McKesson Tech PO BOX 403421 ATLANTA, GA 30364	Information Technology
Remote Pharmacist Services 5600 North River Rd Rosemont, IL 60018	Service Agreement
Republic Bank 801 North 500 West Suite 103 Woods Cross, UT 84087	Capital Lease
RESEARCH IN MOTION 12432 COLLECTIONS Ctr DR CHICAGO, IL 60699	Telecommunications
Resmi Premji 16 Guion Place New Rochelle, NY 10801	Resident Contract

Sheet **32** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Richa Aggarwal 16 Guion Place New Rochelle, NY 10801	Resident Contract
Ridley Lane Meghan 16 Guion Place New Rochelle, NY 10801	Resident Contract
Rishikesh Morey 16 Guion Place New Rochelle, NY 10801	Resident Contract
Roberts Larry MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
Rodriguez Bartholome MD 19 Duesnberry Rd Bronxville, NY 10466	Physician Contract
Rodriguez Consuelo MD 58 Crossway Scarsdale, NY 10583	Physician Contract
Rodriguez Consuelo MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
Romano Alicia MD 10 Briarcliff Dr S Ossining, NY 10562	Physician Contract
Ronald Luna 16 Guion Place New Rochelle, NY 10801	Resident Contract
Rosenfeld Nathan MD 391 Oxford Rd New Rochelle, NY 10804	Physician Contract
Russell Julius MD 60 Sun Haven Dr New Rochelle, NY 10801	Physician Contract
Ruthie May Chua 16 Guion Place New Rochelle, NY 10801	Resident Contract
RYDER TRANSPORTATION P O BOX 96723 CHICAGO, IL 60693	Capital Lease

Sheet 33 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re Sound Shore Medical Center of Westchester, Debtor

Case No. 13-22840

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Saitta Richard MD 140 Lockwood Ave New Rochelle, NY 10801	Physician Contract
Salveo Healthcare Solutions Inc BLANK	Traveler Staffing
Salveo Healthcare Solutions Inc 60 E 42nd St Suite 2517 New York, NY 10165	Traveler Staffing
Sambandan Divya 16 Guion Place New Rochelle, NY 10801	Resident Contract
Samolsky Marc MD 26 Club House Lane Scarsdale, NY 10583	Physician Contract
Sandhya Manohar 16 Guion Place New Rochelle, NY 10801	Resident Contract
Sanjay Pandey 16 Guion Place New Rochelle, NY 10801	Resident Contract
Sanjeev Gupta 16 Guion Place New Rochelle, NY 10801	Resident Contract
Santopietro Robert MD 80 Guion Place Apt 10R New Rochelle, NY 10801	Physician Contract
Scarcella Margaret BLANK	Traveler Staffing
Schuettenberg Susan OD 725 Pelhamdale Ave Pelham, NY 10803	Physician Contract
SD Medical Radiology LLP 52 Main St Bedford Hills, NY 10507	Physician Contract
Shanti Nulu 16 Guion Place New Rochelle, NY 10801	Resident Contract

Sheet 34 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Sharanjeet Thind **16 Guion Place** **New Rochelle, NY 10801**	**Resident Contract**
Sharma Bharatee **9 Ramapo Trail** **Harrison, NY 10528**	**Physician Contract**
Sharma Bharatee **9 Ramapo Trail** **Harrison, NY 10528**	**Physician Contract**
Shikha Mehta **16 Guion Place** **New Rochelle, NY 10801**	**Fellow Contract**
Shookster Linda Rheumatologist **BLANK**	**Physician Contract**
Shukla Rachana **43 Fieldmere St** **New Rochelle, NY 10804**	**Resident Contract**
Shukla Vaishalee **1 Grissom Dr** **Bronxville, NY 10708**	**Physician Contract**
Siemens **51 Valley Stream Pky** **Malvern, PA 19355**	**Capital Lease**
Siemens **51 Valley Stream Pky** **Malvern, PA 19355**	**Capital Lease**
Siemens **51 Valley Stream Pky** **Malvern, PA 19355**	**Capital Lease Acuson Antaros System**
Siemens **51 Valley Stream Pky** **Malvern, PA 19355**	**Capital Lease Acuson Sequoia Options**
Siemens **51 Valley Stream Pkwy** **Attn: Gerry De Jose** **Malvern, PA 19355**	**Capital Lease Siemens Symbia E Cam GE Stress Echo NIC**
Siemens **51 Valley Stream Pky** **Malvern, PA 19355**	**Capital Lease**

Sheet **35** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Siemens Financial Services 2 Penn Plaza Suite 1900 New York, NY 10121	Capital Lease
Siemens Medical Solutions USA INC 186 Wood Ave South Iselin, NJ 08830	Capital Lease
Sihota Aanu 16 Guion Place New Rochelle, NY 10801	Resident Contract
Silberman Adam MD 14 Hannan Place Rye, NY 10580	Physician Contract
Silberstein Michael MD 15 Hannan Place Rye, NY 10580	Physician Contract
Singh Vinita 1201 East Prairie Brook Dr Apt C3 Palatine, IL 60074	Resident Contract
Sleep Services of America PO BOX 198320 ATLANTA, GA 30384	Service Agreement
Solomon Molham M MD 521 Oakhrust Rd Mamaroneck, NY 10543	Physician Contract
Somera Leomerto 16 Guion Place New Rochelle, NY 10801	Resident Contract
Sotudeh Shariar MD 2 Old Lyme Rd Scarsdale, NY 10583	Physician Contract
Sound Shore Cardiology 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	Real Estate License 77 Quaker Ridge Rd Suite 200A License
Sound Shore Medical Center of Westcheste 16 Guion Place New Rochelle, NY 10801	Real Estate Lease of Goldstein Pavilion from NRHMC

Sheet **36** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Sound Shore Medical Center of Westcheste 16 Guion Place New Rochelle, NY 10801	Real Estate Lease MVH 140 Lockwood Ave Ste 104 Sublease
Sound Shore Medical Center of Westcheste 16 Guion Place New Rochelle, NY 10801	Real Estate Lease of Goldstein Pavilion from NRHMC
Sound Shore Medical Center of Westcheste 16 Guion Place New Rochelle, NY 10801	Real Estate Lease MVH 140 Lockwood Ave Ste 104 Sublease
Soundview Management Associates L L C P O Box 501 Greenwich, CT 06836	Lease
SSMC SCHAFFER EXTENDED CARE CENTER TRAN 1 METROTECH Ctr 20TH FLOOR BROOKLYN, NY 11201	Medical Services
St Charles Marise MD 30 Clinton Place Apt 5E New Rochelle, NY 10801	Physician Contract
St Josephs Family Medicine 127 South BRdway Yonkers, NY 10701	Physician Contract
Stier Jeffrey MD 14 Reunion Rd Rye Brook, NY 10573	Physician Contract
Stivala George 19 Gladstone Rd New Rochelle, NY 10804	Physician Contract
Stryker Capital 83 Wooster Heights Rd Danbury, CT 06810	Capital Lease
Subramanian Chamundeswari 16 Guion Place New Rochelle, NY 10801	Resident Contract
SUMM IT HEALTHCARE CONSUL 1123 GALWAY BLVD APOPKA, FL 32703	Revenue Cycle Information Technology

Sheet 37 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Sun Park Kyung 85 Wilson Dr New Rochelle, NY 10801	Physician Contract
Swinburne Nathaniel Cuthbert 16 Guion Place New Rochelle, NY 10801	Resident Contract
Tamarin Frank 73 Ward Dr New Rochelle, NY 10804	Physician Contract
TELERENT LEASING CORP P O BOX 890063 CHARLOTTE, NC 28289	Service Agreement
TELERENT LEASING CORP P O BOX 890063 CHARLOTTE, NC 28289	Business Associate Agreement
TELSERV LLC 98 SOUTH TURNPIKE Rd WALLINGFORD, CT 06492	Telecommunications
Tesado Grettel 16 Guion Place New Rochelle, NY 10801	Resident Contract
The Foundation for Minimally Invasive Su BLANK	Service Agreement
The Kenaly Complement 1117 West Pioneer Pkwy Suite 105 Arlington, TX 76013	Information Technology
The Outsource Group Inc d b a MediCred 2704 Grand Ave Bellmore, NY 11710	Revenue Cycle
Thind Sharanjeet 255 Huguenot St Apt 605 New Rochelle, NY 10801	Resident Contract
Tigr University TeleHealth Services 4191 Fayetteville Rd Raleigh, NC 27603	Information Technology
TLC Healthcare Finance A Division of Tel TLC Capital P O Box 890115 Charlotte, NC 28289	Capital Lease Exam Server Exam Console Among Other Items

Sheet **38** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
TRANSCARE 1 METROTECH Ctr 20TH FLOOR BROOKLYN, NY 11201	Medical Services
TRANSCARE AMBULANCE 1 METROTECH Ctr 20TH FLOOR BROOKLYN, NY 11201	Medical Services
TRANSCARE AMBULANCE 1 METROTECH Ctr 20TH FLOOR BROOKLYN, NY 11201	Medical Services
Trauzzi Stephen MD 12 Magnolia Rd Scarsdale, NY 10583	Physician Contract
Trustaff Travel Nurses LLC 4270 Glendale Milford Rd Cincinnati, OH 45242	Traveler Staffing
Trustaff Travel Nurses LLC 4270 Glendale Milford Rd Cincinnati, OH 45242	Traveler Staffing
UDS UDS Claim Coding	Revenue Cycle
UROLOGY CENTER OF WESTCHESTER P C UC 19 Bradhurst Ave Suite 1900 Hawthorne, NY 10532	Physician Contract
Urstadt Biddle Properties Inc Urstadt Biddle Properties Inc 321 Railroad Avenue Greenwich, CT 06830	Real Estate Lease MVH 4773 Boston Road Pel Manor
VANDIS INC 1 ALBERTSON Ave ALBERTSON, NY 11507	Information Technology
VERIZON 4820 P O BOX 4820 TRENTON, NJ 08650	Telecommunications
VERIZON ACCESS BILLING PO BOX 1100 ALBANY, NY 12250	Telecommunications

Sheet 39 of 42 continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
VERIZON WIRELESS PO BOX 408 NEWARK, NJ 07101	Telecommunications
Vinita Singh 16 Guion Place New Rochelle, NY 10801	Resident Contract
Violago Michael 16 Guion Place New Rochelle, NY 10801	Resident Contract
VTA Management Services 3041 Ave U Brooklyn, NY 11229	Traveler Staffing
Wasserman Sheldon MD 131 Devonshire Larchmont, NY 10538	Physician Contract
Wasserman Sheldon MD 131 Devonshire Larchmont, NY 10538	Physician Contract
WEBSENSE 10240 Sorrento Valley Rd San Diego, CA 92121	Information Technology
Weigle Mark Physiatrist BLANK	Physician Contract
Weill Cornell Medical College 525 E 68th St New York, NY 10065	Medical Services
Weill Cornell Medical College 525 E 68th St Box 130 New York, NY 10021	Medical Services
Weiss Amanda 16 Guion Place New Rochelle, NY 10801	Resident Contract
Westchester County Chest X Ray Services Department of Health 10 County Center Rd 2nd Floor White Plains, NY 10607	

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Westchester County Chest X Ray Services Department of Health 10 County Center Rd 2nd Floor White Plains, NY 10607	**Service Agreement**
Westchester County Chest X Ray Services Department of Health 10 County Center Rd 2nd Floor White Plains, NY 10607	
Whang Michael 922 Edgewood Ave Pelham, NY 10803	**Physician Contract**
White Glove Placement Inc 85 Bartlett St Brooklyn, NY 11206	**Traveler Staffing**
Willliams Linda MD 1005 North Ave New Rochelle, NY 10804	**Physician Contract**
Wing Maria MD 77 Quaker Ridge Rd New Rochelle, NY 10804	**Service Agreement**
Wing Maria MD 77 Quaker Ridge Rd Suite 200A New Rochelle, NY 10804	**Real Estate License 77 Quaker Ridge Rd Suite 200A License**
Wykagyl Associates HJ LLC Wykagyl Associates HJ LLC c o Minskoff Grant Realty Management Co 55 Church Street 207 White Plains, NY 10601	**Real Estate Lease MVH 1278 North Ave**
Wykagyl Associates HJ LLC Wykagyl Associates HJ LLC c o Minskoff Grant Realty Management Co 55 Church Street 207 White Plains, NY 10601	**Real Estate Lease MVH 1278 North Ave**
Yang Fan 16 Guion Place New Rochelle, NY 10801	**Resident Contract**
Young Zenaida MD 4 Sunset Lane Hartsdale, NY 10530	**Physician Contract**

Sheet **41** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES
(Continuation Sheet)

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Zahiruddin Ayesha **16 Guion Place** **New Rochelle, NY 10801**	**Fellow Contract**
Zelicof Steven B MD PhD **71 Mamaroneck Rd** **Scarsdale, NY 10583**	**Physician Contract**
Zhi Xu **16 Guion Place** **New Rochelle, NY 10801**	**Resident Contract**

Sheet **42** of **42** continuation sheets attached to the Schedule of Executory Contracts and Unexpired Leases

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B6H (Official Form 6H) (12/07)

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or 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).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	Tax Collector, New Rochelle 515 North Avenue New Rochelle, NY 10801
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	NYS Comm. Helath, NYNA 1260 Energy Lane Saint Paul, MN 55108
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	MEDLINE INDUSTRIES ONE MEDLINE PLACE MUNDELEIN, IL 60060-4485
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	AMERISOURCE BERGEN DRUG 101 NORFOLK STREET MANSFIELD, MA 02048-2075
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	MODERN MEDICAL SYSTEMS 170 FINN COURT SUITE 1 FARMINGDALE, NY 11735
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	PRICEWATERHOUSE COOPERS PO BOX 7247-8001 PHILADELPHIA, PA 19170-8001
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	GREEN MOUNTAIN ENERGY PO BOX 660838 DALLAS, TX 75266-0838
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	COMPLETE MGMT SOLUTIIONS 55 KENNEDY DRIVE SUITE 2 HAUPPAUGE, NY 11788
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	OCEAN SIDE INSTITUTIONAL 2525 LONG BEACH RD OCEANSIDE, NY 11572
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	NEXERA INC 555 WEST 57TH ST NEW YORK, NY 10019
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	DELL MARKETING PO BOX 643561 PITTSBURG, PA 15264-3561

27 continuation sheets attached to Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	UNITED WATER NEW ROCHELLE 2525 PALMER AVENUE NEW ROCHELLE, NY 10801
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	VERIZON PO BOX 15124 ALBANY, NY 12212-5124
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	PREFERRED BUSINESS INC 635 OLD WHITE PLAINS RD TARRYTOWN, NY 10591
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	DYNAMIC FIRE INC 3714 13TH ST LONG ISLAND CITY, NY 11101
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	GREENKEY TEMP LLC 475 PARK AVENUE SOUTH 7TH FLOOR NEW YORK, NY 10016
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	D AND D ELEVATOR INC 38 HAYES STREET ELMSFORD, NY 10523
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	TELSERV LLC 98 SOUTH TURNPIKE ROAD WALLINGFORD, CT 06492
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	HEALTH FACILITY ASSESS FU JALAIMOASSESSFUND ADMIN OFFPOOL ADM PO BOX 4757 SYRACUSE, NY 13221-4757
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	PRIDE HEALTHCARE LLC 420 LEXINGTON AVE SUITE 2220 NEW YORK, NY 10171
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	SOUND SHORE PHARMACY INC 107 W 4TH STREET MT VERNON, NY 10550
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	WESTCHESTER ELEC MOTOR 50 VERNON LANE ELMSFORD, NY 10523
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	HORIZON ENGINEERING ASSOC 1200 VETERAN'S HIGHWAY SUITE 110 HAUPPAUGE, NY 11788

Sheet 1 of 27 continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	WELCO-GTS PO BOX 382000 PHILADELPHIA, PA 15250-8000
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	CARDINAL HEALTH ALLEGIAN PO BOX 13862 NEWARK, NJ 07188-0862
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	NUENERGEN LLC 50 MAIN STREET WHITE PLAINS, NY 10606
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	PHYSICIANS RECIPROCAL INS 1800 NORTHERN BLVD ROSLYN, NY 11576
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	ENRICH PRODUCTS INC PO BOX 86116 PITTSBURGH, PA 28161
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	OTTOBOCK HEALTHCARE 2801 SOUTH FAIR LANE STE 101 TEMPE, AZ 85282
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	JASEXAUER PO BOX 404284 ATLANTA, GA 30384-4284
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	MORAN-RACANELLO PLBG PO BOX 238 NEW ROCHELLE, NY 10804
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	POSITIVE PROMOTIONS 15 GILPIN AVENUE HAUPPAUGE, NY 11788
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	J AND J BACKFLOW DEV 115 WOODLAND AVE NEW ROCHELLE, NY 10805
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	NEW YORK HOME HEALTH CARE 30 HOPPER STREET WESTBURY, NY 11590
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	MACKENZIE AUTOMATIC DOORS 72 READE ST NEW YORK, NY 10007
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	FRIED BROTHERS 467 NORTH 7TH ST PHILADELPHIA, PA 19123

Sheet **2** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	CORPORATE EXPRESS 33903 TREASURY CTR CHICAGO, IL 60694-3900
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	CON EDISON NEW YORK 4 IRVING PL9FL BOX 18 CORPACCTS NEW YORK, NY 10003
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	CRYSTAL ROCK WATER PO BOX 10028 WATERBURY, CT 06725-0028
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	EXECUTEX OFFICE TECHNOLOG 75 NORTH CENTRAL AVE SUITE 201 ELMSFORD, NY 10523
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	KINETIC CONCEPTS THER SER PO BOX 203086 HOUSTON, TX 77216-3086
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	ROSENTHAL BARBARA 965 WILMOT RD SCARSDALE, NY 10583
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	OWENS AND MINOR 2975 W CORP LAKES BLVD WESTON, FL 33331-3626
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	SETON IDENTIFICATION PO BOX 95904 CHICAGO, IL 60694
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	THE MODERN PRESS 10 LOCKWOOD AVE NEW ROCHELLE, NY 10801
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	ORTHO RANGE LTD 49 HALSTEAD AVE HARRISON, NY 10528
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	NASCO 901 JANESVILLE AVE FORT ATKINSON, WI 53538-0901
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	VTA MANAGEMENT SERVICES PO OX 504884 ST LOUIS, MO 63150-4884
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	LAB SAFETY SUPPLY INC PO BOX 5004 JANESVILLE, WI 53547-5004

Sheet **3** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	SALVEO HEALTHCARE SOLUTION 60 EAST 42ND STREET SUITE 2517 NEW YORK, NY 10165
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	EAST COAST SIGNS AND AWNINGS 76 FOURTH STREET NEW ROCHELLE, NY 10801
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	ALI MED 297 HIGH ST PO BOX 9135 DEDHAM, MA 02027-9135
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	PITI RICHARD 2523 WESTERVELT AVE BRONX, NY 10469
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	STAPLES ADVANTAGE PO BOX 71217 CHICAGO, IL 60694-1217
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	PREMIER TRANSPORTATION 271 NORTH AVE STE 1200 NEW ROCHELLE, NY 10801
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	CARDINAL HEALTHPYXISPHAR 1952 SOLUTIONS CTR CHICAGO, IL 60677-1009
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	WALTER BROWN C/O FLANZIG & FLANZIG, LLP 323 WILLIS AVENUE Mineola, NY 11501
Howe Avenue Nursing Home 16 Guion Place New Rochelle, NY 10802	NUENERGEN C/O DANIELS & PORCO 517 RTE 22 PAWLING, NY
New Rochelle SS Housing 16 Guion Street New Rochelle, NY 10802	GREYSTONE SERVICING CORP 111 ROCKVILLE PIKE SUITE 1150 ROCKVILLE, MD 20850
New Rochelle SS Housing 16 Guion Street New Rochelle, NY 10802	CORATOLO AND CARRIERI ASS 18 N CENTRAL AVE 204 HARTSDALE, NY 10530

Sheet **4** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
New Rochelle SS Housing 16 Guion Street New Rochelle, NY 10802	VERIZON PO BOX 15124 ALBANY, NY 12212-5124
New Rochelle SS Housing 16 Guion Street New Rochelle, NY 10802	NUENERGEN C/O DANIELS & PORCO 517 RTE 22 PAWLING, NY
New Rochelle SS Housing 16 Guion Street New Rochelle, NY 10802	CORATOLO & CARRIERI C/O NESENOFF & MILTENBERG 363 SEVENTH AVE, 5TH FL New York, NY 10001
NRHMC 16 Guion Place New Rochelle, NY 10802	NYS Dept. of Labor, Unemploy Bldg. 12, Room 256 State Campus Albany, NY 12240
NRHMC 16 Guion Street New Rochelle, NY 10802	STATE INSURANCE FUND 199 CHURCH STREET NEW YORK, NY 10007
NRHMC 16 Guion Street New Rochelle, NY 10802	LOCKWOOD REALTY GREENR 701 WESTCHESTER AVE SUITE 310W WHITE PLAINS, NY 10604
NRHMC 16 Guion Street New Rochelle, NY 10802	MELVIN BEACHER - ARCHITECT 50 WEBSTER AVENUE NEW ROCHELLE, NY 10801
NRHMC 16 Guion Street New Rochelle, NY 10802	175 MEDICAL VISION PROPERT 1084 78TH ST BROOKLYN, NY 11228
NRHMC 16 Guion Place New Rochelle, NY 10802	175 Medical Vision Properties c/o Philip Menna, Esq. 235 Mamaroneck Ave, Ste. 402 White Plains, NY 10605
NRHMC 16 Guion Place New Rochelle, NY 10802	CW NORTHRIDGE C/O DORNFELD & NASIS 145 MARCUS BLVD, STE 4 Hauppauge, NY 11788
NRHMC 16 Guion Place New Rochelle, NY 10802	MAGENTA REALTY C/O KENNETH M. BUSHELL 6132 RIVERDALE AVENUE Bronx, NY 10471

Sheet **5** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	WALTER BROWN C/O FLANZIG & FLANZIG, LLP 323 WILLIS AVENUE Mineola, NY 11501
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	MEDICAL SPECIALTIES C/O KLEINMAN SALTZMAN 151 NORTH MAIN STREET, 4TH FL New City, NY 10956
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	GRAYBAR ELECTRIC C/O JOSEPH & TERRACCIANO 2 ROOSEVELT AVE, STE 200 Syosset, NY 11791
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	PRIDE HEALTHCARE C/O SCHNAUFER & METIS 280 N. CENTRAL AVE, STE 200 Hartsdale, NY 10530
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	JEFFREY MULLOOLY C/O MULLOOLY, JEFFREY, ROONEY 6851 JERICHO TPKE Syosset, NY 11791
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	TELIGENT, INC. C/O KIRKLAND & ELLIS 601 LEXINGTON AVENUE New York, NY 10022
SOUND SHORE HEALTH SYSTEM 16 GUION PLACE New Rochelle, NY 10802	COMPLETE MANAGEMENT C/O AKERMAN SENTERFITT 666 FIFTH AVE, 20TH FL New York, NY 10103
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	1199 SEIU United Healthcare 310 West 43rd Street New York, NY 10036
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	1199 SEIU National Benefit 330 West 42nd Street New York, NY 10036
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYSNA Pension Plan 3 Pine West Plaza Washington Ave Ext. Albany, NY 12205
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Oppenheimer Fund P.O. Box 5270 Denver, CO 80217

Sheet **6** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Aflac 1932 Wynnton Road Attn: Remittance Processing Columbus, GA 31999
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Nat'l Benefit Fund 330 West 42nd Street, 27th Fl Attn: Timothy Wells New York, NY 10036
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Sheriff's Office 110 Grove St. White Plains, NY 10601
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Chair, Workers' Comp Board 328 State Street Room 331 Schenectady, NY 12305
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Distr 1199 Credit Union 310 West 43rd Street Attn: Karen Nunez New York, NY 10036
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Municipal Credit Union 22 Cortlandt Street New York, NY 10007
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	New York Life Insurance Co. P.O. Box 500 Minneapolis, MN 55440
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS Income Tax Bureau P.O. Box 4111 Binghamton, NY 13902
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	Commissioner of Taxation P.O. Box 15171 Albany, NY 12212
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS Dept. of Labor, Unemploy Bldg. 12, Room 256 State Campus Albany, NY 12240
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS Assessment Receivables P.O. Box 4127 Binghamton, NY 13902
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PENSION BENEFIT GRNTY CORP PO BOX 64880 BALTIMORE, MD 21264-4880

Sheet **7** of **27** continuation sheets attached to the Schedule of Codebtors

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ALLSCRIPTS HEALTHCARE LLC P O BOX 8538-0133 LOCKBOX 077133 PHILADELPHIA, PA 19171-0133
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STRYKER ORTHOPAEDICS 131 SOUTH DEARBORN 6TH FLOOR CHICAGO, IL 60603
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CONVERGENT REV CYCLE 1357 HEATHCOTE BLVD STE 300 GAINESVILLE, VA 20155
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	DORMITORY AUTH OF SNY ATT: S STEVENS COUNSELS OFFICE ALBANY, NY 12207
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CROTHALL SERVICE GROUP 955 CHESTERBROOK BLVD SUITE 300 WAYNE, PA 19087
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEW YORK RAD ALLIANCE 25983 NETWORK PLACE CHICAGO, IL 60673-1259
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TGC LLC PO BOX 130 HIGHLAND, MD 20777
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	AMERISOURCE BERGEN DRUG 101 NORFOLK STREET MANSFIELD, MA 02048-2075
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	EMERGENCY MEDICAL ASSOC 651 W MT PLEASANT AVE LIVINGSTON, NJ 07039
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SYNTHES 1302 WRIGHTS LANE EAST WESTCHESTER, PA 19380
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MCKESSON INFO SOLUTIONS PO BOX 98347 CHICAGO, IL 60693-8347
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NUTRITION MGMT SERVICES CO 2071 KIMBERTON RD KIMBERTON, PA 19442

Sheet **8** of **27** continuation sheets attached to the Schedule of Codebtors

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTH ROI 344 MAIN ST METUCHEN, NJ 08840
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MODERN MEDICAL SYSTEMS 170 FINN COURT SUITE 1 FARMINGDALE, NY 11735
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MEDTRONIC USA INC 4642 COLLECTION CTR DR CHICAGO, IL 60693
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTHCARE ASSOC OF NYSIN PO BOX 5535 GPO NEW YORK, NY 10087-5535
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BAXTER IV SYSTEMS DIV PO BOX 33037 NEWARK, NJ 07188-0037
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	QUEST DIAGNOSTICS INC ONE MALCOLM AVE RAY STOLBA DEPT 50 TETERBORO, NJ 07608-1070
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CANNON DESIGN 360 MADISON AVE NEW YORK, NY 10017
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PRICEWATERHOUSE COOPERS PO BOX 7247-8001 PHILADELPHIA, PA 19170-8001
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GREEN MOUNTAIN ENERGY PO BOX 660838 DALLAS, TX 75266-0838
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ARTHREX INC PO BOX 403511 ATLANTA, GA 30384-3511
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PUBLIC GOODS POOL 2 344 SOUTH WARREN ST SYRACUSE, NY 13202
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	OCEAN SIDE INSTITUTIONAL 2525 LONG BEACH RD OCEANSIDE, NY 11572

Sheet **9** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CONTRAN MEDICAL LLC 17 RIVERVIEW TERRACE WEST HAVEN, CT 06516
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BARR AND BARR INC 460 WEST 34TH ST NEW YORK, NY 10001
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BOSTON SCIENTIFIC MEDI- PO BOX 8500-6205 PHILADELPHIA, PA 19178-6205
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEXERA INC 555 WEST 57TH ST NEW YORK, NY 10019
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TRANSCARE AMBULANCE 1 METROTECH CENTER 20TH FLOOR BROOKLYN, NY 11201
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CABLEVISION LIGHTPATH INC PO BOX 360111 PITTSBURGH, PA 15251-6111
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MILLER AND MILONE PC 100 QUENTIN ROOSEVELT BLVD GARDEN CITY, NY 11530
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PROVIDER CONSULTING SOL 3 CORPORATE DRIVE SUITE 102 CLIFTON PARK, NY 12065
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	R TECH HEALTHCARE REV 120 FIFTH AVENUE 3RD FLOOR NEW YORK, NY 10011
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CASTLE OIL CORPORATION 440 MAMARONECK AVE HARRISON, NY 10528
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	VERIZON PO BOX 15124 ALBANY, NY 12212-5124
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JOHNSON AND JOHNSON HC 6000 FELDWOOD RD COLLEGE PARK, GA 30349

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SCHEDULE H - CODEBTORS
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NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS EXCESS LIABILITY POOL 217 GREAT OAKS BLVD ALBANY, NY 12203
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	COOK MEDICAL INC 22988 NETWORK PLACE CHICAGO, IL 60673-1229
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	KDM MEDICAL EQUIPMENT 5507-10 NESCONSET HWY PMB 345 SUITE 10 MOUNT SINAI, NY 11766
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	INTEGRA LIFE SCIENCES CORP 311 ENTERPRISE DRIVE PLAINSBORO, NJ 08536
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ST JUDE MEDICAL INC 22400 NETWORK PLACE CHICAGO, IL 60673-1224
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	IMAGING ON CALL LLC 1510 COTNER AVENUE LOS ANGELES, CA 90025
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BIOMET BIOLOGICS 75 REMITTANCE DRIVE SUITE 3283 CHICAGO, IL 60675-3283
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS DEPT HEALTH SPARCS 122 ESP-CORNING TOWER ROOM 1223 ALBANY, NY 12237
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SLEEP SERVICES OF AMERICA PO BOX 198320 ATLANTA, GA 30384-8320
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PREFERRED BUSINESS INC 635 OLD WHITE PLAINS RD TARRYTOWN, NY 10591
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ORTHOFIX INC PO BOX 849806 DALLAS, TX 75284-9806
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ORGANOGENESIS INC PO BOX 842958 BOSTON, MA 02284-2958

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In re Sound Shore Medical Center of Westchester, Debtor

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	COACTIV LLC 900 ETHAN ALLEN HWY RIDGEFIELD, CT 06877
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JZANUS LTD 170 JERICHO TURNPIKE FLORAL PARK, NY 11001
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	FORT DEARBORN LIFE INS CO 26012 NETWORK PLACE CHICAGO, IL 60673-1260
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STRYKER INSTRUMENTS PO BOX 70119 CHICAGO, IL 60673-0119
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HUDSON ENERGY SERVICES 4 EXECUTIVE BLVD STE 301 SUFFERN, NY 10901
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TRANS UNION LLC P O BOX 99506 CHICAGO, IL 60693
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GREENKEY TEMP LLC 475 PARK AVENUE SOUTH 7TH FLOOR NEW YORK, NY 10016
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTH CARE COMPLIANCE STR 30 JERICHO EXECUTIVE PLAZA STE 400C JERICHO, NY 11753
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STERICYCLE INC PO BOX 6582 CAROL STREAM, IL 60197-6582
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CURRAN AND CONNORS INC 140 ADAMS AVENUE SUITE 20C HAUPPAUGE, NY 11788-3618
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	THE OUTSOURCE GROUP 39867 TREASURY CENTER CHICAGO, IL 60694-9800
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	DAY PITNEY LLP PO BOX 416234 BOSTON, MA 02241-6234

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(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ALPHA MEDICAL EQUIPMENT 10-12 PINE COURT NEW ROCHELLE, NY 10801
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	D AND D ELEVATOR INC 38 HAYES STREET ELMSFORD, NY 10523
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TELSERV LLC 98 SOUTH TURNPIKE ROAD WALLINGFORD, CT 06492
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	IMMUCOR INC PO BOX 102118 ATLANTA, GA 30368-2118
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PRESS GANEY ASSOC INC 404 COLUMBIA PL SOUTH BEND, IN 46601
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	EDIMS LLC 651 W MOUNT PLEASANT AVE LIVINGSTON, NJ 07039
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTH FACILITY ASSESS FU JALAIMOASSESSFUND ADMIN OFFPOOL ADM PO BOX 4757 SYRACUSE, NY 13221-4757
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CARDINAL HEALTH SYNCOR PO BOX 905488 CHARLOTTE, NC 28290-5488
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SUBURBAN CARTING CO 566 NORTH STATE ROAD BRIARCLIFF MANOR, NY 10510
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CARDONE RECORD SERVICES 1960 SOUTH CARBOY RD MT PROSPECT, IL 60056
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PRIDE HEALTHCARE LLC 420 LEXINGTON AVE SUITE 2220 NEW YORK, NY 10171
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	LEAGUE OF VOLUNTARY HOSP 555 WEST 57TH STREET NEW YORK, NY 10019
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTHCARE RETROACTIVE AUD PO BOX 228295 DORAL, FL 33172

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NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JOHNSON AND JOHNSON HOSP 6000 FELDWOOD RD BOA LOCKBX COLLEGE PARK, GA 30349
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STRYKER SUSTAINABILITY SOL PO BOX 29387 PHOENIX, AZ 85038-9387
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BAXTER HEALTHCARE CORP PO BOX 33037 NEWARK, NJ 07188
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BROADVIEW NETWORKS PO BOX 9242 UNIONDALE, NY 11555-9242
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	AMERICAN HOSPITAL ASSOC PO BOX 92247 CHICAGO, IL 60675-2247
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SOUND SHORE PHARMACY INC 107 W 4TH STREET MT VERNON, NY 10550
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SMITH AND NEPHEW ENDOSCOPY 150 MINUTEMAN ROAD ANDOVER, MA 01810
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEW YORK BLOOD CENTER ACCOUNTS RECEIVABLE PO BOX 9674 UNIONDALE, NY 11553-9814
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MMI 6060 POPLAR AVE SUITE 254 MEMPHIS, TN 38119
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GLEN ISLAND HARBOUR CLUB WEYMAN AVENUE NEW ROCHELLE, NY 10805
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	AESCULAP INC PO BOX 512451 PHILADELPHIA, PA 19175-2451
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BOTTOMLINE REIMBURSEMENT 5342 CLARK ROAD 136 SARASOTA, FL 34233

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SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CARDINAL HEALTH HLS FRI PO BOX 13862 ACCT NEWARK, NJ 07188-0862
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BURKE SUPPLY CO 59 HOOK ROAD BAYONNE, NJ 07002
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	THE JOINT COMMISSION 1 RENAISSANCE BLVD Villa Park, IL 60181
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ESOLUTIONS INC 401 WEST FRONTIER LANE SUITE 101 OLATHE, KS 66061
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS DEPT OF HEALTH 1218 CENTRAL AVE ALBANY, NY 12205
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WELCO-GTS PO BOX 382000 PHILADELPHIA, PA 15250-8000
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PICIS INC PO BOX 34960 SEATTLE, WA 98124-1960
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTHCARE ASSOC OF NYS PO BOX 5535 GPO NEW YORK, NY 10087-5535
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MIDWEST MEDICAL RECORD ASS PO BOX 59498 SCHAUNBURG, IL 60159
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SMART SOURCE SERVICES PO BOX 716 NEW YORK, NY 10018
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WRIGHT MEDICAL TECH 5677 AIRLINE DRIVE ATTN CINDY WESCOTT ARLINGTON, TN 38002
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	LIFE NET PO BOX 79636 BALTIMORE, MD 21279-0636

Sheet **15** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MED ONE 10712 SOUTH 1300 EAST SANDY, UT 84094
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WESTCTYDEPT OF SOCIAL 112 E POST RD 6TH FLR RM 602 WHITE PLAINS, NY 10601
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEXTEL COMMUNICATIONS PO BOX 4181 CAROL STREAM, IL 60197-4181
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	FRESH AND TASTY BAKED PROD 1568 STILLWELL AVE BRONX, NY 10461
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ACUMED LLC 7995 COLLECTION CTR DR CHICAGO, IL 60693
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STATE OF NEW YORK OMIG 800 NORTH PEARL STREET ALBANY, NY 12204
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	OLYMPUS AMERICA INC BOX 200194 PITTSBURGH, PA 15251-0194
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	IMPACT ADVISORS LLC 931 W 75TH STREET SUITE 137-304 NAPERVILLE, IL 60565
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	COLLAMER PATHOLOCHICAGO PO BOX 71698 CHICAGO, IL 60694-1698
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CCH INC P O BOX 4307 CAROL STREAM, IL 60197-4307
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CICERO CONSULTING ASSOVCC 701 WESTCHESTER AVE STE210W WHITE PLAINS, NY 10604
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	QUALCODE INC 5030 BROADWAY SUITE 609 NEW YORK, NY 10034

Sheet **16** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HOSPIRA WORLD WIDE INC 75 REMITTANCE DR SUITE 6136 CHICAGO, IL 60675-6136
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GRAYBAR ELECTRIC COMPANY 401 FRANKLIN AVE SUITE 220 GARDEN CITY, NY 11530
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NUENERGEN LLC 50 MAIN STREET WHITE PLAINS, NY 10606
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	USA MOBILITY WIRELESS INC PO BOX 660324 DALLAS, TX 75266-0324
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS OMIGTPL PO BOX 414974 BOSTON, MA 02241-4974
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SIEMENS MED SOLUTIONS USA PO BOX 7777 W3580 PHILADELPHIA, PA 19175
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MEDIFAX-EDI LLC PO BOX 572490 MURRAY, UT 84157-2490
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GARFUNKEL WILD PC 111 GREAT NECK RD GREAT NECK, NY 11021
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MIRAMED REVENUE GROUP LLC 991 OAK CREEK DR LOMBARD, IL 60148
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	I JANVEY AND SONS PO BOX 335 HEMPSTEAD, NY 11550
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTHSTREAM INC PO BOX 102817 ATLANTA, GA 30368-2817
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JOINT RESTORATION FOUND PO BOX 843549 KANSAS CITY, MO 64184-3549

Sheet **17** of **27** continuation sheets attached to the Schedule of Codebtors

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In re Sound Shore Medical Center of Westchester, Debtor

Case No. 13-22840

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PHYSICIANS RECIPROCAL INS 1800 NORTHERN BLVD ROSLYN, NY 11576
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	LORD ABBET SERVICE CENTER P O BOX 219604 KANSAS CITY, MO 64121-9604
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BME PO BOX 122297 DEPT 2297 DALLAS, TX 75312-2297
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CREATIVE DIGITAL IMAGING PO BOX 1296 BANGOR, ME 04402-1296
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	FEDERAL EXPRESS CORP PO BOX 371461 PITTSBURGH, PA 15250-7461
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BLUEMARK LLC 101 MEMORIAL DRIVE ELMHURST TOWNSHIP, PA 18444
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CAREFUSION SOLUTIONS LLC 25082 NETWORK PL CHICAGO, IL 60673-1250
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CYRACOM LLC P.O. BOX 975652 Dallas, TX 75397
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MARTAB MEDICAL 300-F ROUTE 17 SOUTH MAHWAH, NJ 07430
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MCROBERTS SEC TECHPROSE 46 THROCKMORTON ST FREEHOLD, NJ 07728
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TYCO HEALTHCARE GROUP LP PO BOX 120823 DALLAS, TX 75312-0823
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BARCLAY WATER MGMT 150 COOLIDGE AVE WATERTOWN, MA 02472-2815
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MEDRAD INC 1025 NORTH MICHIGAN ST ELKHART, IN 46514

Sheet 18 of 27 continuation sheets attached to the Schedule of Codebtors

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In re Sound Shore Medical Center of Westchester, Debtor

Case No. 13-22840

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	VNA AND HOSPICE CARE FOUND 540 WHITE PLAINS RD SUITE 300 TARRYTOWN, NY 10591
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	COLOPLAST CORP DEPT CH 19024 PALATINE, IL 60055-9024
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JASEXAUER PO BOX 404284 ATLANTA, GA 30384-4284
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MICROAIRE SURGICAL INSTR LOCK BOX 96565 CHICAGO, IL 60693
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HOLOGIC INC 24506 NETWORK PLACE CHICAGO, IL 60673-1245
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	UNIV OF MIAMI TISSUE BANK 1951 NW 7TH AVENUE SUITE 200 MIAMI, FL 33136
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	POSITIVE PROMOTIONS 15 GILPIN AVENUE HAUPPAUGE, NY 11788
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ARM SOLUTIONS 39867 TREASURY CENTER CHICAGO, IL 60694-9800
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GEISINGER MEDICAL MGMT 100 NORTH ACADEMY AVE DANVILLE, PA 17822-2412
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HIM ON CALL INC 1033 HAMILTON ST ALLENTOWN, PA 18101-1049
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JONES JUANITA 3369 SW SOUTHBROOK CT TOPEKA, KS 66614
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEOMEND INC DEPT CH 16886 PALATINE, IL 60055-6886
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BIO-RAD LABORATORIES POBOX 849740 LOS ANGELES, CA 90084-9740

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Best Case Bankruptcy

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEW YORK HOME HEALTH CARE 30 HOPPER STREET WESTBURY, NY 11590
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	FREEDOM MEDICAL INC PO BOX 822704 PHILADELPHIA, PA 19182-2704
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	THOMPSON AND BENDER LLC 1192 PLEASANTVILLE RD BRIARCLIFF MANOR, NY 10510
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SIEMENS HEALTHCARE DIAG PO BOX 121102 DALLAS, TX 75312-1102
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ORASURE TECHNOLOGIES INC DEPARTMENT 269701 PO BOX 67000 DETROIT, MI 48267-2697
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ACELL INC 8671 ROBERT FULTON DR SUITE B COLUMBIA, MD 21046-2582
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NORTHERN METROPOLITAN HOS 400 STONY BROOK CT NEWBURGH, NY 12550
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STAR ENVIRONMENTAL INC 5004 KINGS HIGHWAY BROOKLYN, NY 00011-2345
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	FOLLETT CORP PO BOX 8500 PHILADELPHIA, PA 19178-2806
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CRYSTAL ROCK WATER PO BOX 10028 WATERBURY, CT 06725-0028
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GENERAL HOSP SUPPLY 2844 GRAY FOX RD MONROE, NC 28110
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	COUNTY GRAPHICS FORMS MGMT 2 STERCHO RD LINDEN, NJ 07036

Sheet **20** of **27** continuation sheets attached to the Schedule of Codebtors

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In re Sound Shore Medical Center of Westchester, Debtor

Case No. 13-22840

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	W L GORE AND ASSOC INC ATTN: LISA MARIE LOPEZ 1505 NORTH 4TH ST FLAGSTAFF, AZ 86004
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PELHAM LUMBER AND MASON SUPP 437 FIFTH AVE PELHAM, NY 10803
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HSLANJ-HEALTH SCIENCES LIB ASSOC OF NEW JERSEY PO BOX 790 PRINCETON, NJ 08543-7908
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SOURCEONE HEALTHCARE TECH PO BOX 8004 MENTOR, OH 44061-8004
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ADVANCED BIOHEALING INC ABH COLLECTION ACCT DEPT 3292 CAROL STREAM, IL 60132-3292
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	INNOMED INC PO BOX 116888 ATLANTA, GA 30368-6888
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	EXECUTEX OFFICE TECHNOLOG 75 NORTH CENTRAL AVE SUITE 201 ELMSFORD, NY 10523
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CARDIO VASCULAR SYSTEM INC 651 CAMPUS DRIVE STPAUL, MN 55112
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MASSA AND ASSOCIATES INC 100 NORTH CENTRE AVE SUITE 400 ROCKVILLE CENTER, NY 11570
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TRANSCARE NY INC DBA TRANS PO BOX 785586 PHILADELPHIA, PA 19178-5586
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYSCSPC PO BOX 15361 ALBANY, NY 12212-5361
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	STERLING INFOSYSTEMSINC PO BOX 35626 NEWARK, NJ 07193-5626

Sheet 21 of 27 continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	IBM CORP PO BOX 676673 DALLAS, TX 75267-6673
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NY IMAGING INC 5 JEANNE DRIVE SUITE 3 NEWBURGH, NY 12550
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HOOPER LUNDY AND BOOKMAN PC 975 F STREET NW SUITE 1050 WAHINGTON, DC 20004
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	KINETIC CONCEPTS THER SER PO BOX 203086 HOUSTON, TX 77216-3086
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	EHRLICH PO BOX 13848 READING, PA 19612-3848
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	AN ELECTROMECHANICAL TECH 789 ASTOR AVE BRONX, NY 10467
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	VERIZON WIRELESS PO BOX 408 NEWARK, NJ 07101-0408
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CADMET PO BOX 24 155 PLAIN BROOK RD FRAZER, PA 19355
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GLOBAL COMPLIANCE SERVICES PO BOX 60941 CHARLOTTE, NC 28260-0941
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GE MEDICAL SYSTEMS-BOX64 5517 COLLECTIONS CTR DR CHICAGO, IL 60693
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	AMERICAN ARBITRATION ASSOC 1633 BROADWAY FLOOR 10 NEW YORK, NY 10019-6708
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	KELLY RANDALL ESQ 12 EAST 86TH ST APT 1228 NEW YORK, NY 10028

Sheet **22** of **27** continuation sheets attached to the Schedule of Codebtors

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In re Sound Shore Medical Center of Westchester, Debtor

Case No. 13-22840

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	DEAF-TALK LLC 14 EAST MAIN ST CARNEGIE, PA 15106
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	MARSDEN MEDICAL PHYSICS 266 LONG MEADOW RD KINNELON, NJ 07405
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JA MAJORS PO BOX 277930 ATLANTA, GA 30384-7938
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	TRANS CONTL CREDIT PO BOX 5055 WHITE PLAINS, NY 10602
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PCI MEDICAL PO BOX 188 12 BRIDGE STREET DEEP RIVER, CT 06417
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WESSBACK LLC DBA DIVERS PO BOX 34 ROCHDALE, MA 01542-0034
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	3M PO BOX 371227 PITTSBURGH, PA 15250-7227
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BAUCHNER STUART ESQ 299 RIVERSIDE DRIVE 60 NEW YORK, NY 10025
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	BMC INSTRUMENT SERVICE INC 1278 SAXON AVENUE BAY SHORE, NY 11706
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ATRIUM MEDICAL CORP PO BOX 842888 BOSTON, MA 02284-2888
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ORTHO RANGE LTD 49 HALSTEAD AVE HARRISON, NY 10528
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	KIWANIS CLUB MOUNT VERN 625 5TH AVENUE PELHAM, NY 10803

Sheet 23 of 27 continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SIEMENS MEDICAL SOLUT - 51 VALLEY STREAM PKWY MS-K21 MALVERN, PA 19355-1406
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	JOHNSTONE SUPPLY OF WHITE 66 BROCKWAY PLACE WHITE PLAINS, NY 10601
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SHARN INC PO BOX 21666 SUITE 200 TAMPA, FL 33622-3166
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	RT SOLUTIONS 4302 E ROCKLEDGE CR PHOENIX, AZ 85044
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WE RECYCLE PO BOX 4699 WALLINGFORD, CT 06492
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	OSTROWITZ MATTHEW MD 16 Guion Street New Rochelle, NY 10802
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SIMPLEX GRINNELL LP 4 COMMERCE DRIVE S SUITE 3 HARRIMAN, NY 10926
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HEALTH CARE LOGISTICS INC PO BOX 25 CIRCLEVILLE, OH 43113-0025
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	DECCAID SERVICES INC 94J JEFRYN BLVD EAST DEER PARK, NY 11729
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	EV3 3033 CAMPUS DR PLYMOUTH, MN 55441
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WEST-WARD PHARMACEUTICALS PO BOX 847385 DALLAS, TX 75284-7385
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	RIVKIN RADLER 926 RXR PLAZA UNIONDALE, NY 11556-0926

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Best Case Bankruptcy

In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PROVIDENCE REST 3304 WATERBURY AVE BRONX, NY 10462
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CARESTREAM HEALTH INC DEPT CH 19286 PALATINE, IL 60055-9286
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	A PLUS COMPUTER SOLUTIONS 1 PADANARAM ROAD SUITE 142 DANBURY, CT 06811
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PROVIDENT LIFE AND ACCINS 1 FOUNTAIN SQUARE CHATTANOOGA, TN 37402
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SALVEO HEALTHCARE SOLUTION 60 EAST 42ND STREET SUITE 2517 NEW YORK, NY 10165
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	ALI MED 297 HIGH ST PO BOX 9135 DEDHAM, MA 02027-9135
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	OSTEOMED LP 2241 COLLECTION CTR DR CHICAGO, TX 60693
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	APOGEE CONSULTING GROUP 2500 TANGLEWILDE SUITE 480 HOUSTON, TX 77063
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	LANDAUER PO BOX 809051 CHICAGO, IL 60680-9051
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PHOENIX MEDCOM INC 10 MEADOW SWEET RD CORTLANDT MANOR, NY 10567
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	COSTELLOCOONEY AND FEARON 205 SOUTH SALINA ST SYRACUSE, NY 13202-1327
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	URESIL LLC 5418 WEST TOUHY AVENUE SKOKIE, IL 60077

Sheet **25** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NYS HESC PO BOX 1290 NEWARK, NJ 07101-1290
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PIMCO PO BOX 55060 BOSTON, MA 02205-5060
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	UNITED PARCEL SERVICE PO BOX 7247-0244 PHILADELPHIA, PA 19170-0001
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	KEY SURGICAL INC 8101 WALLACE RD EDEN PRAIRIE, MN 55344-2114
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	FORD MOTOR CREDIT CO PO BOX 220564 PITTSBURGH, PA 15257-2564
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CRYOSTAR INDUSTRIES INC 109 URBAN AVE WESTBURY, NY 11590
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CONE INSTRUMENTS 5201 NAIMAN PKY SOLON, OH 44139
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CHARLES WARNER CO PO BOX 483 GLASTONBURY, CT 06033
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	HOSPITAL RECEIVABLES SYS 1598 BELLMORE AVE BELLMORE, NY 11710
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SUMMIT APPL DIV FELIX STOR 770 GARRISON AVE BRONX, NY 00010-4724
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	AT AND T ATLANTA GA PO BOX 105068 ATLANTA, GA 30348-5068
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NEW JERSEY WAFFLE CO PO BOX 1489 TOM RIVER, NJ 08754
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	PURCHASE POWER PO BOX 371874 PITTSBURGH, PA 15250-7874

Sheet **26** of **27** continuation sheets attached to the Schedule of Codebtors

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In re **Sound Shore Medical Center of Westchester**, Debtor

Case No. **13-22840**

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	DANIELS SHARPSMART INC PO BOX 66494 CHIGACO, IL 60666-0494
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	SIEMENS CORPORATION PO BOX 7777 W 3580 PHILADELPHIA, PA 19175
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	LORETTA DOLPHUS C/O ROSENBERG, MINC FALKOFF 122 EAST 42ND STREET, ST 3800 New York, NY 10168
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	CLORA JACKSON C/O MEAGHER & MEAGHER 111 CHURCH STREET White Plains, NY 10601
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	WHITAKER MEDICAL C/O SILLS CUMMIS & GROSS 30 ROCKFELLER PLAZA New York, NY 10112
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	GRAYBAR ELECTRIC C/O JOSEPH & TERRACCIANO 2 ROOSEVELT AVE, STE 200 Syosset, NY 11791
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	NUENERGEN C/O DANIELS & PORCO 517 RTE 22 PAWLING, NY
The Mount Vernon Hospital 12 North Seventh Avenue Mount Vernon, NY 10550	UNITED RENTALS C/O FORCHELLI & FORCHELLI 32-02 30TH AVE Astoria, NY 11102

Sheet **27** of **27** continuation sheets attached to the Schedule of Codebtors

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court
Southern District of New York

In re **Sound Shore Medical Center of Westchester** Debtor(s)

Case No. **13-22840**
Chapter **11**

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President and Chief Executive Officer of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **537** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **June 28, 2013**

Signature **/s/ John Spicer**
John Spicer
President and Chief Executive Officer

Penalty for making a false statement or concealing property: Fine of up to $500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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United States Bankruptcy Court
Southern District of New York

In re **Sound Shore Medical Center of Westchester** Debtor(s)

Case No. **13-22840**

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	$	**707,335.25**
Prior to the filing of this statement I have received	$	**707,335.25**
Balance Due	$	**0.00**

2. The source of the compensation paid to me was:

   ■ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

   ■ Debtor ☐ Other (specify):

4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

   ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

   a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
   b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
   c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
   d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
   e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: **June 28, 2013**

/s/ Burton S. Weston
Burton S. Weston
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