SOUTHERN DISTRICT OF NEW YORK	
In re:	
SOUND SHORE MEDICAL CENTER OF WESTCHESTER, et al.	Chapter 11 Case No. 13-22840 (RDD)
Debtors.	(Jointly Administered)

## ORDER GRANTING SIXTEENTH OMNIBUS OBJECTION TO CLAIMS

Upon the motion of the Plan Administrator appointed in these cases (the "Sixteenth Objection")<sup>1</sup> for entry of an order pursuant to 11 U.S.C. § 502 and Rule 3007 of the Federal Rules of Bankruptcy Procedure reducing, reclassifying, and/or disallowing and expunging each of the proofs of claim listed on Exhibit A attached thereto and hereto, on the basis that the Debtors are not liable for such claims and/or because such claims were previously satisfied; and there being due and sufficient individualized notice (i) to the claimants listed on Exhibit A at the addresses set forth on the claimants' respective proofs of claim, (ii) counsel for the Committee, and (iii) the Office of the United States Trustee; and there being no objections to the relief granted herein; and the Sixteenth Objection having come before the Court for a hearing held on September 14, 2016, the record of which is incorporated herein; and, after due deliberation, the Court having found and concluded that the relief requested in the Sixteenth Objection and granted herein is in the best interest of the Debtors' estates, creditors and other parties in interest and that the legal and factual basis set forth in the Sixteenth Objection establish sufficient cause for the relief granted herein; and no additional notice being required, it is hereby

**ORDERED**, that the relief requested in the Sixteenth Objection is GRANTED to the extent set forth below and upon the terms and conditions set forth herein; and it is further

**ORDERED**, that each of the Claims listed on <u>Exhibit A</u>, as attached hereto, is reduced, recharacterized, and/or disallowed and expunged as set forth in such exhibit; and it is further

<sup>&</sup>lt;sup>1</sup> Unless otherwise defined, capitalized terms used herein shall have the meanings ascribed to them in the Sixteenth Objection.

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**ORDERED**, that the Debtors' claims and noticing agent, Garden City Group, LLC., and

the Clerk of this Court are authorized to take any and all actions that are necessary or appropriate

to give effect to this Order; and it is further

**ORDERED**, that this Order is deemed to be a separate order with respect to each claim

covered hereby; and it is further

**ORDERED**, that all rights of the Plan Administrator to object to any surviving claims

against the Debtors, whether asserted or unasserted by any of the claimants affected by the

Sixteenth Objection, and to further object to the surviving claims on any other grounds

discovered by the Plan Administrator during the pendency of this case are hereby reserved; and it

is further

**ORDERED**, that this Court shall retain jurisdiction over any and all issues arising from

or related to the implementation and interpretation of this Order.

Dated: September 16, 2016

White Plains, New York

/s/ Robert D. Drain\_

HONORABLE ROBERT D. DRAIN

UNITED STATES BANKRUPTCY JUDGE

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## **EXHIBIT A**

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Creditor Name	Claim #	Total Stated Claim	A - Asserted Sick Time	B - Asserted Vacation Time	C- Asserted 3% Back Pay	D - Asserted Retirement Contributions	E - Asserted Lag Pay	F - Asserted Insurance Reimbursement	G - Asserted Other Claims	Surviving Claim
BATORFALVY, BOHDAN 57 RENEE LN BARDONIA, NY 10954-2140	477	Total Stated Claim: \$1,000,000.00* Total Administrative Claim: \$0.00 Total Priority Claim: Unliquidated Total Secured Claim: \$1,000,000.00 Total Unsecured Claim: \$0.00						\$1,000,000.00		Unsecured: \$0
BLAKIME, EVELYN 14 POPLAR ST YONKERS, NY 10701		Total Stated Claim: \$738.21 Total Administrative Claim: \$738.21 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00	\$738.21							Unsecured: \$4,041.22
COHEN, JUSTIN 104 WINTERGREEN DR MANALAPAN, NJ 07726	1417	Total Stated Claim: \$1,287.00 Total Administrative Claim: \$1,287.00 Total Priority Claim: \$0.00 Total Secured: \$0.00 Total Unsecured: \$0.00							\$1,287.00	Unsecured: \$0
CORON, ROGER 37 CARRINGTON DR GREENWICH, CT 06831	1493	Total Stated Claim: \$24,989.00 Total Administrative Claim: \$24,989.00 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00						\$24,989.00		Unsecured: \$0
CORREIA, SILVIE MARIA 117 CLAREMONT AVE MOUNT VERNON, NY 10550	1381	Total Stated Claim: \$4,127.24 Total Administrative Claim: \$4,127.24 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00	\$1,407.39			\$2,719.85				Unsecured: \$0
DE ROSE, JOSEPH 916 EDISON AVE BRONX, NY 10465	1371	Total Stated Claim: \$9,639.57 Total Administrative Claim: \$9,639.57 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00	\$2,171.32	\$2,157.83		\$5,310.42				Unsecured: \$0
DEVINE MD, PATRICIA 8 HAGEMAN COURT KATONAH, NY 10536	591	Total Stated Claim: \$620,532.78* Total Administrative Claim: \$0.00 Total Priority Claim: \$12,475.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$608.067.78*	\$180,770.67	\$7,532.11		\$182,230.00		\$250,000.00		Unsecured: \$0
DEVINE, DR. PATRICIA ANN 8 HAGEMAN CT KATONAH, NY 10536	1401	Total Stated Claim: \$185,113.55 Total Administrative Claim: \$185,113.55 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00	\$7,532.11	\$7,532.11		\$6,049.33		\$164,000.00		Unsecured: \$0
DIBUONO, PHILIP 49 HALCYON TERR NEW ROCHELLE, NY 10801	1205	Total Stated Claim: \$1,186.75 Total Administrative Claim: \$1,186.75 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00				\$1,186.75				Unsecured: \$0
HALPERN, MICHELE 961 GREEN MEADOW LN MAMARONECK, NY 10543	1453	Total Stated Claim: \$45,000.00 Total Administrative Claim: \$45,000.00 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00	\$45,000.00							Unsecured: \$0

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Colorative   Col	Creditor Name	Claim #	Total Stated Claim	A - Asserted Sick Time	B - Asserted Vacation Time	C- Asserted 3% Back Pay	D - Asserted Retirement Contributions	E - Asserted Lag Pay	F - Asserted Insurance Reimbursement	G - Asserted Other Claims	Surviving Claim
Table   Americante   Colors   St.	22 FARMHOUSE RD CONGERS, NY 10920		Total Administrative Claim: \$0.00 Total Priority Claim: \$17,351.92* Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00								Unsecured: \$0
Total Administrative Claims   St. 200   Claim St. 200   Clai	67 NORMA RD HARRIGTON PARK, NJ 07640		Total Administrative Claim: \$0.00 Total Priority Claim: \$31,551.21 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00								Unsecured: \$0
Total Administrative Claims 31,730,76	34 BALMORAL CRESCENT WHITE PLAINS, NY 10607		Total Administrative Claim: \$22,865.50* Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00					but unliquidated			Unsecured: \$1,488.90
Total Administrative Claim: \$1,70.9.38   Total Printing Claim: \$1,70.9.38   Total Stated Claim: \$1,70.9.38   Total State	LAKSHMI, KAMESWARI 218 VICTORY BLVD NEW ROCHELLE, NY 10804		Total Administrative Claim: \$1,730.76 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00					\$1,730.76			Unsecured: \$0
15 CHIMMEN POT LIN   Total Administrative Claim: \$0.00   Total Principle Claim: \$0.00   Total Principle Claim: \$0.00   Total Stated Claim: \$	3353 CAMPBELL DR		Total Administrative Claim: \$1,700.93 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00				\$1,700.93				Unsecured: \$0
Unsecured   \$3,395,99	15 CHIMNEY POT LN ARDSLEY, NY 10502		Total Administrative Claim: \$0.00 Total Priority Claim: \$838.26 Total Secured Claim: \$0.00								Unsecured: \$0
106 COUNTRY RIDGE RD   SCARSDALE, NY 10508	106 COUNTRY RIDGE RD	1192	Total Stated Claim: Unliquidated								Unsecured: \$8,395.99
Total Administrative Claim: \$0.00   Total Priority Claim: \$0.00   Total Priority Claim: \$0.00   Total Priority Claim: \$0.00   Total Unsecured Claim: \$0.0		863	Total Stated Claim: Unliquidated	'							Unsecured: \$0
Total Administrative Claim: \$3,289.36   Total Priority: \$0.00   Total Secured Claim: \$0.00   Total Unsecured Claim: \$0.00   Total Priority: \$0.00   Total Stated Claim: \$0.00   Total Priority: \$0.00   Total Stated Claim: \$0.00   Total Priority Claim: \$0.00   Total Unsecured Claim: \$0.00   Total Claim	17 WALWORTH TER		Total Administrative Claim: \$0.00 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00		\$4,756.46						Unsecured: \$0
500 CENTRAL PARK AVE #433 SCARSDALE, NY 10583  Total Administrative Claim: \$0.00 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured: \$0  Total Stated Claim: \$4,511.64 Total Administrative Claim: \$4,511.64 Total Priority Claim: \$4,511.	SCHANZER, JEFFREY 17 WALWORTH TER WHITE PLAINS, NY 10606		Total Administrative Claim: \$3,289.36 Total Priority: \$0.00 Total Secured Claim: \$0.00				\$3,289.36				Unsecured: \$0
9 BROOKSIDE AVE PELHAM, NY 10803 Total Priority Claim: \$4,511.64 Total Secured Claim: \$0.00 Total Secured Claim: \$0.00 Total Unsecured Claim: \$0.00	SUN, SUNG WU 500 CENTRAL PARK AVE #433 SCARSDALE, NY 10583		Total Administrative Claim: \$0.00 Total Priority Claim: \$3,900,000.00* Total Secured Claim: \$0.00						\$3,900,000		Unsecured: \$0
*Denotes an unliquidated component	TEN EYCK, ROBIN 9 BROOKSIDE AVE PELHAM, NY 10803	1379	Total Stated Claim: \$4,511.64 Total Administrative Claim: \$4,511.64 Total Priority Claim: \$0.00 Total Secured Claim: \$0.00	\$705.13	\$1,269.23		\$2,537.27				Unsecured: \$0
	*Denotes an unliquidated component										