

United States Bankruptcy Court for the Northern District of Iowa
Mercy Hospital, Iowa City, Iowa
c/o Epiq Corporate Restructuring, LLC
P.O. Box 4420
Beaverton, OR 97076-4420

Electronic Filing:

To submit your form online please go to <https://epiqworkflow.com/cases/MCO>

Name of Debtor: Mercy Hospital, Iowa City, Iowa
Case Number: 23-00623

☐ Check box if the address on the envelope sent to you by the court needs to be updated. Identify your replacement address in Part 1 (Section 3) below.

For Court Use Only

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SEP 07 2023

LEGAL SERVICES

Filed: USDC -Northern District of Iowa
Mercy Hospital, Iowa City (CLM)
23-00623 (TJC)

MCO



0000000007

04/22

f claims
U.S.C. § 503.

Proof of Claim (Official Form 410)

Read the instructions before filling out this form. This form is for making a claim for payment under 503(b)(9), do not use this form to make a request for payment of an administrative claim. Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?

Name of the current creditor (the person or entity to be paid for this claim): Carolyn B. Wittern Living Trust

Other names the creditor used with the debtor: Carolyn Wittern trustee via DTD DEC 11, 1997 Carolyn Wittern Living Trust

2. Has this claim been acquired from someone else? ☒ No ☐ Yes. From whom? Living Trust

3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

Carolyn Wittern
Name

8040 University Blvd
Number Street

Clive IA 50325
City State ZIP Code

Country (if International): _____

Contact phone: 515-271-8328

Contact email: RJENNINGS@WITTERN.COM

Where should payments to the creditor be sent?
(if different)

Name

Number Street

City State ZIP Code

Country (if International): _____

Contact phone: _____

Contact email: _____

4. Does this claim amend one already filed?

☒ No

☐ Yes. Claim number on court claims register (if known) _____

Filed on _____
MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No

☐ Yes. Who made the earlier filing?

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?

☒ No

☐ Yes.

Last 4 digits of the debtor's account or any number you use to identify the debtor:

7. How much is the claim?

\$ 20,500

Does this amount include interest or other charges?

☐ No

☒ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim?

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.

Bond holder

9. Is all or part of the claim secured?

☒ No

☐ Yes. The claim is secured by a lien on property.

Nature of property:

☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (official Form 410-A) with this *Proof of Claim*.

☐ Motor vehicle

☐ Other. Describe: _____

Basis for perfection: _____

Attach redacted copies of documents, if any, that show evidence of perfection of security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ _____

Amount of the claim that is secured: \$ _____

Amount of the claim that is unsecured: \$ _____
(The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) _____ %
☐ Fixed ☐ Variable

10. Is this claim based on a lease?

☒ No

☐ Yes. Amount necessary to cure any default as of the date of petition.

\$ _____

11. Is this claim subject to a right of setoff?

☒ No

☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

☐ Wages, salaries, or commissions (up to \$15,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

☐ Other. Specify subsection of 11 U.S.C. § 507 (a)() that applies.

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

13. Does this claim qualify as an Administrative Expense under 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Amount that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other co-debtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

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

Executed on date

09/31/2023
MM / DD / YYYY

Signature

Carolyn Wittern

Print the name of the person who is completing and signing this claim:

Name

Carolyn

First name

Middle name

Wittern

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

8040

Number

University Blvd.

Street

Clive

City

IA

State

50325

ZIP Code

Contact Phone

515-271-8328

Email

RJennings@Wittern.com

June 30 to July 31, 2023

RAYMOND JAMES®

Wittern, Carolyn Trust Account Summary

Brokerage

Account No. [REDACTED]

Closing Value [REDACTED]



CAROLYN B WITTERN TTEE
U/A DTD DEC 11, 1997
CAROLYN B WITTERN LIVING TRUST
PO BOX 1333
DES MOINES IA 50306-1333330

MARY A. TAYLOE
Raymond James Financial Services, Inc.
1905 WAYZATA BLVD STE 155 | WAYZATA, MN 55391 | (573) 468-4800
<https://www.raymondjames.com/wayzatamn> | MaryAnn.Tayloe@raymondjames.com

Raymond James Client Services | 800-647-SERV (7378)
Monday- Friday 8 a.m. to 9 p.m. ET
Online Account Access | raymondjames.com/clientaccess

Account Purpose

Wealth Accumulation & Provide Income with a moderate risk tolerance and a 5 to 10 year time horizon.

Activity

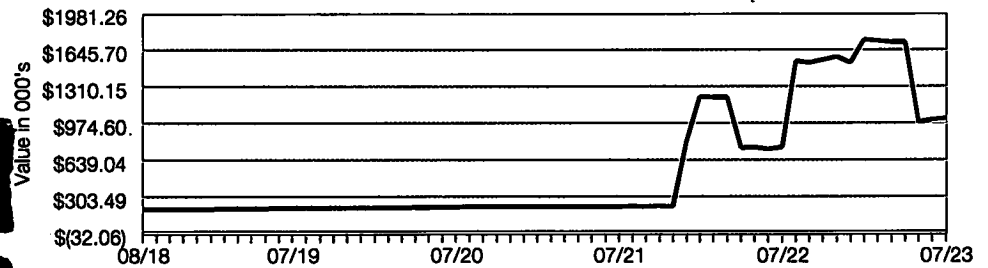
	This Statement	Year to Date
Beginning Balance	\$ [REDACTED]	[REDACTED]
Deposits	\$ [REDACTED]	[REDACTED]
Income	\$ [REDACTED]	[REDACTED]
Withdrawals	\$ [REDACTED]	[REDACTED]
Expenses	\$ [REDACTED]	[REDACTED]
Change in Value	\$ [REDACTED]	[REDACTED]
Ending Balance	\$ [REDACTED]	[REDACTED]

Dollar-Weighted Performance

See Understanding Your Statement for important information about these calculations.

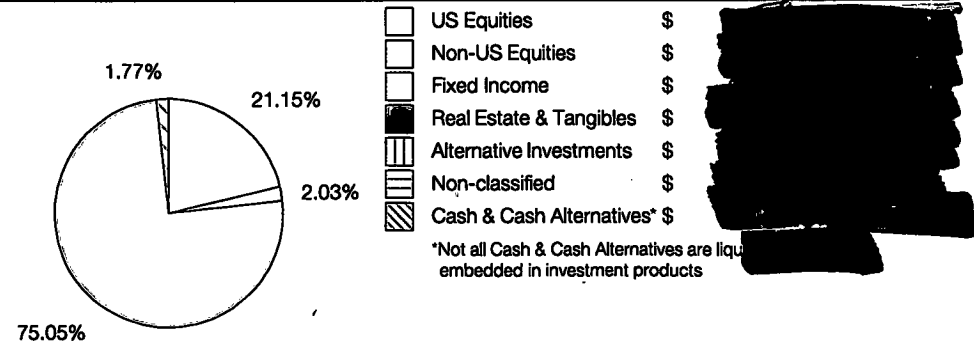
	YTD	2022	2021
Performance Inception 02/13/14	0.05%	7.79%	0.79%

Value Over Time



Asset Allocation Analysis

Value Percentage



*Not all Cash & Cash Alternatives are liquid embedded in investment products

June 30 to July 31, 2023

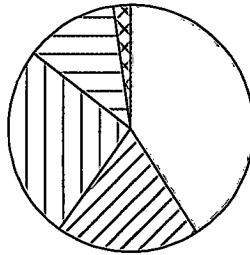
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Your Portfolio (continued)
Wittern, Carolyn Trust Account No. [REDACTED]

Fixed Income *

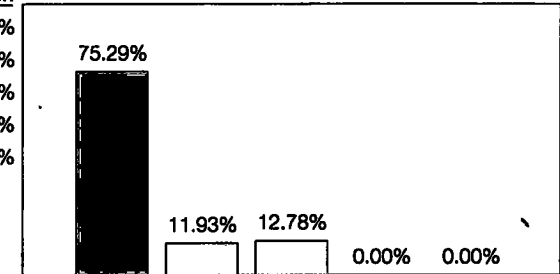
Credit Quality Analysis

Lowest Available *	Current Period Value	Percentage Allocation
U.S. Treasury	\$ [REDACTED]	0.00%
Agency/GSE Debt	\$ [REDACTED]	0.00%
ABS/MBS/CMOs	\$ [REDACTED]	0.00%
Certificates of Deposit (CDs)	\$ [REDACTED]	40.96%
AAA	\$ [REDACTED]	0.00%
AA	\$ [REDACTED]	18.89%
A	\$ [REDACTED]	25.57%
BAA	\$ [REDACTED]	12.22%
Below Investment Grade	\$ [REDACTED]	2.36%
Not Rated	\$ [REDACTED]	0.00%



Maturity Analysis

Maturity	Current Period Value	Percentage Allocation
0 to < 1 yr	\$ [REDACTED]	75.29%
1 to < 3 yrs	\$ [REDACTED]	11.93%
3 to < 7 yrs	\$ [REDACTED]	12.78%
7 to < 14 yrs	\$ [REDACTED]	0.00%
14 to > yrs	\$ [REDACTED]	0.00%



* Based on Moody's, S&P and Fitch (municipals only) Long Term Rating

Municipal Bonds

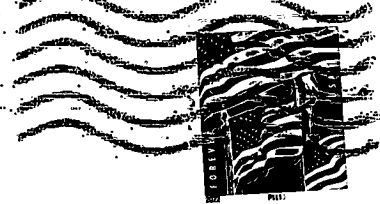
Description (CUSIP)	Par Value	Estimated Annual Income	Date Acquired	Price	Value	Accrued Interest	Total Cost Basis/ Gain or (Loss)	Adjusted Cost/ Gain or (Loss)
HILLS IA HEALTH FACS REV, REV BDS, MERCY HOSP OF IOWA CITY, SER 2011 5.0000% DUE 08/15/2023 Callable 08/15/2023 @ 100.000 (431669AP5) Ratings Information: Moody's Long Term Rating: Caa3, Underlying Rating: Caa3	\$20,000.00	\$1,000.00	03/27/2018	\$91.000	\$18,200.00	\$458.33		
WATFORD CITY ND ST AID CTFS INDBT, REF CTFS INDBT, SER 2019 ASSURED GUARANTY MUNICIPAL CORP 2.0000% DUE 12/01/2025 Callable 12/01/2023 @ 100.000 (94244CAF9) Ratings Information: S&P Long Term Rating: AA, Long Term Outlook: Stable, Underlying Rating: BBB+, Underlying Watch: Not Meaningful, Underlying Outlook: Stable	[REDACTED]							

Interest was due 8/15/2023 in the amount of \$500

F. Wittern
8040 University Blvd
Des Moines, IA 50325

DES MOINES IA 500

31 AUG 2023 PM 2 1



Mercy Hospital, Iowa City, Iowa
Claims Processing Center
c/o Epiq Corporate Restructuring, LLC
10300 SW Allen Blvd.
Beaverton, OR 97076-4420

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LEGAL SERVICES

97005-483300

