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| **Listing of Hospital Indebtedness (HB 321)** |
| **Lender Name** | **Origination Date** | **Due Date** | **Outstanding Principal** | **In Default?** | **In Forbearance?** |
| **Yes** | **No** | **Yes** | **No** |
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| Names of any bond disclosure sites to which the hospital has submitted data or other information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. (If none, state “N/A”) |
| Notes: 1. Original Date \_\_\_\_\_\_\_\_\_\_\_. Revised: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
2. List includes bonded indebtedness, outstanding loans, and bond defaults.
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