		1		SI No.				
Total	NIL	NIL	Department Government		Details of Claimant		Name of the	
0	NIL	NIL	Government					
0	NIL	NIL	receipt	Date of	Date o		ne Corpo	
0	NIL	NIL	Claimed	Amount	Date of Claim		ate Debto	
0	NIL	NIL	receipt Claimed admitted	Date of Amount Amount of claim Nature of Whether	Details of Claims Admitted	Operational Cr	Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)	
0	NIL	NIL	claim	Nature of				
0	NIL	NIL	related party? share in CoC	Whether				
	NIF	NIL	share in CoC	% of voting		Operational Creditors (Government Dues)	te of Commencer	Allicadie-/
0	NIL	NIL	claim	contingent	Amount of	ent Dues)	nent of CIRP: 22	
0	NIL	NIL	off	contingent dues, that may be set	Amount of Amount of any mutual		2.01.2024; List of Credito	
0	NE.	NE.		Amount of Claim under Verification			ors as on: 24.04.2024	
0	NIL	NIL		Amount of claim not admitted			(Version 2)	
0	NIL	NIL		Remarks, if any				

For Four Care Hospital Private Limited
(Under CIRP)

Authorised Signatory
IRP/RP