	Annexure-9 Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 01.10.2024 (Version 3)														
	Lis of Other Creditors, if any (Other than financial Creditors and operational creditors)														
	Name of Creditor	l No.	Date of Claim received		Details of Claims Admitted							Amount of any			
Si No.			Date of receipt	Amount Claimed	claim	Nature of claim	l.,,	Amount covered by guarantee	related	% of voting share in CoC	Amount of contingent	mutual dues, that may be set off	Amount of claim not	Amount of Claim under Verification	Remarks,if any
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0

For Four Care Hospital Private Limited (Under CIRP)

Authorised Signatory IRP/RP