

Municipal Secondary Market Disclosure Information Cover Sheet

This cover sheet should be sent with all submissions made to the Municipal Securities Rulemaking Board, Nationally Recognized Municipal Securities Information Repositories, and any applicable State Information Depository, whether the filing is voluntary or made pursuant to Securities and Exchange Commission rule 15c2-12 or any analogous state statute.

See www.sec.gov/info/municipal/nrmsir.htm for list of current NRMSIRs and SIDs

IF THIS FILING RELATES TO A SINGLE BOND ISSUE:

Provide name of bond issue exactly as it appears on the cover of the Official Statement
(please include name of state where issuer is located):

\$17,860,000

Gaylord Hospital Finance Authority

Hospital Revenue and Refunding Bonds, Series 2004

Otsego Memorial Hospital Association Obligated Group

Provide nine-digit CUSIP* numbers if available, to which the information relates:

368177AB7

368177AC5

368177AD3

IF THIS FILING RELATES TO ALL SECURITIES ISSUED BY THE ISSUER OR ALL SECURITIES OF A SPECIFIC CREDIT OR ISSUED UNDER A SINGLE INDENTURE:

Issuer's Name (please include name of state where Issuer is located): _____

Other Obligated Person's Name (if any): _____

(Exactly as it appears on the Official Statement Cover)

Provide six-digit CUSIP* number(s), if available, of Issuer: _____

*(Contact CUSIP's Municipal Disclosure Assistance Line at 212.438.6518 for assistance with obtaining the proper CUSIP numbers.)

TYPE OF FILING:

Electronic (number of pages attached) 2 Paper (number of pages attached) _____

If information is also available on the Internet, give URL: www.firstriver.com

WHAT TYPE OF INFORMATION ARE YOU PROVIDING? (Check all that apply)

A. Annual Financial Information and Operating Data pursuant to Rule 15c2-12
(Financial information and operating data should not be filed with the MSRB.)

Fiscal Period Covered: _____

B. Audited Financial Statements or CAFR pursuant to Rule 15c2-12

Fiscal Period Covered: _____

C. Notice of a Material Event pursuant to Rule 15c2-12 (Check as appropriate)

- | | |
|--|--|
| 1. <input type="checkbox"/> Principal and interest payment delinquencies | 6. <input type="checkbox"/> Adverse tax opinions or events affecting the tax-exempt status of the security |
| 2. <input type="checkbox"/> Non-payment related defaults | 7. <input type="checkbox"/> Modifications to the rights of security holders |
| 3. <input type="checkbox"/> Unscheduled draws on debt service reserves reflecting financial difficulties | 8. <input type="checkbox"/> Bond calls |
| 4. <input type="checkbox"/> Unscheduled draws on credit enhancements reflecting financial difficulties | 9. <input type="checkbox"/> Defeasances |
| 5. <input type="checkbox"/> Substitution of credit or liquidity providers, or their failure to perform | 10. <input type="checkbox"/> Release, substitution, or sale of property securing repayment of the securities |
| | 11. <input type="checkbox"/> Rating changes |

D. Notice of Failure to Provide Annual Financial Information as Required

E. Quarterly or Monthly Financial Information and Operating Data
(Financial information and operating data should not be filed with the MSRB.)

F. Other Secondary Market Information (Specify): 13-Week Cash Flow Forecast and Assumptions as of June 16, 2010

I hereby represent that I am authorized by the issuer or obligor or its agent to distribute this information publicly:

Issuer Contact:

Name _____ Title _____
Employer _____
Address _____ City _____ State _____ Zip Code _____
Telephone _____ Fax _____
Email Address _____ Issuer Web Site Address _____

Dissemination Agent Contact, if any:

Name Shelley J. Aronson Title President
Employer First River Advisory L.L.C.
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Telephone (734) 761-3624 Fax (734) 761-3614
Email Address aronson@firstriver.com Relationship to Issuer Dissemination Agent

Obligor Contact, if any:

Name Thomas R. Lemon, FACHE Title Chief Executive Officer
Employer Otsego Memorial Hospital
Address 825 North Center Street City Gaylord State MI Zip Code 49735
Telephone (989) 731-2215 Fax (989) 731-2217
Email Address Tlemon@otsegomemorialhospital.org Obligor Web Site Address www.otsegomemorialhospital.org

Investor Relations Contact, if any:

Name _____ Title _____
Telephone _____ Email Address _____

Otsago Memorial Hospital & Foundation
13 Week Cash Flow Forecast
Management Assumptions

	Starting Ending	Forecast													13 Week Total	
		Actual 6/7/10 6/13/10	1 6/14/10 6/20/10	2 6/21/10 6/27/10	3 6/28/10 7/4/10	4 7/5/10 7/11/10	5 7/12/10 7/18/10	6 7/19/10 7/25/10	7 7/26/10 8/1/10	8 8/2/10 8/8/10	9 8/9/10 8/15/10	10 8/16/10 8/22/10	11 8/23/10 8/29/10	12 8/30/10 9/5/10		13 9/6/10 9/12/10
Opening Operating Cash Balance		471,377	1,045,482	331,136	627,628	128	619,326	45	745,404	92,417	1,014,089	51,708	500,177	61,873	656,771	1,045,482
Cash Receipts:																
Blue Cross - BIP - Weekly		234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	234,900	2,818,800
Medicare - PIP - Bi - Weekly		218,731	0	218,731	0	218,731	0	218,731	0	218,731	0	218,731	0	218,731	0	1,312,386
Medicaid - MIP - Bi - Weekly		0	62,555	0	62,555	0	62,555	0	62,555	0	62,555	0	62,555	0	62,555	437,885
Medicaid - CIP - Bi-Weekly		0	1,500	0	1,500	0	1,500	0	1,500	0	1,500	0	1,500	0	1,500	10,500
Commercial		249,052	260,562	260,562	208,450	208,450	260,562	260,562	260,562	260,562	260,562	260,562	260,562	260,562	208,450	3,230,971
Medicare Part B & Outpat pay		182,044	132,773	132,773	106,219	106,219	132,773	132,773	132,773	132,773	132,773	132,773	132,773	132,773	106,219	1,646,389
PMB & Clinic		217,125	195,056	195,056	156,045	156,045	195,056	195,056	195,056	195,056	195,056	195,056	195,056	195,056	156,045	2,418,696
Self Pay & Other		69,273	68,972	68,972	55,178	55,178	68,972	68,972	68,972	68,972	68,972	68,972	68,972	68,972	55,178	855,252
Medicaid Other		22,454	44,135	44,135	165,308	35,308	44,135	44,135	44,135	44,135	44,135	44,135	44,135	44,135	35,308	677,268
Medicaid QAAP		0	0	0	35,666	0	0	0	35,666	264,361	0	0	35,666	0	0	371,359
Dividend Distribution		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Transfers from Foundation		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Transfers from QAAP Account		0	0	0	206,000	0	143,500	0	0	0	0	0	199,392	0	0	548,892
Transfers from Funded Depreciation		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PY cost report settlements		0	0	0	0	0	0	396,889	0	0	0	0	0	0	0	396,889
Miscellaneous		5,523	27,871	27,871	22,296	22,296	27,871	27,871	27,871	27,871	27,871	27,871	27,871	27,871	22,296	345,595
Total Cash Receipts		1,199,102	1,028,324	1,183,000	1,254,116	1,037,126	1,171,824	1,579,889	1,063,990	1,447,361	1,028,324	1,183,000	1,263,382	1,183,000	882,450	15,305,782
Cash Disbursements:																
Operating supplies		4,111	18,449	18,449	18,449	18,449	18,449	18,449	18,449	18,449	18,449	18,449	18,449	18,449	18,449	239,837
Medical Supplies & Pharmacy		386,357	230,285	142,403	230,285	142,403	230,285	142,403	230,285	142,403	230,285	142,403	230,285	142,403	230,285	2,466,413
Purchased Services		10,012	33,206	33,206	33,206	33,206	33,206	33,206	33,206	33,206	33,206	33,206	33,206	33,206	33,206	431,674
Professional Fees		0	16,600	16,600	16,600	16,600	16,600	16,600	16,600	16,600	16,600	16,600	16,600	16,600	16,600	215,800
Utilities		34,041	115,089	115,089	115,089	115,089	115,089	115,089	115,089	115,089	115,089	115,089	115,089	115,089	115,089	1,496,157
Insurance		0	0	93,749	70,615	0	0	14,991	0	0	0	0	0	61,326	0	240,683
Other expenses		32,408	40,359	40,359	40,359	40,359	40,359	40,359	40,359	40,359	40,359	40,359	40,359	40,359	40,359	524,670
Payroll & Employee Taxes		0	1,173,736	0	1,166,518	0	1,166,518	0	1,166,518	0	1,166,518	0	1,166,518	0	1,166,518	8,172,844
Equipment Lease		0	0	0	23,414	0	0	0	0	23,414	0	0	23,414	0	0	70,242
5/3 Bond Principal & Interest		0	0	0	84,489	0	0	0	0	84,347	0	0	84,205	0	0	253,041
Wells Fargo Bond Interest		100,171	0	0	0	0	62,919	0	0	0	95,419	0	0	0	95,419	253,757
CAPEX		0	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	26,000
Additional Professional Fees		22,195	13,266	10,000	0	17,500	0	10,000	0	17,500	0	10,000	0	17,500	0	95,766
Health Insurance		0	0	380,455	45,100	0	0	324,102	45,100	0	324,102	45,100	0	0	0	1,163,959
Funded Depreciation		25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	325,000
Forbearance Fee		0	0	0	0	0	0	100,000	0	0	0	0	0	0	0	100,000
QAAP Taxes		0	65,600	0	0	0	65,600	0	0	0	232,700	0	0	0	65,600	429,500
Prior Year's Potential Medicare Settlement		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Bank Fees		4,827	0	0	0	0	6,000	0	0	0	6,000	0	0	0	0	12,000
Other	2%	5,875	9,080	9,197	10,492	7,322	9,080	7,322	9,380	7,322	9,080	7,322	9,080	8,549	9,080	112,395
Total Cash Disbursements		624,997	1,742,670	886,507	1,881,616	417,928	1,791,105	834,530	1,716,978	525,689	1,990,705	734,530	1,701,686	588,101	1,989,605	16,801,647
Operating Cash Flow		574,105	(714,346)	296,493	(627,500)	619,198	(619,281)	745,359	(652,987)	921,672	(962,381)	448,470	(438,304)	594,896	(1,107,155)	(1,495,865)
Ending Operating Cash Balance		1,045,482	331,136	627,628	128	619,326	45	745,404	92,417	1,014,089	51,708	500,177	61,873	656,771	(450,383)	(450,383)
QAAP Cash Balance - PNC		400,692	400,692	400,692	194,692	237,792	94,292	94,292	156,292	199,392	199,392	199,392	0	8,900	46,150	8,900
Total Operating + QAAP Cash Balance		1,446,174	731,828	1,028,320	194,820	857,118	94,337	839,696	248,709	1,213,481	251,100	699,569	61,873	665,671	(404,233)	(441,483)
Additional Cash Balances																
Funded Depreciation		1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153	1,106,153
Foundation Cash		213,734	218,734	223,734	228,734	233,734	238,734	243,734	248,734	253,734	258,734	263,734	268,734	273,734	278,734	258,734
Foundation Investments		936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778	936,778
Total Other Fund Balances		2,256,665	2,261,665	2,266,665	2,271,665	2,276,665	2,281,665	2,286,665	2,291,665	2,296,665	2,301,665	2,306,665	2,311,665	2,316,665	2,321,665	2,301,665
Total Cash		3,702,839	2,993,493	3,294,985	2,466,485	3,133,783	2,376,002	3,126,361	2,540,374	3,510,146	2,552,765	3,006,234	2,373,538	2,982,336	1,917,432	2,552,765
Short-Term Debt - Margin Loan		352,360	327,360	302,360	277,360	252,360	227,360	202,360	177,360	152,360	127,360	102,360	77,360	52,360	27,360	127,360
Total Cash less Short-Term Debt		3,350,479	2,666,133	2,992,625	2,189,125	2,881,423	2,148,642	2,924,001	2,363,014	3,357,786	2,425,405	2,903,874	2,295,178	2,929,976	1,890,072	2,363,014
Cumulative Average Daily Cash Expenses				180,754						184,224				182,496		
Days on Hand				17						13				13		
Note: Float		329,007														
Total Cash in Bank less ST Debt plus float		3,679,486														
Cash in Bank - Operating		1,374,489														

Otsego Memorial Hospital & Foundation

13 Week Cash Flow Forecast

Assumptions and detailed additions/deletions
as of June 16, 2010

Cash Receipts:			
Updated cash receipts			Due to holiday scheduling WE 9/12 is a 4 day cash receipt week
Cash Disbursements			
PY Potential Medicare Cost report settlement			Added FY 2007 and 2008 potential Medicare cost report settlements of \$172,000 to WE 9/12