RESOLUTION NO ___ OF THE BOARD OF DIRECTORS OF TULARE LOCAL HEALTHCARE DISTRICT

WHEREAS, the Board of Directors (the "Board") of the Tulare Local Healthcare District dba Tulare Regional Medical Center (the 'District') continues to incur substantial costs maintaining the Tulare Regional Medical Center (the "Hospital") during the period of its closure due to its voluntary license suspension; and

WHEREAS, the District is in advanced discussions with Adventist Health Systems/West for a transaction whereby Adventist Health Systems/West would enter into those certain lease, asset purchase/sale, and management agreements related to the Hospital and provide the District a line of credit for use in continuing to maintain and reopen the Hospital; and

WHEREAS, the costs of operating the Hospital continue to exceed the revenues generated by the closed Hospital, which circumstance may create a revenue shortfall for the District until or unless it consummates the aforementioned transactions with Adventist Health Systems/West, including the line of credit; and

WHEREAS, it may become necessary for the District to borrow funds sufficient to cover the possible revenue shortfalls until or unless the District completes the transactions with Adventist Health/West and Adventist Health/West funds the line of credit.

NOW, THEREFORE, BE IT RESOLVED THAT, in accordance with the provisions of the California Health and Safety Code and the Tulare Local Hospital District Bylaws, the Board of Directors hereby authorizes staff to seek financing of up to One Million dollars (\$1,000,000) in substantial conformance with the promissory note attached to this Resolution and, provided the terms in a promissory note conform to the terms of the promissory note attached hereto, authorizes the President of the Board of Directors of the District, without further action by the Board, to execute a promissory note on behalf of the District.

IN WITNESS WHEREOF, I have hereto set my signature as Secretary of the District this 17th day of July 2018

Senovia Gutierrez	

PROMISSORY NOTE

Loan Amount: \$1,000,000.00	Dated:	, 2018
FOR VALUE RECEIVED, the undersigned, TULARE LOCAL REGIONAL MEDICAL CENTER ("Promissor"), a political statement of the contract	ubdivision of the St	tate of California formed
under the California Health and Safety Code, promises ("holde	to pay toer") the principal su	m of One Million dollars
and no cents (\$1,000,000.00), due and payable on or before forth in this promissory note ("Note").	, 2018, on th	e terms and conditions set
This Note is unsecured, but Promissor agrees and hereby prombefore, 2018 from the any and all proceeds or the period of the note, including tax revenue proceeds received State of California, excepting any and all funds or monies that P source of repayment would violate any applicable Federal or C	payments that the F by Promissor as a per romissor receives the	Promissor receives during olitical subdivision of the are use of which funds as a
Promissor will be in default on this Note if any of the following by payment when due; or (b) the undersigned breaks any promise the perform promptly at the time and strictly in the manner provided Note.	he undersigned has i	made to holder, or fails to
Upon default and the failure by Promissor to pay all amounts Holder's option, in addition to all other remedies provided by la due under the Note plus interest at the highest rate permitted by continue to charge and accrue until Holder's demand is met. Prolimits under applicable law, any and all legal expenses whether fees and legal expenses for bankruptcy proceedings (including efinjunction), appeals, and any anticipated post judgment collect court, in addition to all other sums provided by law. This Note holder in the State of California. Amounts due under this Not States.	w, require immediany applicable law, womissor will reimbut or not there is a law fforts to modify or valion services. Promhas been delivered	te payment of the amount hich interest Holder may rse Holder, subject to any suit, including attorneys' acate any automatic stay or issorwill pay any costs of to holder and accepted by
Holder may delay or forego enforcing any of its rights or rem Promissor to the extent allowed by law, hereby waive any ap- demand for payment, protest or notice of dishonor. Upon an otherwise expressly stated in writing, no party who signs accommodation maker or endorser shall be released from liable renew, extend (repeatedly and for any length of time) or modifi- necessary by Holder without the consent of or notice to anyone	oplicable statute of ny change in the te this Note, whether ility. All such parti fy this Note, or take	limitations, presentment, erms of this Note, unless as a maker, guarantor, es agree that Holder may any other action deemed
TULARE LOCAL HEALTHCARE DISTRICT		
dba TULARE REGIONAL MEDICAL CENTER		
By:		
Name: Kevin Northcraft Title: President		

Board of Directors

Tulare Local Healthcare District