#### **U.S. Department of Justice**



United States Attorney Northern District of New York

#### FINANCIAL STATEMENT OF CORPORATE DEBTOR GENERAL DOCUMENT REQUEST

- 1. Provide complete set of audited financial statements prepared for the past five years and year-to-date financial statements for the current fiscal year. Such statements are to include: balance sheet, income statement, statement of cash flows, all accompanying footnotes, accounting explanations and disclosures and supporting schedules (schedules of cost of sales, general and administrative expenses, corporate overhead expense, operating expenses), if available.
- 2. Provide signed federal corporate income tax return including all accompanying schedules, forms and attachments filed for the past five years.
- 3. Provide an organization chart listing the company, all subsidiaries, and all affiliates. Provide the past five years of audited financial statements and federal income tax returns for all the above entities (except for the entity providing returns in response to #1 above).
- 4. Copies of recent appraisals and/or valuation studies (including liquidation studies) prepared for the company, or for any or all assets. Include insurance amounts for each asset insured.
- 5. Provide all current operating budgets, capital budgets, strategic plans (including restructuring and/or acquisition plans) revenue projections, cash flow projections (including extraordinary working capital needs and commitments regarding debt payments) and profitability projections, for the current fiscal year and beyond, if available.
- 6. Provide a copy of each current credit and/or loan agreement and financing agreement including all amendments, extensions and attachments. Also, provide all reports provided to major lender within the past six months, including a copy of the most recent borrowing base or compliance certificate, if applicable. Provide all correspondence and materials within the past two years, if any, with lenders concerning attempts at obtaining additional credit and capital.
- 7. Provide the summary page from the most recent aging statement for accounts payable and for accounts receivable.
- 8. Provide documents prepared within the last six months relating to any acquisition and/or divestiture plans relating to the company, any significant assets or subsidiary companies, and any and all restructuring plans, if not included in the above questions. Include bankruptcy reorganization and liquidation plans, including all draft disclosure statements and reorganization plans, etc..
- 9. Provide a signed and dated Financial Statement of Corporate Debtor Form OBD-500C (copy attached).



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# Financial Statement of Corporate Debtor (Use Additional Sheets Where Needed)

	1- For Profit ( )	
1. Name (Debtor)	Type 2-Not for Profit ( )	
2. Business Address		
Street	City	State
Note: Attach schedule of all business a	iddresses	
3. Foreign	Domestic	
4. State-Incorporation	Date-Incorporation	License to
do business in		
5. Name Registered Agent		
6. Address Registered Agent	Phone	
7. Names and Addresses of all Stockhold Owned by each. Use separate sheet, if no	ders. Indicate ownership percentage of each shareholder and eccessary.	the number of Shares
(1)		
	ent Officers and Number of Shares Held by Each. Term Expi	res on.
		_
		_
(4)		

Registration on National or Local Stock Exchange(s). (Give details, including date of Registration and/o
Registration on National or Local Stock Exchange(s). (Give details, including date of Registration and/o
delisting.)
Total authorized Shares of each type issued and present market value per share on each type of stock.
Total outstanding shares of each type of stock currently being held as Treasury Stock.
Total outstanding shares of each type of stock. Amount of bonded debt and principal bondholders.
t States and Municipalities to which taxes have been paid and/or are being paid. Describe nature amount of such taxes, state most recent year of payment thereof and whether tax payments are current.

11. Has this Corporation filed United States Corporate Income Tax	Returns during the last 3 years? Yes ( ) No ( )	
To What I.R.S. Office(s)		
	Are Federal Current? Ves ( ) No ( )	
12. Name and Address of  (a) Corporation Independent Certified Public Accountants	The reactal cultent. Tes ( ) No ( )	
(b) Corporate Attorney(s) retained by Corporation From	to	
13. Does this Corporation have a Profit and Loss Statement and Balance and for specified past years. Past Years (2014) (2015) (2016). If Ye documents if available.		
14. Does this Corporation maintain bank accounts. Give names and add other such entities, within the United States or located elsewhere. In		
(A) Checking Accounts(s)		
(B) Savings Account(s)		
(C) Other Account(s)		
(D) Savings & Loan Associations or other such entities		
(E) Trust Accounts(s)		
(E) Other Account(s)		

5. List all commercial paper, negotiable or non-negotiable, in which the Corporation has any interest whatsoeve presently in transit or in the possession of any banking institution. Describe such paper and the Corporations interest therein, and state its present location. List all accounts and loans receivable in excess of \$300 and specify if due from an officer, stockholder, or director.		
	resident, or Chairman of the Board for the last taxable year,	
(A) Gross Income	\$	
(B) Expenses (Fixed & Current)	\$	
(C) Gross Profit (or Loss)	\$	
(D) Net Profit After Taxes	\$	
(E) List approximate totals:		
Payables: \$	Receivables: \$	
7. Is this Corporation presently:		
(A) Active (Answer No if inactive but still in exis	Yes ( ) No ( ) stence)	
(B) Void and/or Terminated by State auth	ority Yes ( ) No ( )	
(C) Otherwise dissolved	Yes ( ) No ( )	
1. Date		
2. By whom		
3. Reason		
8. List corporate salaries to and/or drawings of the	e following personnel for the last three taxable years:	
A) Position (Inc. officers)	Specify Year	
	(Year)       (Year)       (Year)         1.       2.       3.	
President		
_		
Γreasurer		

	List five most highly compensated employees or cand/or bonus for last three taxable years:	officers other than above	e, describe position	and set forth salary
		(Year)	(Year)	(Year)
1.				
2.				
3.				
4.				
5.				
	Describe the nature of the compensation paid to to ptions, pensions, profit sharing, royalties, or othe			
19. 1. 2. 3. 4.	List Primary Corporate commercial activity (fiel		n income):	
	List all other supplementary fields of activity in sbsidiaries, or affiliates, stating the name(s) and sta			
21.	Has this Corporation at any time been the subject Insolvency Law, or the Federal Bankruptcy Act, each such proceeding.  (A) Date (Commencement)	as amended? If so, sup	ply the following in	nformation as to
	(C) Discharge or other disposition, if any, and o			

	) State Court		Federal Court	
		County		District
22.	* *	tate, and Personalty of an estimate state, and Personalty of an estimate state, and where located		
(B)	List and describe a	all judgments, recorded and to	unrecorded:	
	(2) In favor of the	: Corporation		
		her encumbrances against Re		poration: (including but not
		her encumbrances (including ersonalty owned by the Corp		Interests, whether perfected or above.
	st and describe locat dress of Seller and c		Real Estate being purchase	d under contract, with name and

Corporation, OTHER THAN IN TH	ets (Real and/or Personal) and each (over \$300.00) made by this E ORDINARY COURSE OF BUSINESS, during the last three (3) calendar a made. Describe compensation paid by recipient and to whom.
25. Is this Corporation a party in any	law suit now pending? ( ) Yes (Give details) ( ) No
26. Please list names and addresses o Corporation, or any of its subsidia	f any person or other business entity, holding funds in escrow or in trust for tharies or affiliates.
27. Additional Remarks	
28. Verification and Affidavit	
imprisonment) and with knowledge that to affect action by the U.S. Department	es for false statements provided by 18 U.S. Code §1001 (fine and/or 5 years this financial statement is submitted by me as a responsible officer of this Corporation of Justice, I hereby certify that I believe I completely understand the above statement statement of all corporate income and assets, real and personal, whether held in the
Date:	AFFIANT (Officer)
	(List Corporate Position)
	Age (Next Birthday)
NOTARY PUBLIC  My Commission Expires	



AREA CODE - PHONE NUMBER

United States Attorney Northern District of New York

AUTHORIZATION TO RELEASE INFORMATION		
TO WHOM IT MAY CONCERN:		
In connection with the financial investig	ation being conducted by the United States Attorney, I,	
FULL NAME PRINTED	, TITLE OR POSITION	
acting as agent for or on behalf of		
,	NAME OF BUSINESS ENTITY	
bearing this release, or a copy thereof, within pertaining to employment, military, credit, edu attendance, licensing, disciplinary, credit, med and supporting documentation, bank records, a agency. "We" hereby direct you to release surface the connection with the consideration of my liability to pay said debt. Information will be disseminated.	ny authorized representative of the United States Attorney one year of its date, to obtain any information in your files cational, or business records, including, but not limited to, dical, financial, city, state, and federal tax records, returns and/or records maintained by any city, state, and/or federal och information upon request of the bearer.  In on a debt claimed by the United States and financial ability ated only to those individuals and agencies directly involved ions imposed by law, regulation, presidential directive or	
other educational institution, hospital or other institution, consumer reporting agency, retail agency, including officers, directors, employe from any and all liability for damages of whate trustees, or associates, because of compliance	todian of such records, the school, college, university, or er repository of medical records, credit bureau, lending business establishment, insurance company, or public es, or related personnel, both individually or collectively, ever kind, which may at any time result to "us", successors, e with this authorization and request to release information, e be any question as to the validity of this release, you may	
SIGNATURE DATE	PRINT FULL NAME	
TITLE OR POSITION	FEDERAL TAX IDENTIFICATION #	
BUSINESS STREET ADDRESS, CITY, STATE, ZIP (	CODE	

BUSINESS AUTHORIZATION (9/99)

## CERTIFICATION UNDER RULE 902(11) FEDERAL RULES OF EVIDENCE

I,, declar	re that I am employed by	
which has designated me as the duly authoriz documents.	zed Custodian of Records for the accompanying	
I hereby certify that the accompanying documents are authentic business records of the foregoing company/entity, specifically the records identified as:		
	cords racharred as.	
Description of Business Record(s):		
and that these documents:		
a. were made at or near the time from information transmitted by, a person wi	of the occurrence of the matters set forth by, or th knowledge of those matters;	
	regularly conducted activity of the foregoing	
c. were made in regularly conduc	cted activity as a regular practice of the foregoing	
	ed from others and kept in the regular course of ompany/entity, and were records of which the interest in their accuracy.	
	at the foregoing is true and correct. Executed	
thisday of, 2022, at		
	City and State	
	Signature	
	 Telephone Number	