

**MONTHLY OPERATING REPORT FOR
NON-OPERATING CORPORATION OR PARTNERSHIP DEBTOR
(Including LLCs and LLPs)**

Case No. _____

Debtor _____

Report Month/Year _____

Instructions: Answer *all* questions and attach additional sheets if necessary to provide complete responses.

- | | | Yes | No |
|-------|--|--------------------------|--------------------------|
| 1. | The debtor did <i>not</i> operate a business during the reporting month, and all of its financial activity for the reporting month is fully disclosed in this report. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | Did the debtor, or a third party on behalf of the debtor, sell, transfer, or otherwise dispose of any of the debtor's assets during this reporting month? <i>If yes, attach a schedule identifying each asset, date of sale notice, method of disposition, and gross and net sale proceeds received. If real property was sold, attach a copy of the closing statement.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Is the debtor holding any funds in an account at a financial institution? <i>If yes, attach a copy of the bank statement for this reporting month for each account.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | Are any of the debtor's funds, or funds in which the debtor has an interest, held by debtor's counsel, an escrow company, or another third party on behalf of the debtor? <i>If yes, attach a schedule identifying the party or entity holding the funds, the amount of funds held, and the purpose for which the funds are held.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5(a). | Did the debtor collect any accounts receivable during this reporting month? <i>If yes, proceed to 5(b). If no, proceed to 5(c).</i> | <input type="checkbox"/> | <input type="checkbox"/> |

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			Yes	No
5(b).	What was the debtor's accounts receivable balance? Prior Month			
	Report Month			
5(c).	What portion of the debtor's accounts receivable balance is considered uncollectible?			

6.	Excluding receipts disclosed in 2 and 5 above, did the debtor or another party on behalf of the debtor receive other funds during this reporting month? (e.g. dividends, royalties and other amounts due to the debtor) <i>If yes, attach a schedule listing each receipt by payor, date received, dollar amount, and nature of the transaction.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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7(a).	Did the debtor or another party on behalf of the debtor make payments during this reporting month to a professional such as an attorney, accountant, realtor, appraiser, auctioneer, business consultant, or other professional person? <i>If yes, attach a schedule listing each payment to a professional, and include the payee, type of work performed, payment date, dollar amount, and date of court approval.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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7(b).	Did the debtor or another party on behalf of the debtor make any payments during this reporting month to, or for the benefit of, an officer, director, partner, member, shareholder or other insider of the debtor? <i>If yes, attach a schedule listing each payment and identify the payee, date, dollar amount, and nature of payment (e.g., expense reimbursement, loan repayment, draw, salary, wages, bonus, dividend, stock distribution, or other explanation).</i>	<input type="checkbox"/>	<input type="checkbox"/>
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7(c).	Excluding payments listed in 7(a) and 7(b) above, did the debtor or another party on behalf of the debtor make any other payments during this reporting month? <i>If yes, attach a schedule identifying the source of funds, payee, date, dollar amount, and purpose.</i>	<input type="checkbox"/>	<input type="checkbox"/>
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7(d).	Total payments (disbursements) during the reporting month as reported in 7(a), 7(b) and 7(c) above:	<input style="width: 100%;" type="text"/>
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8. Did the debtor incur any tax debt during the reporting month? *If yes, attach a schedule listing the taxing agency to whom the debt was incurred, amount due, tax period, and payment due date. Include an explanation for any delinquent post-petition taxes.* Yes No

9. Did the debtor incur any debt during the reporting month for *post-petition* professional fees? *If, yes, estimate the amount of professional fees accrued but not paid.* Yes No

10. Excluding taxes and professional fees reported in 8 and 9 above, did the debtor incur *other* debt during the reporting month? *If yes, attach a schedule listing the person or entity to whom the debt is owed, amount due, nature of debt, and payment due date.* Yes No

11. Were there any changes in the debtor's insurance coverage during the reporting month? *If yes, explain.* Yes No

12. At the end of this reporting month, did the debtor have any **delinquent** statutory fees owing to the U.S. Trustee pursuant to 28 U.S.C. § 1930(a)(6)? *If yes, list each quarter that is delinquent and the amount due with an explanation.* Yes No

<u>Quarter</u>	<u>Amount</u>	<u>Explanation</u>
_____	_____	_____
_____	_____	_____

13. Explain what progress the debtor made during this reporting month toward confirmation of a plan of reorganization. Include a description of significant events or new developments in the case.

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DEBTOR CERTIFICATION:

The debtor agrees to immediately notify the United States Trustee if its operations resume, and thereafter to file complete monthly operating reports in compliance with Local Bankruptcy Rule 2015-2(a) and the United States Trustee's requirements.

I certify under penalty of perjury that (1) I have personally prepared this financial report or directly supervised its preparation, and (2) the information contained in this monthly financial report is complete, true, and accurate to the best of my knowledge, information, and belief.

BY: _____

DATE: _____

TITLE: _____

The debtor, or trustee, if appointed, must sign the monthly financial report. Only an officer or director has authority to sign a financial report for a corporate debtor and only a general partner has authority to sign a financial report for a partnership debtor. Debtor's counsel may not sign a financial report for the debtor.

Case No. _____

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File the original....(select only one)**For a Chapter 11 case filed in Portland, OR:**

United States Bankruptcy Court
 1001 SW 5th Avenue, 7th floor
 Portland, OR 97204

For a Chapter 11 case filed in Eugene, OR:

United States Bankruptcy Court
 405 East 8th Avenue, Suite 2600
 Eugene, OR 97401

CERTIFICATION OF SERVICE: The undersigned certifies that copies of this report and all supporting documents have been served upon each of the following persons in this case: U.S. Trustee; the chairperson of each official committee of creditors or equity security holders and the attorney(s) for each such committee; and the debtor and the debtor's attorney, and the trustee and the trustee's attorney, if applicable.

BY: _____

DATE: _____

TITLE: _____

Send U.S. Trustee's copy to: (select only one)**For a Chapter 11 case filed in Portland, OR:**

Office of the United States Trustee
 620 SW Main Street, Suite 213
 Portland, OR 97205

For a Chapter 11 case filed in Eugene, OR:

Office of the United States Trustee
 405 East 8th Avenue, Suite 1100
 Eugene, OR 97401