

Financial Statement

IN THE UNITED STATES DISTRICT COURT FOR THE
WESTERN DISTRICT OF NEW YORK

UNITED STATES OF AMERICA

v.

Criminal Action No.:

Name and Address	Home Phone Number	Marital Status
		Spouse's Name
	Social Security Number	Spouse's SSN
Employer or Business (Name and Address)		<u>Check Appropriate Box:</u> <input type="checkbox"/> Wage Earner <input type="checkbox"/> Self-Employed <input type="checkbox"/> Partner/Corporate Owner <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed
Occupation	How Long Employed?	Business Phone Number
Spouse's Employer or Business (Name and Address)		<u>Check Appropriate Box:</u> <input type="checkbox"/> Wage Earner <input type="checkbox"/> Self-Employed <input type="checkbox"/> Partner/Corporate Owner <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed
Occupation	How Long Employed?	Business Phone Number:
E-MAIL ADDRESS		
_____@_____.com		
Social Media Access (Facebook, MySpace, etc.) Name of provider:		
Account Number:		

SAFE DEPOSIT BOXES (Rented or Accessed)

Do you have a Safe Deposit Box? Yes No.
 If yes, please complete the bottom of this section for each box you have.

Is there any other person(s) holding assets or documents for you in any Safe Deposit Box? Yes No.
 If yes, please complete the bottom of this section for each box.

Are you designated deputy and/or do you have access to anyone else's Safe Deposit Box? Yes No.
 If yes, please complete the bottom of this section for each box.

Do you have a will and where is it kept? Provide this office with a copy of your last will and testament.

I/ J	Name and Address of Location of Safe Deposit Box	Box Number	Contents

SECURITIES (Stocks in public and closely held corporations, bonds, mutual funds, U.S. Govt. Securities, etc.)

I/ J	Name and Kind of Company	Location of shares	No. of Units	Fair Market Value

If you hold stock in any closely held corporations, provide copies of corporate tax returns for the last two years.

During the past two years, did you have a security trading account with a broker? If yes, identify the brokerage firm(s), account number(s), state the name(s) of the account(s).

I/ J	Brokerage Firm	Account Name	Account Number

Are you a member of any investment or barter trading clubs? If so, provide account statements for the last two years showing investments and current club value.

REAL ESTATE (Include home equity loans under mortgage balance)

I/ J	Address (Include County)	Purch. Date	Purch. Price	Fair Market Value	Mortgage Date & Balance	Monthly Payment	Date Mtg. Paid Off

If any real estate holdings are income producing properties, identify tenants and current lease terms. Provide income statements and/or tax returns for the last two years for each rental property.

BUSINESS HOLDINGS						
How long have you owned your own business?						
What is the nature of your business activity.						
Are you involved in any business or personal partnerships? If so, what is the nature of the activity of your partnership holdings?						
Provide income and profit statements, balance sheets and income tax returns of your business and/or partnership(s) for the past two years.						
Provide a current listing of accounts receivable and accounts payable for your business and/or partnership(s).						
LIFE INSURANCE						
Name and address of co.	Policy Number	Type	Face Amt	Cash Surrend. Value	Amount Borrowed	Amt you can borrow
MORTGAGES HELD BY YOU						
I/ J	Mortgagee (name and address)	Mortgage Balance	Monthly Payment	Date Mtg will be paid off	Balloon Payment	
MOTOR VEHICLES (Include cars, trucks, mobile homes, boats, airplanes, etc, which are owned or operated by you)						
I/ J	Year, make and license number	Fair Market Value	Loan Balance	Monthly Payment	Date loan will be paid off	
OTHER ASSETS (including, BUT NOT LIMITED TO, cash on hand, copyrights, patents, interests in partnerships, jewelry, coins, precious metals, personal/business notes or personal/business accounts receivable, antiques and collectibles, registered and unregistered vintage cars, airplanes, or any monies owed to you by any person or entity, etc)						
I/ J	Description	Fair Market Value	Loan Balance	Monthly payment	Date loan will be paid off	

CHARGE ACCOUNTS AND LINES OF CREDIT (Bank credit cards, lines of credit, revolving charge accounts, etc)						
I/ J	Type of Acct or Card	Name & Address of Creditor	Credit Limit	Amount Owed	Credit Available	Minimum Monthly payment

OTHER DEBTS (Including delinquent taxes)						
I/ J	Owed To	Address	Relationship	Amount Owed	Owed For	Monthly Payment

DISPOSAL OF ASSETS - For the previous 5 year period to the present, have you disposed of any assets or property with a cost or fair market value of more than \$500? If so, provide the following information; provide closing statements for any real estate sold.				
Description of Asset	Date of Transfer	Fair Market Value When Transferred	Consideration Received	Relationship of Transferee to Defendant

INTEREST IN OR BENEFICIARY OF ESTATE OR TRUST - Are you or will you become a beneficiary of any estate or trust? If yes, please also furnish a copy of the instrument creating the trust or estate and the latest accounting of your share interest in and income from the subject estate or trust.			
Name of Trust or Estate	Present Value of Assets	Value of Your Interest	Annual Income Received from this Source

MONTHLY INCOME			NECESSARY MONTHLY EXPENSES	
DEFENDANT	GROSS	NET	Rent or Mortgage	\$
Salary/Wages			Groceries (No. Of people _____)	
Commissions			Utilities Electric	
Business Income			Heating Oil/Gas	
Interest/Dividends			Water/Sewer	
Rental Income			Telephone	
Alimony/Child Support			Transportation	
Social Security			Insurance Auto	
Pensions/Annuities			Health	
Gifts			Homeowners/Rental	
Other (specify)			Life	
SPOUSE	GROSS	NET	Clothing	
Salary/Wages			Alimony/Child Support	
Commissions			Minimum Installment Payments	
Business Income			Other (specify) -	
Interest/Dividends				
Rental Income				
Alimony/Child Support				
Social Security				
Pensions/Annuities				
Gifts				
Other (Specify)				
TOTALS			TOTALS	

ACCOUNTING FOR ILL GOTTEN GAINS AND PROFITS
How long were you engaged in the criminal activity to which you have pled guilty?
Did you make any gains or profits from the criminal activity to which you have pled guilty? If not, why not?
Overall, how much gain or profit did you make from this activity?
If you made gains and profits from your criminal activity, what method did you employ in making gains and profits from your criminal activity?

Specifically, identify the locations of other gains and profits which were made.
Name bank(s), account name(s), and account number(s) where illegal gains and profits were deposited and spent.
Specifically, identify the locations of other gains and profits which were made.
Provide a separate accounting of all gains and profits.

Are you the grantor or donor of any trust, or the trustee or fiduciary for any trust? If yes, please furnish a copy of the instrument creating the trust. Also give the present value of corpus of trust, and any other pertinent information.

Do you receive, or under any circumstances expect to receive, benefits from a claim for compensation or damages, life insurance, legal claim, or from a contingent or future interest in property of any kind (i.e. inheritance, profit-sharing or pension plan)? If so, explain.

Are you or have you ever been involved in bankruptcy proceedings? If so, give date, jurisdiction, case number, and status.

Have you ever been a party to any civil suit? If so, give date, legal jurisdiction, persons involved and explain.

What is the prospect of an increase in value of assets or in present income (Please give a general statement)?

+++++List any and all personal property you own directly or indirectly, individually or jointly with others, corporate or otherwise, with an approximate fair market value of \$500.00 or greater. Describe in detail on Attachment A.

CERTIFICATION

I declare that I have examined the information given in this statement and, to the best of my knowledge and belief, it is true, correct, and complete, and I further declare that I have no assets, owned either directly or indirectly, or income of any nature other than as shown in this statement, including any attachment.

Signature _____ Social Security Number _____ - _____

Date _____

WARNING

False statements are punishable up to five years imprisonment, a fine of \$250,000, or both (18 U.S.C. Section 1001).

- If you have attached additional sheets to this form, you must also sign those sheets.
- Attach a copy of your most recent pay slip to this form.
- Attach copies of the last 3 Federal Income Tax Returns you have filed.

ATTACHMENT A

LIST ALL PERSONAL PROPERTY YOU OWN DIRECTLY OR INDIRECTLY, INDIVIDUALLY OR JOINTLY WITH OTHERS, CORPORATE OR OTHERWISE, WITH AN APPROXIMATE FAIR MARKET VALUE OF \$500 OR GREATER:

Item	Description	Location	Owner	Year Purchased	Original Price	Present Value
Furniture					\$	\$
Furniture					\$	\$
Furniture					\$	\$
Furniture					\$	\$
Furniture					\$	\$
Television					\$	\$
Television					\$	\$
Television					\$	\$
VCR/DVD Player					\$	\$
Camera					\$	\$
Video Recorder					\$	\$
Stereo/CD Player					\$	\$
Electronic Equipment					\$	\$
					\$	\$

Item	Description	Location	Owner	Year Purchased	Original Price	Present Value
Guns					\$	\$
Jewelry					\$	\$
Jewelry					\$	\$
Jewelry					\$	\$
Jewelry					\$	\$
Furs					\$	\$
Antiques					\$	\$
Antiques					\$	\$
Antiques					\$	\$
Precious Items					\$	\$
Collectibles					\$	\$
Collectibles					\$	\$
Coins/ Stamp Collection					\$	\$
Artwork					\$	\$
Artwork					\$	\$
Computers					\$	\$
Computers					\$	\$
Answering Machine					\$	\$
Tools					\$	\$

Item	Description *(Vehicles - include Year, Make, and Model)	Location	Vehicle Ownership/ Indicate if Leased	Purchase/ Leased Price	Loan Balance
*Aircraft				\$	\$
*Boats or Water Craft				\$	\$
*Automobile				\$	\$
*Automobile				\$	\$
*Automobile				\$	\$
*Motorcycle				\$	\$
*Vehicles-other (Including ATVS, Jet-Skis, Snowmobiles)				\$	\$
*Recreation Vehicles (Campers, Motor homes)				\$	\$
Utility Trailer				\$	\$
Mobile Home				\$	\$
Motor Bikes				\$	\$
Vehicles-other				\$	\$
Vehicles-other				\$	\$
Vehicles-other				\$	\$

Item	Description	Location	Owner	Year Purchased	Original Price	Present Value
Satellite TV					\$	\$
Lawn Mower					\$	\$
Animals					\$	\$
Sporting Equipment					\$	\$
Sporting Equipment					\$	\$
Equipment - Other					\$	\$
Hunting Gear					\$	\$
Recreational Equipment (pool table, Pinball Machines)					\$	\$
Swimming Pool					\$	\$
Jacuzzi/Hot Tub					\$	\$
Sauna					\$	\$
Season Tickets					\$	\$
Time Shares					\$	\$
Property-other					\$	\$
Property-other					\$	\$
Property-other					\$	\$
Property-other					\$	\$