

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

RECEIVED

FEB 11 2003

Judge David H. Coar
United States District Court

FEDERAL TRADE COMMISSION,

Plaintiff,

v.

Civ. No.

CSCT, INC., a Canadian corporation;

CSCT, LTD., a British corporation;

JOHN LESLIE ARMSTRONG, individually and
as an officer of CSCT, Ltd.; and

MICHAEL JOHN REYNOLDS, individually and
as an officer of CSCT, Inc., and CSCT, Ltd.

Defendants.

**[REDACTED] TEMPORARY RESTRAINING ORDER WITH ASSET FREEZE AND
OTHER EQUITABLE RELIEF AND ORDER TO SHOW CAUSE WHY A
PRELIMINARY INJUNCTION SHOULD NOT ISSUE**

Plaintiff Federal Trade Commission ("Commission" or "FTC"), having filed its Complaint for a Permanent Injunction and Other Equitable Relief in this matter, pursuant to Section 13(b) of the Federal Trade Commission Act ("FTC Act"), 15 U.S.C. § 53(b), and having moved *ex parte* for a Temporary Restraining Order with Asset Freeze and Other Equitable Relief, and an Order to Show Cause Why a Preliminary Injunction Should Not Issue pursuant to Rule 65 of the Federal Rules of Civil Procedure, Fed. R. Civ. P. 65, and the Court having considered the Complaint, declarations, exhibits and memorandum of law filed in support of such motion, and now being advised in the premises, finds that:

1. This Court has jurisdiction over the subject matter of the case, and there is good cause to believe that the Court will have jurisdiction over the parties;
2. Venue properly lies with this Court;
3. There is good cause to believe that Defendants have engaged in and are likely to engage in acts and practices that violate Sections 5(a) and 12 of the FTC Act, 15 U.S.C. §§ 45(a) and 52, and that the Commission is likely to prevail on the merits of this action;
4. There is good cause to believe that immediate and irreparable damage to the Court's ability to grant effective final relief for consumers in the form of monetary redress will occur from the sale, transfer, assignment, or other disposition or concealment by Defendants of their assets or records unless Defendants are immediately restrained and enjoined by Order of this Court;
5. There is good cause for issuing this Order pursuant to Federal Rule of Civil Procedure 65(b) and for relieving the Plaintiff of the duty to provide Defendants with prior notice of the Plaintiff's motion;
6. Weighing the equities and considering the Plaintiff's likelihood of success, this Order is in the public interest; and
7. No security is required of any agency of the United States for the issuance of a temporary restraining order. *See* Fed. R. Civ. P. 65(c).

DEFINITIONS

1. **"Defendants"** means CSCT, Inc., CSCT, Ltd., Michael John Reynolds, and John Leslie Armstrong, and each of them, by whatever names each may be known.

2. **“Document”** is synonymous in meaning and equal in scope to the term, as defined in Federal Rule of Civil Procedure 34(a), and includes writings, drawings, graphs, charts, photographs, audio and video recordings, computer records, and other data compilations from which information can be obtained and translated, if necessary, through detection devices into reasonably usable form. A draft or non-identical copy is a separate document within the meaning of this term.

3. **“Asset”** or **“Assets”** means any legal or equitable interest in, right to, or claim to, any real and/or personal property, including without limitation, chattels, goods, instruments, equipment, fixtures, general intangibles, leaseholds, mail or other deliveries, inventory, checks, notes, accounts, credits, contracts, receivables, shares of stock, and all cash, wherever located.

4. **“Internet”** means a worldwide system of linked computer networks that use a common protocol (TCP/IP) to deliver and receive information. The Internet includes but is not limited to the following forms of electronic communication: electronic mail and e-mail mailing lists, the World Wide Web, websites, newsgroups, Internet Relay Chat, and file transfer protocols thereon, and remote computer access from anywhere in the world thereto.

5. **“World Wide Web”** (the **“Web”**) means a system used on the Internet for cross-referencing and retrieving information.

6. **“Website”** means a set of electronic documents, usually a home page and subordinate pages, readily viewable on a computer by anyone with access to the Web, standard software, and knowledge of the website’s location or address.

7. **“Material”** means likely to affect a person’s choice of, or conduct regarding, goods or services.

8. **“Person”** means a natural person, an organization or other legal entity, including a corporation, partnership, sole proprietorship, limited liability company, association, cooperative, or any other group or combination acting as an entity.

9. **“Plaintiff”** means the Federal Trade Commission (“Commission”).

10. **“Financial Institution”** means any bank, savings and loan institution, credit union, or any financial depository of any kind, including but not limited to any brokerage house, trustee, broker-dealer, escrow agent, title company, commodity trading company, or precious metal dealer.

11. **“Customer”** means any person who is, has been, or may be required to pay for goods or services offered for sale or sold by Defendants.

I. PROHIBITED BUSINESS ACTIVITIES

IT IS THEREFORE ORDERED that Defendants and their officers, agents, servants, employees, and attorneys, and those persons in active concert or participation with Defendants who receive actual notice of this Order by personal service or otherwise, and each of them, in connection with the advertising, promotion, offering for sale, sale, or provision of any therapy, good, or service, including but not limited to the Zoetron electromagnetic cancer therapy, are hereby temporarily restrained and enjoined from making or assisting in the making of, expressly or by implication, orally or in writing, any false or misleading statement or representation of material fact, including but not limited to the following:

A. Misrepresenting, directly or by implication, that Defendants’ electromagnetic therapy is likely to kill cancerous cells;

B. Misrepresenting, directly or by implication, that Defendants’ electromagnetic therapy is likely to kill cancerous cells without harming healthy cells;

C. Misrepresenting, directly or by implication, the nature of any therapy, product, or service;

D. Misrepresenting, directly or by implication, any material term, condition, or limitation related to the transaction or about the use of any offered therapy, product, or service.

II. DISABLEMENT OF DEFENDANTS' WEBSITES

IT IS FURTHER ORDERED that, pending determination of the Commission's request for a preliminary injunction, Defendants and their officers, agents, servants, employees, and attorneys, and those persons in active concert or participation with Defendants who receive actual notice of this Order by personal service or otherwise, and each of them, and any other person or entity served with a copy of this Order, including any party hosting or storing any web pages or websites for Defendants shall ^{for websites or web pages containing statements} prohibited by Section I of this order,

A. Immediately take whatever steps may be necessary to ensure that any web pages or websites, including but not limited to those operating, in whole or in part, under the names www.csct.com and www.zoetrontherapy.com, cannot be accessed by the public;

B. Prevent the destruction or erasure of any web pages or websites, including but not limited to those operating, in whole or in part, under the names www.csct.com and www.zoetrontherapy.com, by preserving such web pages or websites in the format in which they are currently maintained; and

C. Immediately notify counsel for the FTC of any other web page or website operated or controlled by Defendants.

III. POSTING NOTICE OF LAWSUIT ON WEBSITE

IT IS FURTHER ORDERED that:

A. Immediately upon service of this Order upon them, Defendants, and their officers, agents, servants, employees, and attorneys, and those persons in active concert or participation with Defendants who receive actual notice of this Order by personal service or otherwise, and each of them, and any other person or entity served with a copy of this Order, including any Internet service provider that is currently providing facilities for the Defendants' promotional materials through electronic means or any party hosting or storing any web pages or websites for Defendants, shall promptly take whatever action is necessary to ensure that any web page or website on the World Wide Web containing those promotional materials which is or has been accessible by users of the Web carry only the following statement plus the link information that follows:

The Federal Trade Commission (FTC) has filed a lawsuit charging that CSCT, Inc., CSCT, Ltd., John Leslie Armstrong, and Michael John Reynolds have been engaged in deceptive practices relating to the advertising and offering for sale of a purported cancer therapy. The United States District Court for the Northern District of Illinois has issued a temporary restraining order temporarily prohibiting further sales and promotional activities of CSCT, Inc., CSCT, Ltd., John Leslie Armstrong, and Michael John Reynolds. You may obtain additional information directly from the FTC.

Each page or site carrying this message shall also provide a hypertext link to the FTC home page at www.ftc.gov or other home page designated by counsel for the FTC; and

B. Immediately upon service of this Order upon them, Defendants and their officers, agents, servants, employees, and attorneys, and those persons in active concert or participation with Defendants who receive actual notice of this Order by personal service or otherwise, and each of them, shall e-mail a copy of the statement in Paragraph A above, as well as a notice that further

information is available at the designated FTC home page, to all Defendants' customers on its current e-mail distribution lists.

IV. SUSPENSION OF DEFENDANTS' DOMAIN NAMES

IT IS FURTHER ORDERED that, pending determination of the Commission's request for a preliminary injunction, Network Solutions, Inc., 505 Huntmar Park Drive, Herndon, Virginia 20170, and any other domain name registrar shall:

A. Immediately suspend the registrations of www.csct.com, www.zoetrontherapy.com, and any other domain name registered to Defendants which is used to promote Defendants' cancer therapy; and

B. Immediately notify counsel for the FTC of any other web page or website operated or controlled by Defendants.

V. ASSET FREEZE

IT IS FURTHER ORDERED that Defendants, their officers, agents, servants, employees, attorneys, and all persons or entities directly or indirectly under the control of any of them, including any financial institution, and all other persons or entities acting in concert or participation with any of them who are served with a copy of this Order by personal service, facsimile, or otherwise, are hereby temporarily restrained and enjoined from directly or indirectly:

A. Selling, liquidating, assigning, transferring, converting, loaning, encumbering, pledging, concealing, dissipating, spending, withdrawing, or otherwise disposing of any funds, real or personal property, or other assets or any interest therein, wherever located, including any assets outside the territorial United States, which are:

1. in the actual or constructive possession of any Defendant; or

2. owned or controlled by, or held, in whole or in part for the benefit of, or subject to access by, or belonging to, any Defendant; or

3. in the actual or constructive possession of, or owned or controlled by, or subject to access by, or belonging to, any corporation, partnership, trust or any other entity directly or indirectly owned, managed, or controlled by, or under common control with, any Defendant, including, but not limited to, any assets held by or for any Defendant at any bank or savings and loan institution, or with any broker-dealer, escrow agent, title company, commodity trading company, precious metal dealer, or other financial institution or depository of any kind including, but not limited to, assets at the following banks or any branches thereof:

a. Canadian Imperial Bank of Commerce;

B. Opening or causing to be opened any safe deposit boxes titled in the name of any Defendant, or subject to access by any Defendant;

C. Incurring charges on any credit card issued in the name, singly or jointly, of any Defendant;

D. Transferring any funds or other assets subject to this Order for attorney's fees or living expenses, except from accounts or other assets identified by prior written notice to the FTC; provided that no attorney's fees or living expenses, other than those set forth in Subsection E of this Section V, and only in accordance with the procedures set forth in Subsection E of this Section V, shall be paid from funds or other assets subject to this Order until the financial statements required by Section VIII are provided to counsel for the FTC;

E. Notwithstanding the above, any Defendant may pay from his personal funds reasonable, usual, ordinary, and necessary living expenses and attorney's fees, not to exceed \$1,000, prior to the submission of the financial statements required by Section VIII. No such

expenses, however, shall be paid from funds subject to this Order except from cash on the person of any Defendant, or from an account designated by prior written notice to counsel for the FTC; and

F. The funds, property and assets affected by this Section shall include both existing assets and assets acquired after the effective date of this Order, including without limitation, those acquired by loan or gift. Defendants shall hold all assets, including without limitation, payments, loans, and gifts, received after service of this Order.

VI. RETENTION OF ASSETS AND DOCUMENTS BY THIRD PARTIES

IT IS FURTHER ORDERED that, pending determination of the FTC's request for a preliminary injunction, any financial institution, or any person or other entity served with a copy of this Order shall:

A. Hold and retain within such entity's or person's control, and prohibit the withdrawal, removal, assignment, transfer, pledge, hypothecation, encumbrance, disbursement, dissipation, conversion, sale, liquidation, or other disposal of any funds, documents, property, or other assets held by or under such entity's or person's control:

1. on behalf of, or for the benefit of, any Defendant or other party subject to Section V above;

2. in any account maintained in the name of, or subject to withdrawal by, any Defendant or other party subject to Section V above;

3. that are subject to access or use by, or under the signatory power of, any Defendant or other party subject to Section V above;

B. Deny access to any safe deposit boxes that are either:

1. titled in the name, individually or jointly, of any Defendant or other party subject to Section V above; or

2. subject to access by any Defendant or other party subject to Section V above;

C. Provide to counsel for the FTC, within three (3) days, a statement setting forth:

1. the identification of each account or asset titled in the name, individually or jointly, or held on behalf of, or for the benefit of, any Defendant or other party subject to Section V above, whether in whole or in part;

2. the balance of each such account, or a description of the nature and value of such asset;

3. the identification of any safe deposit box that is either titled in the name of, individually or jointly, or is otherwise subject to access or control by, any Defendant or other party subject to Section V above, whether in whole or in part; and

4. if the account, safe deposit box, or other asset has been closed or removed, the date closed or removed and the balance on said date;

D. The accounts subject to this provision include existing assets and assets deposited after the effective date of this Order. This Section shall not prohibit transfers in accordance with any provision of this Order, or any further order of the Court; and

E. The FTC is granted leave, pursuant to Fed. R. Civ. P. 45, to subpoena documents immediately from any such financial institution, account custodian, or other entity concerning the nature, location, status, and extent of Defendants' assets, as well as compliance with this Order, and such financial institution, account custodian or other entity shall respond to such subpoena within five (5) business days after service.

VII. ACCESS TO RECORDS AND PREMISES

IT IS FURTHER ORDERED that the Defendants shall allow representatives of the Commission immediate access to all premises where Defendants are conducting business or have conducted business and to all premises where Defendants' business records may be located. The purpose of this access shall be to inspect and copy any and all books, records, documents, accounts, and other property owned by or in the possession of the Defendants or their agents. The Commission shall have the discretion to determine the time, manner, and reasonable conditions of such access.

VIII. FINANCIAL STATEMENTS

IT IS FURTHER ORDERED that at least three (3) days prior to the preliminary injunction hearing in this matter, and in no event later than ten (10) calendar days after entry of this Order, each Defendant shall provide to counsel for the Commission:

A. A completed financial statement accurate as of the date of service of this Order upon such Defendant, in the form provided as **Attachment A** for individuals and **Attachment B** for businesses. Attachments A and B are the Department of Treasury – Internal Revenue Service Collection Information Statement for Individuals (Form 433-A), and the corresponding Collection Information Statement for Businesses (Form 433 – B), which can also be found at www.taxes.com/IRS_Forms_433A_and_433B.htm; and

B. A completed statement, verified under oath, of all payments, transfers, or assignments of funds, assets, or property worth \$1,000 or more since January 1, 2002. Such statement shall include: (a) the amount transferred or assigned; (b) the name of each transferee or assignee; (c) the date of the assignment or transfer; (d) the type and amount of consideration paid by or to the Defendant. Each statement shall specify the name and address of each financial institution and

brokerage firm at which the Defendant has accounts or safe deposit boxes. Said statements shall include assets held in foreign as well as domestic accounts.

IX. REPATRIATION OF FOREIGN ASSETS

IT IS FURTHER ORDERED that, within five (5) business days following the service of this Order, Defendants shall:

A. Provide the FTC with a full accounting of all assets, accounts or documents outside of the territory of the United States which are held either: (1) by them; (2) for their benefit; (3) in trust by or for them, individually or jointly; or (4) under their direct or indirect control, individually or jointly;

B. Transfer to the territory of the United States all assets, accounts or documents in foreign countries held either: (1) by them; (2) for their benefit; (3) in trust by or for them, individually or jointly; or (4) under their direct or indirect control, individually or jointly;

C. Hold and retain all repatriated assets, accounts or documents and prevent any transfer, disposition, or dissipation whatsoever of any such assets or documents, except as allowed by Section V of this Order; and

D. Provide the FTC access to Defendants' records and documents held by financial institutions outside the territorial United States, by signing the Consent to Release of Financial Records attached to this Order as **Attachment C**.

X. INTERFERENCE WITH REPATRIATION

IT IS FURTHER ORDERED that Defendants are hereby temporarily restrained and enjoined from taking any action, directly or indirectly, which may result in the encumbrance or dissipation of foreign assets, or in the hindrance of the repatriation required by the preceding Section of this Order, including but not limited to:

A. Sending any statement, letter, fax, e-mail, or wire transmission, or telephoning or engaging in any other act, directly or indirectly, that results in a determination by a foreign trustee or other entity that a “duress” event has occurred under the terms of a foreign trust agreement until such time that all assets have been fully repatriated pursuant to the preceding Section of this Order; and

B. Notifying any trustee, protector or other agent of any foreign trust or other related entities of either the existence of this Order, or of the fact that repatriation is required pursuant to a Court Order, until such time as all assets have been fully repatriated pursuant to the preceding Section of this Order.

**XI. EXPEDITED DISCOVERY AS TO EXISTENCE
AND LOCATION OF ASSETS AND DOCUMENTS**

IT IS FURTHER ORDERED that, in light of the need to promptly ascertain the possible consumer injury caused by Defendants’ deceptive practices as alleged by the FTC, the identities and locations of Defendants and their participating associates, the need to identify assets and documents subject to this Order, and the need to monitor compliance with this Order, the FTC is granted leave to conduct certain expedited discovery, and that, commencing with the time and date of this Order, in lieu of the time periods, notice provisions, and other requirements of Rules 26, 30, 34, and 45 of the Federal Rules of Civil Procedure, expedited discovery shall proceed as follows:

A. Pursuant to Fed. R. Civ. P. 30 and 45, the FTC may take depositions upon oral examination of any person or entity, including any Defendant or third party, regarding Defendants’ identities, their whereabouts; the nature, location, status and extent of their assets; the status and location of Defendants’ clinics; the status and location of documents reflecting Defendants’ business transactions; and compliance with this Order, on two days notice of any such deposition. This

Subsection shall not be construed in any manner to preclude the right of Plaintiff to take subsequent depositions of the same witnesses on the merits of this action. Any deposition taken pursuant to this Subsection is in addition to, and not subject to, the presumptive limits on depositions set forth in Fed. R. Civ. P. 30(a)(2)(A); and

B. Pursuant to Fed. R. Civ. P. 34(b) and 45, the Defendants, their participating associates, and any other person or entity shall produce documents relating to the above subjects that are requested by the FTC within five (5) days of service of such request, with production of documents made to such person or place as counsel for the FTC may direct in writing.

XII. RECORD KEEPING PROVISIONS

IT IS FURTHER ORDERED that Defendants, and their participating associates, and those persons in active concert or participation with them who receive actual notice of this Order by personal service, facsimile, or otherwise, are hereby enjoined from:

A. Destroying, erasing, mutilating, concealing, altering, transferring or otherwise disposing of, in any manner, directly or indirectly, any machine used to administer any therapy, any documents related to any service or therapy, or any documents related to any customer who has been treated with any therapy advertised, marketed, promoted, offered for sale, distributed, sold or purchased by Defendants;

B. Destroying, erasing, mutilating, concealing, altering, transferring or otherwise disposing of, in any manner, directly or indirectly, contracts, agreements, customer files, customer lists, customer addresses and telephone numbers, correspondence, advertisements, brochures, sales material, training material, sales presentations, documents evidencing or referring to Defendants' products or services, data, computer tapes, disks, or other computerized records, books, written or printed records, handwritten notes, telephone logs, "verification" or "compliance" tapes or other

audio or video tape recordings, receipt books, invoices, postal receipts, ledgers, personal and business canceled checks and check registers, bank statements, appointment books, copies of federal, state or local business or personal income or property tax returns, and other documents or records of any kind, including electronically-stored materials, that relate to the business practices or business or personal finances of Defendants or other entities directly or indirectly under the control of Defendants; and

C. Failing to create and maintain books, records, and accounts which, in reasonable detail, accurately, fairly, and completely reflect the incomes, assets, disbursements, transactions and use of monies by Defendants or other entities directly or indirectly under the control of Defendants.

XIII. NOTICE TO EMPLOYEES

IT IS FURTHER ORDERED that Defendants shall immediately provide a copy of this Order to each affiliate, partner, division, sales entity, successor, assign, officer, director, employee, independent contractor, Web master, Internet service provider, domain name registrar, web host, agent, attorney, and/or representative of any Defendant and shall, within ten (10) days from the date of entry of this Order, serve upon counsel for the Commission a sworn statement that they have complied with this provision of this Order, which statement shall include the names and addresses of each such person or entity who has received a copy of the Order.

XIV. CONSUMER REPORTS

IT IS FURTHER ORDERED that pursuant to Section 604(1) of the Fair Credit Reporting Act, 15 U.S.C. § 1681b(1), any consumer reporting agency may furnish a consumer report concerning any Defendant to the FTC.

XV. CREATION OF OTHER BUSINESSES

IT IS FURTHER ORDERED that Defendants are hereby temporarily restrained and enjoined from creating, operating, or controlling any business entity, whether newly-formed or previously inactive, including any partnership, limited partnership, joint venture, sole proprietorship, or corporation, without first providing the Commission with a written statement disclosing: (1) the name of the business entity; (2) the address and telephone number of the business entity; (3) the names of the business entity's officers, directors, principals, managers, and employees; and (4) a detailed description of the business entity's intended activities.

XVI. WRIT OF ASSISTANCE BY OTHER LAW ENFORCEMENT PERSONNEL

IT IS FURTHER ORDERED that other law enforcement personnel may aid and assist the Commission in serving the Court's Order on Defendants and may further enforce this Order.

XVII. ORDER TO SHOW CAUSE

IT IS FURTHER ORDERED, pursuant to Fed. R. Civ. P. 65(b), Defendants shall appear before this Court, on the 14th floor of the Dirksen Federal Courthouse, 219 S. Dearborn, Chicago Illinois, Courtroom _____, on the 21st day of February, 2003, at 9:30 a.m. to show cause, if any there be, why this Court should not enter a preliminary injunction, pending final ruling on the Complaint, against Defendants enjoining them from further violations of Sections 5(a) and 12 of the FTC Act, 15 U.S.C. §§ 45(a) and 52, continuing the freeze of their assets, and imposing such additional relief as may be appropriate.

XVIII. SERVICE OF PLEADINGS, MEMORANDA, AND OTHER EVIDENCE

IT IS FURTHER ORDERED that Defendants shall file any answering affidavits, pleadings, expert reports or declarations, or legal memoranda with the Court and serve the same on counsel for the FTC no later than three (3) business days prior to the preliminary injunction hearing in this

matter. The FTC may file responsive or supplemental pleadings, materials, affidavits, or memoranda with the Court and serve the same on counsel for Defendants no later than one (1) business day prior to the preliminary injunction hearing in this matter, provided that service shall be performed by personal or overnight delivery or by facsimile, and documents shall be delivered so that they shall be received by the other parties no later than 4:00 p.m. (CDT) on the appropriate dates listed in this Subsection.

XIX. MOTION FOR ORAL ARGUMENT; WITNESS IDENTIFICATION

IT IS FURTHER ORDERED that the question of whether this Court should enter a preliminary injunction pursuant to Rule 65 of the Federal Rules of Civil Procedure enjoining the Defendants during the pendency of this action shall be resolved on the pleadings, declarations, exhibits, and memoranda filed by and oral argument of the parties. Live testimony shall be heard only on further order of this Court or on motion filed with the Court and served on counsel for the other parties at least three (3) business days prior to the preliminary injunction hearing in this matter. Such motion shall set forth the name, address, and telephone number of each proposed witness, a detailed summary or affidavit revealing the substance of each proposed witness' expected testimony, and an explanation of why the taking of live testimony would be helpful to this Court. Any papers opposing a timely motion to present live testimony or to present live testimony in response to another party's timely motion to present live testimony shall be filed with this Court and served on the other parties at least two (2) business days prior to the preliminary injunction hearing in this matter, provided that service shall be performed by personal or overnight delivery or by facsimile, and documents shall be delivered so that they shall be received by the other parties no later than 4:00 p.m. (CDT) on the appropriate dates listed in this Subsection.

XX. CORRESPONDENCE WITH PLAINTIFF

IT IS FURTHER ORDERED that for the purposes of this Order, all service on and correspondence to the FTC shall be addressed to Katherine Romano Schnack, Esq. at the following address: Federal Trade Commission, 55 East Monroe Street, Suite 1860, Chicago, Illinois 60603, (312) 960-5600 (fax number).

XXI. SERVICE OF THIS ORDER

IT IS FURTHER ORDERED that copies of this Order may be served by facsimile transmission, personal or overnight delivery, or U.S. Mail, by agents and employees of the FTC or any state, federal or international law enforcement agency or by private process server, on: (1) Defendants; (2) any financial institution, entity, or person that holds, controls, or maintains custody of any account or asset of any Defendant, or that has held, controlled or maintained custody of any account or asset of any Defendant; or (3) any other person or entity that may be subject to any provision of this Order.

XXII. EXPIRATION OF THIS ORDER

IT IS FURTHER ORDERED that the Temporary Restraining Order granted herein shall expire on February 21, 2003, at 11:59 p.m., unless within such time the Order, for good cause shown, is extended, or unless, as to any Defendant, the Defendant consents that it should be extended for a longer period of time.

XXIII. RETENTION OF JURISDICTION

IT IS FURTHER ORDERED that this Court shall retain jurisdiction of this matter for all purposes.

IT IS SO ORDERED, this 11th day of February, 2003, at 9:20a.m.

David H. Coar

United States District Judge



Collection Information Statement for Wage Earners and Self-Employed Individuals

Department of the Treasury
Internal Revenue Service

www.irs.gov

Form 433-A (Rev. 5-2001)
Catalog Number 20312N

Complete all entry spaces with the most current data available.

Important! Write "N/A" (not applicable) in spaces that do not apply. We may require additional information to support "N/A" entries.

Failure to complete all entry spaces may result in rejection or significant delay in the resolution of your account.

Section 1 Personal Information

1. Full Name(s) _____ 1a. Home Telephone (____) _____ Best Time To Call: _____ am _____ pm
(Enter Hour)

Street Address _____ 2. Marital Status:
City _____ State _____ Zip _____ Married Separated
County of Residence _____ Unmarried (single, divorced, widowed)
How long at this address? _____

3. Your Social Security No. (SSN) _____ 3a. Your Date of Birth (mm/dd/yyyy) _____
4. Spouse's Social Security No. _____ 4a. Spouse's Date of Birth (mm/dd/yyyy) _____

5. Own Home Rent Other (specify, i.e. share rent, live with relative) _____

6. List the dependents you can claim on your tax return: (Attach sheet if more space is needed.)

First Name	Relationship	Age	Does this person live with you?	First Name	Relationship	Age	Does this person live with you?
_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Check this box when all spaces in Sect. 1 are filled in.

Section 2 Your Business Information

7. Are you or your spouse self-employed or operate a business? (Check "Yes" if either applies)

No Yes If yes, provide the following information:

7a. Name of Business _____ 7c. Employer Identification No., if available: _____
7b. Street Address _____ 7d. Do you have employees? No Yes
City _____ State _____ Zip _____ 7e. Do you have accounts/notes receivable? No Yes
If yes, please complete Section 8 on page 5.

Check this box when all spaces in Sect. 2 are filled in and attachments provided.



ATTACHMENTS REQUIRED: Please include proof of self-employment income for the prior 3 months (e.g., invoices, commissions, sales records, income statement).

Section 3 Employment Information

8. Your Employer _____ 9. Spouse's Employer _____
Street Address _____ Street Address _____
City _____ State _____ Zip _____ City _____ State _____ Zip _____
Work telephone no. (____) _____ Work telephone no. (____) _____
May we contact you at work? No Yes May we contact you at work? No Yes
8a. How long with this employer? _____ 9a. How long with this employer? _____
8b. Occupation _____ 9b. Occupation _____

Check this box when all spaces in Sect. 3 are filled in and attachments provided.



ATTACHMENTS REQUIRED: Please provide proof of gross earnings and deductions for the past 3 months from each employer (e.g., pay stubs, earnings statements). If year-to-date information is available, send only 1 such statement as long as a minimum of 3 months is represented.

Section 4 Other Income Information

10. Do you receive income from sources other than your own business or your employer? (Check all that apply.)

Pension Social Security Other (specify, i.e. child support, alimony, rental) _____

Check this box when all spaces in Sect. 4 are filled in and attachments provided.



ATTACHMENTS REQUIRED: Please provide proof of pension/social security/other income for the past 3 months from each payor, including any statements showing deductions. If year-to-date information is available, send only 1 such statement as long as a minimum of 3 months is represented.

Name _____ SSN _____

Section 5
 Banking, Investment, Cash, Credit, and Life Insurance Information
 Complete all entry spaces with the most current data available.

11. CHECKING ACCOUNTS. List all checking accounts. (If you need additional space, attach a separate sheet.)

Type of Account	Full Name of Bank, Savings & Loan, Credit Union or Financial Institution	Bank Routing No.	Bank Account No.	Current Account Balance
11a. <u>Checking</u>	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
11b. <u>Checking</u>	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
11c. Total Checking Account Balances				_____

12. OTHER ACCOUNTS. List all accounts, including brokerage, savings, and money market, not listed on line 11.

Type of Account	Full Name of Bank, Savings & Loan, Credit Union or Financial Institution	Bank Routing No.	Bank Account No.	Current Account Balance
12a. _____	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
12b. _____	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
12c. Total Other Account Balances				_____



ATTACHMENTS REQUIRED: Please include your current bank statements (checking, savings, money market, and brokerage accounts) for the past three months for all accounts.

13. INVESTMENTS. List all investment assets below. Include stocks, bonds, mutual funds, stock options, certificates of deposits, and retirement assets such as IRAs, Keogh, and 401(k) plans. (If you need additional space, attach a separate sheet.)

Name of Company	Number of Shares / Units	Current Value	Loan Amount	Used as collateral on loan?
13a. _____	_____	\$ _____	\$ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
13b. _____	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
13c. _____	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
13d. Total Investments		_____	_____	_____

14. CASH ON HAND. Include any money that you have that is not in the bank.

14a. Total Cash on Hand \$ _____

15. AVAILABLE CREDIT. List all lines of credit, including credit cards.

Full Name of Credit Institution	Credit Limit	Amount Owed	Available Credit
15a. Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
15b. Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
15c. Total Credit Available			_____

Name _____ SSN _____

Section 5
continued

16. LIFE INSURANCE. Do you have life insurance with a cash value? No Yes

(Term Life insurance does not have a cash value.)

If yes:

16a. Name of Insurance Company _____

16b. Policy Number(s) _____

16c. Owner of Policy _____

16d. Current Cash Value \$ _____ 16e. Outstanding Loan Balance \$ _____

Subtract "Outstanding Loan Balance" line 16e from "Current Cash Value" line 16d = 16f \$ _____



ATTACHMENTS REQUIRED: Please include a statement from the life insurance companies that includes type and cash/loan value amounts. If currently borrowed against, include loan amount and date of loan.

Section 6
Other Information

17. OTHER INFORMATION. Respond to the following questions related to your financial condition: (Attach sheet if you need more space.)

17a. Are there any garnishments against your wages? No Yes
If yes, who is the creditor? _____ Date creditor obtained judgement _____ Amount of debt \$ _____

17b. Are there any judgments against you? No Yes
If yes, who is the creditor? _____ Date creditor obtained judgement _____ Amount of debt \$ _____

17c. Are you a party in a lawsuit? No Yes
If yes, amount of suit \$ _____ Possible completion date _____ Subject matter of suit _____

17d. Did you ever file bankruptcy? No Yes
If yes, date filed _____ Date discharged _____

17e. In the past 10 years did you transfer any assets out of your name for less than their actual value? No Yes
If yes, what asset? _____ Value of asset at time of transfer \$ _____
When was it transferred? _____ To whom was it transferred? _____

17f. Do you anticipate any increase in household income in the next two years? No Yes
If yes, why will the income increase? _____ (Attach sheet if you need more space.)
How much will it increase? \$ _____

17g. Are you a beneficiary of a trust or an estate? No Yes
If yes, name of the trust or estate _____ Anticipated amount to be received \$ _____
When will the amount be received? _____

17h. Are you a participant in a profit sharing plan? No Yes
If yes, name of plan _____ Value in plan \$ _____

Section 7
Assets and Liabilities

18. PURCHASED AUTOMOBILES, TRUCKS AND OTHER LICENSED ASSETS. Include boats, RV's, motorcycles, trailers, etc. (If you need additional space, attach a separate sheet.)

Description (Year, Make, Model, Mileage)	<input checked="" type="checkbox"/> Current Value	Current Loan Balance	Name of Lender	Purchase Date	Amount of Monthly Payment
18a. Year _____ Make/Model _____ Mileage _____	_____	_____	_____	_____	\$ _____
18b. Year _____ Make/Model _____ Mileage _____	_____	_____	_____	_____	\$ _____
18c. Year _____ Make/Model _____ Mileage _____	_____	_____	_____	_____	\$ _____

Name _____ SSN _____

Section 7
Continued

19. LEASED AUTOMOBILES, TRUCKS AND OTHER LICENSED ASSETS. Include boats, RV's, motorcycles, trailers, etc. (If you need additional space, attach a separate sheet.)

Description (Year, Make, Model)	Lease Balance	Name and Address of Lessor	Lease Date	Amount of Monthly Payment
19a. Year _____ Make/Model _____	_____	_____	_____	\$ _____
19b. Year _____ Make/Model _____	_____	_____	_____	\$ _____



ATTACHMENTS REQUIRED: Please include your current statement from lender with monthly car payment amount and current balance of the loan for each vehicle purchased or leased.

20. REAL ESTATE. List all real estate you own. (If you need additional space, attach a separate sheet.)

Street Address, City, State, Zip, and County	Date Purchased	Purchase Price	<input checked="" type="checkbox"/> Current Value	Loan Balance	Name of Lender or Lien Holder	Amount of Monthly Payment	*Date of Final Payment
20a. _____	_____	\$ _____	_____	_____	_____	\$ _____	_____
20b. _____	_____	\$ _____	_____	_____	_____	\$ _____	_____



ATTACHMENTS REQUIRED: Please include your current statement from lender with monthly payment amount and current balance for each piece of real estate owned.

21. PERSONAL ASSETS. List all Personal assets below. (If you need additional space, attach separate sheet.)

Furniture/Personal Effects includes the total current market value of your household such as furniture and appliances. *Other Personal Assets* includes all artwork, jewelry, collections (coin/gun, etc.), antiques or other assets.

Description	<input checked="" type="checkbox"/> Current Value	Loan Balance	Name of Lender	Amount of Monthly Payment	*Date of Final Payment
21a. Furniture/Personal Effects	_____	_____	_____	\$ _____	_____
Other: (List below)					
21b. Artwork	_____	_____	_____	\$ _____	_____
21c. Jewelry	_____	_____	_____	_____	_____
21d. _____	_____	_____	_____	_____	_____
21e. _____	_____	_____	_____	_____	_____

22. BUSINESS ASSETS. List all business assets and encumbrances below, include Uniform Commercial Code (UCC) filings. (If you need additional space, attach a separate sheet.) *Tools used in Trade or Business* includes the basic tools or books used to conduct your business, excluding automobiles. *Other Business Assets* includes any other machinery, equipment, inventory or other assets.

Description	<input checked="" type="checkbox"/> Current Value	Loan Balance	Name of Lender	Amount of Monthly Payment	*Date of Final Payment
22a. Tools used in Trade/Business	_____	_____	_____	\$ _____	_____
Other: (List below)					
22b. Machinery	_____	_____	_____	\$ _____	_____
22c. Equipment	_____	_____	_____	_____	_____
22d. _____	_____	_____	_____	_____	_____
22e. _____	_____	_____	_____	_____	_____

Current Value: Indicate the amount you could sell the asset for today.
***Date of Final Payment:** Enter the date the loan or lease will be fully paid.

Name _____ SSN _____

Section 8
Accounts/Notes Receivable

Use only if needed.
Check this box if Section 8 not needed.

23. ACCOUNTS/NOTES RECEIVABLE. List all accounts separately, including contracts awarded, but not started. (If you need additional space, attach a separate sheet.)

Description	Amount Due	Date Due	Age of Account
23a. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23b. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23c. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23d. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23e. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23f. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23g. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23h. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23i. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23j. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23k. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
23l. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days

Add "Amount Due" from lines 23a through 23l = 23m [REDACTED]

Name _____ SSN _____

Section 9
Monthly
Income and
Expenses
Analysis

Total Income		Total Living Expenses	
Source	Gross Monthly	Expense Items ⁴	Actual Monthly
24. Wages (Yourself) ¹	\$ _____	35. Food, Clothing and Misc. ⁵	\$ _____
25. Wages (Spouse) ¹	_____	36. Housing and Utilities ⁶	_____
26. Interest - Dividends	_____	37. Transportation ⁷	_____
27. Net Income from Business ²	_____	38. Health Care	_____
28. Net Rental Income ³	_____	39. Taxes (Income and FICA)	_____
29. Pension/Social Security (Yourself)	_____	40. Court ordered payments	_____
30. Pension/Social Security (Spouse)	_____	41. Child/dependent care	_____
31. Child Support	_____	42. Life Insurance	_____
32. Alimony	_____	43. Other secured debt	_____
33. Other	_____	44. Other expenses	_____
34. Total Income	_____	45. Total Living Expenses	_____

¹ Wages, salaries, pensions, and social security: Enter your gross monthly wages and/or salaries. Do not deduct withholding or allotments you elect to take out of your pay, such as insurance payments, credit union deductions, car payments etc. To calculate your gross monthly wages and/or salaries:

- If paid weekly - multiply weekly gross wages by 4.3. Example: \$425.89 x 4.3 = \$1,831.33
- If paid bi-weekly (every 2 weeks) - multiply bi-weekly gross wages by 2.17. Example: \$972.45 x 2.17 = \$2,110.22
- If paid semi-monthly (twice each month) - multiply semi-monthly gross wages by 2. Example: \$856.23 x 2 = \$1,712.46

² Net Income from Business: Enter your monthly net business income. This is the amount you earn after you pay ordinary and necessary monthly business expenses. This figure should relate to the yearly net profit from your Form 1040 Schedule C. If it is more or less than the previous year, you should attach an explanation. If your net business income is a loss, enter "0". Do not enter a negative number.

³ Net Rental Income: Enter your monthly net rental income. This is the amount you earn after you pay ordinary and necessary monthly rental expenses. If your net rental income is a loss, enter "0". Do not enter a negative number.

⁴ Expenses not generally allowed: We generally do not allow you to claim tuition for private schools, public or private college expenses, charitable contributions, voluntary retirement contributions, payments on unsecured debts such as credit card bills, cable television and other similar expenses. However, we may allow these expenses, if you can prove that they are necessary for the health and welfare of you or your family or for the production of income.

⁵ Food, Clothing and Misc.: Total of clothing, food, housekeeping supplies and personal care products for one month.

⁶ Housing and Utilities: For your principal residence: Total of rent or mortgage payment. Add the average monthly expenses for the following: property taxes, home owner's or renter's insurance, maintenance, dues, fees, and utilities. Utilities include gas, electricity, water, fuel, oil, other fuels, trash collection and telephone.

⁷ Transportation: Total of lease or purchase payments, vehicle insurance, registration fees, normal maintenance, fuel, public transportation, parking and tolls for one month.

ATTACHMENTS REQUIRED: Please include:

- A copy of your last Form 1040 with all Schedules.
- Proof of all current expenses that you paid for the past 3 months, including utilities, rent, insurance, property taxes, etc.
- Proof of all non-business transportation expenses (e.g., car payments, lease payments, fuel, oil, insurance, parking, registration).
- Proof of payments for health care, including health insurance premiums, co-payments, and other out-of-pocket expenses, for the past 3 months.
- Copies of any court order requiring payment and proof of such payments (e.g., cancelled checks, money orders, earning statements showing such deductions) for the past 3 months.



Failure to complete all entry spaces may result in rejection or significant delay in the resolution of your account.

Certification: Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct and complete.

Your Signature _____

Spouse's Signature _____

Date _____



Collection Information Statement for Businesses

Department of the Treasury
Internal Revenue Service

www.irs.gov

Form 433-B (Rev. 5-2001)
Catalog Number 16649P

Complete all entry spaces with the most current data available.

Important! Write "N/A" (not applicable) in spaces that do not apply. We may require additional information to support "N/A" entries.

Failure to complete all entry spaces may result in rejection or significant delay in the resolution of your account.

Section 1 Business Information

1a. Business Name _____
Business Street Address _____
City _____ State _____ Zip _____
County _____

1b. Business Telephone (____) _____

2a. Employer Identification No. (EIN) _____

2b. Type of Entity (Check appropriate box below)
 Partnership Corporation Other _____

2c. Type of Business _____

3a. Contact Name _____
3b. Contact's Business Telephone (____) _____
Extension _____
Best Time To Call _____ am _____ pm (Enter Hour)

3c. Contact's Home Telephone (____) _____
Best Time To Call _____ am _____ pm (Enter Hour)

3d. Contact's Other Telephone (____) _____
Telephone Type (i.e. fax, cellular, pager) _____

3e. Contact's E-mail Address _____

Check this box when all spaces in Sect. 1 are filled in.

Section 2 Business Personnel and Contacts

4. PERSON RESPONSIBLE FOR DEPOSITING PAYROLL TAXES

4a. Full Name _____ Title _____ Social Security Number _____ | _____ | _____
Home Street Address _____ Home Telephone (____) _____
City _____ State _____ Zip _____ Ownership Percentage & Shares or Interest _____

5. PARTNERS, OFFICERS, MAJOR SHAREHOLDERS, ETC.

5a. Full Name _____ Title _____ Social Security Number _____ | _____ | _____
Home Street Address _____ Home Telephone (____) _____
City _____ State _____ Zip _____ Ownership Percentage & Shares or Interest _____

5b. Full Name _____ Title _____ Social Security Number _____ | _____ | _____
Home Street Address _____ Home Telephone (____) _____
City _____ State _____ Zip _____ Ownership Percentage & Shares or Interest _____

5c. Full Name _____ Title _____ Social Security Number _____ | _____ | _____
Home Street Address _____ Home Telephone (____) _____
City _____ State _____ Zip _____ Ownership Percentage & Shares or Interest _____

5d. Full Name _____ Title _____ Social Security Number _____ | _____ | _____
Home Street Address _____ Home Telephone (____) _____
City _____ State _____ Zip _____ Ownership Percentage & Shares or Interest _____

Check this box when all spaces in Sect. 2 are filled in.

Section 3 Accounts/Notes Receivable

6. ACCOUNTS/NOTES RECEIVABLE. List all contracts separately, including contracts awarded, but not started.

Description	Amount Due	Date Due	Age of Account
6a. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6b. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6a + 6b = 6c		_____	
Amount from Page 6 +		_____	
6q. Total Accounts/Notes Receivable =		_____	

Check this box when all spaces in Sect. 3 are filled in.

Business Name _____ EIN _____

Section 4
Other Financial Information

7. OTHER FINANCIAL INFORMATION. Respond to the following business financial questions.
- 7a. Does this business have other business relationships (e.g. subsidiary or parent, corporation, partnership, etc.)? No Yes
If yes, list related EIN _____ Additional EIN _____
- 7b. Does anyone (e.g. officer, stockholder, partner or employees) have an outstanding loan borrowed from the business? No Yes
If yes, amount of loan \$ _____ Date of loan _____ Current balance \$ _____
- 7c. Are there any judgments or liens against your business? No Yes
If yes, who is the creditor? _____ Date creditor obtained judgment/lien _____ Amount of debt \$ _____
- 7d. Is your business a party in a lawsuit? No Yes
If yes, amount of suit \$ _____ Possible completion date _____ Subject matter of suit _____
- 7e. Has your business ever filed bankruptcy? No Yes
If yes, date filed _____ Date discharged _____ Petition No. _____
- 7f. In the past 10 years have you transferred any assets from your business name for less than their actual value? No Yes
If yes, what asset? _____ Value of asset at time of transfer \$ _____
When was it transferred? _____ To whom or where was it transferred? _____
- 7g. Do you anticipate any increase in business income (e.g. contracts bid but not yet awarded)? No Yes
If yes, why will the income increase? _____ (Attach sheet if you need additional space.)
How much will it increase? _____ When will the business income increase? _____
- 7h. Is your business a beneficiary of a trust, an estate or a life insurance policy? No Yes
If yes, name of the trust, estate or policy? _____ Anticipated amount to be received? _____
When will the amount be received? _____

Section 5
Business Assets

8. PURCHASED AUTOMOBILES, TRUCKS AND OTHER LICENSED ASSETS. Include boats, RV's, motorcycles, trailers, etc. (If you need additional space, attach a separate sheet.)
- | Description
(Year, Make, Model, Mileage) | <input checked="" type="checkbox"/> Current Value | Loan Balance | Name of Lender | Purchase Date | Amount of Monthly Payment |
|---|---|--------------|----------------|---------------|---------------------------|
| 8a. Year _____
Make/Model _____
Mileage _____ | _____ | _____ | _____ | _____ | \$ _____ |
| 8b. Year _____
Make/Model _____
Mileage _____ | _____ | _____ | _____ | _____ | \$ _____ |
| 8c. Year _____
Make/Model _____
Mileage _____ | _____ | _____ | _____ | _____ | \$ _____ |
9. LEASED AUTOMOBILES, TRUCKS AND OTHER LICENSED ASSETS. Include boats, RV's, motorcycles, trailers, etc. (If you need additional space, attach a separate sheet.)
- | Description
(Year, Make, Model) | Lease Balance | Name of Lessor | Lease Date | Amount of Monthly Payment |
|------------------------------------|---------------|----------------|------------|---------------------------|
| 9a. Year _____
Make/Model _____ | _____ | _____ | _____ | \$ _____ |
| 9b. Year _____
Make/Model _____ | _____ | _____ | _____ | \$ _____ |



ATTACHMENTS REQUIRED: Please include your current statement from lender with monthly car payment amount and current balance of the loan for each vehicle purchased or leased.

Business Name _____ EIN _____

Section 5

continued

Current value

including

improvements

to the

date of final

payment

and/or date

of sale or

other date

when the

property was

acquired


or

completed

the 11)

10. REAL ESTATE. List all real estate owned by the business. (If you need additional space, attach a separate sheet.)

Street Address, City, State, Zip, and County	Date Purchased	Purchase Price	<input checked="" type="checkbox"/> Current Value	Loan Balance	Name of Lender or Lien Holder	Amount of Monthly Payment	*Date of Final Payment
10a. _____	_____	\$ _____	_____	_____	_____	\$ _____	_____
10b. _____	_____	\$ _____	_____	_____	_____	\$ _____	_____

 **ATTACHMENTS REQUIRED:** Please include your current statement from lender with monthly payment amount and current balance for each piece of real estate owned.

11. BUSINESS ASSETS. List all business assets and encumbrances below, include Uniform Commercial Code (UCC) filings. (If you need additional space, attach a separate sheet.) Note: If attaching a depreciation schedule, the attachment must include all of the information requested below.

Check this box if you are attaching a depreciation schedule for machinery/equipment in part or completing line 11)

Description	<input checked="" type="checkbox"/> Current Value	Loan Balance	Name of Lender	Amount of Monthly Payment	*Date of Final Payment
11a. Machinery	_____	_____	_____	\$ _____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Equipment	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Merchandise	_____	_____	_____	_____	_____
Other Assets: (List below)	_____	_____	_____	_____	_____
11b. _____	_____	_____	_____	\$ _____	_____
11c. _____	_____	_____	_____	_____	_____

 **ATTACHMENTS REQUIRED:** Please include your current statement from lender with monthly payment amount and current loan balance for assets listed which have an encumbrance.

Section 6

Investment

Banking and

Other

Information

12. INVESTMENTS. List all investment assets below. Include stocks, bonds, mutual funds, stock options and certificates of deposits.


Name of Company	Number of Shares / Units	<input checked="" type="checkbox"/> Current Value	Loan Amount	Used as collateral on loan?
12a. _____	_____	\$ _____	\$ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
12b. _____	_____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
12c. Total Investments		_____	_____	

Business Name _____ EIN _____

Section 6
Continued

Complete all
empty spaces
with the most
current data
available.


13. BANK ACCOUNTS. List all checking and savings accounts. (If you need additional space, attach a separate sheet.)

Type of Account	Full Name of Bank, Savings & Loan, Credit Union or Financial Institution	Bank Routing No.	Bank Account No.	Current Account Balance
13a. <u>Checking</u>	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
13b. <u>Checking</u>	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
13c. <u>Savings</u>	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
13d. Total Bank Account Balances				



ATTACHMENTS REQUIRED: Please include your current bank statements (checking and savings) for the past three months for all accounts.

14. OTHER ACCOUNTS. List all accounts including brokerage accounts, money market, additional checking and savings accounts not listed on line #13 and any other accounts not listed in this section.

Type of Account	Full Name of Bank, Savings & Loan, Credit Union or Financial Institution	Bank Routing No.	Bank Account No.	Current Account Balance
14a. _____	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
14b. _____	Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
14c. Total Other Account Balances				




ATTACHMENTS REQUIRED: Please include your current bank statements (checking, savings, money market, and brokerage accounts) for the past three months for all accounts.

15. CASH ON HAND. Include any money that you have that is not in the bank.

15a. Total Cash on Hand 

16. AVAILABLE CREDIT. List all lines of credit, including credit cards.

Full Name of Credit Institution	Credit Limit	Amount Owed	Available Credit
16a. Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
16b. Name _____ Street Address _____ City/State/Zip _____	_____	_____	\$ _____
16c. Total Credit Available			

Business Name _____

EIN _____

Seated
 Legally
 present and
 authorized
 to sign for
 the business
 on behalf of
 the business
 owner

17. The following information applies to income and expenses from your most recently filed Form 1120 or Form 1065.
 Fiscal Year Period _____ to _____

18. Accounting Method Used: Cash Accrual

The information included on lines 19 through 39 should reconcile to your business federal tax return.

Total Income		Total Expenses	
Source	Gross Monthly	Expense Items	Actual Monthly
19. Gross Receipts	\$ _____	27. Materials Purchased ¹	\$ _____
20. Gross Rental Income	_____	28. Inventory Purchased ²	_____
21. Interest	_____	29. Gross Wages & Salaries	_____
22. Dividends	_____	30. Rent	_____
Other Income (specify in lines 23-25)	_____	31. Supplies ³	_____
23. _____	_____	32. Utilities / Telephone ⁴	_____
24. _____	_____	33. Vehicle Gasoline / Oil	_____
25. _____	_____	34. Repairs & Maintenance	_____
(Add lines 19 through 25)	_____	35. Insurance	_____
26. TOTAL INCOME	_____	36. Current Taxes ⁵	_____
		Other Expenses (Include installment payments, specify in lines 37-38)	
		37. _____	
		38. _____	
		(Add lines 27 through 38)	
		39. TOTAL EXPENSES	_____

- ¹ **Materials Purchased:** Materials are items directly related to the production of a product or service.
- ² **Inventory Purchased:** Goods bought for resale.
- ³ **Supplies:** Supplies are items used in your business that are consumed or used up within one year, this could be the cost of books, office supplies, professional instruments, etc.
- ⁴ **Utilities:** Utilities include gas, electricity, water, fuel, oil, other fuels, trash collection and telephone.
- ⁵ **Current Taxes:** Real estate, state and local income tax, excise, franchise, occupational, personal property, sales and the employer's portion of employment taxes.



Failure to complete all entry spaces may result in rejection or significant delay in the resolution of your account.

Certification: Under penalties of perjury, I declare that to the best of my knowledge and belief this statement of assets, liabilities, and other information is true, correct and complete.

Print Name _____

Title _____

 Your Signature

Date _____

Business Name _____ EIN _____

Section 3
Accounts
Notes
Receivable
Continued
Check the
box if this
page is not
needed.

ACCOUNTS/NOTES RECEIVABLE CONTINUATION PAGE. List all contracts separately, including contracts awarded, but not started. (If you need additional space, copy this page and attach to the 433-B package.)

Description	Amount Due	Date Due	Age of Account
6d. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6e. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6f. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6g. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6h. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6i. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6j. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6k. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6l. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6m. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6n. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days
6o. Name _____ Street Address _____ City/State/Zip _____	\$ _____	_____	<input type="checkbox"/> 0 - 30 days <input type="checkbox"/> 30 - 60 days <input type="checkbox"/> 60 - 90 days <input type="checkbox"/> 90+ days

Add lines 6d through 6o = 6p [] (Add this amount to amount on line 6c, Section 3, page 1)

ATTACHMENT C

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

FEDERAL TRADE COMMISSION,)	
)	
Plaintiff,)	
)	
v.)	Civ. No.
)	
CSCT, INC., a Canadian corporation;)	
)	
CSCT, LTD., a British corporation;)	
)	
JOHN LESLIE ARMSTRONG, individually and)	
as an officer of CSCT, Ltd.; and)	
)	
MICHAEL JOHN REYNOLDS, individually and)	
as an officer of CSCT, Inc., and CSCT, Ltd.)	
)	
Defendants.)	

CONSENT TO RELEASE OF FINANCIAL INFORMATION

I, _____, of _____ (city or province and country), do hereby direct any person, bank, savings and loan association, credit union, depository institution, finance company, commercial lending company, credit card processor, credit card processing entity, brokerage house, escrow agent, money market or mutual fund, title company, commodity trading company, or trustee, that holds, controls or maintains custody of assets, wherever located, that are owned or controlled by me, or any of the above Defendants, in whole or in part, or at which I, or any of the above Defendants, have an account of any kind upon which I am authorized to draw, and its officers, employees and agents, to disclose all information and deliver copies of all documents of every nature in its possession or control which relate to the said accounts to any attorney of the

Federal Trade Commission, and to give evidence relevant thereto, in the above captioned matter, *FTC v. CSCT, Inc., et al.*, now pending in the United States District Court for the Northern District of Illinois, and this shall be irrevocable authority for so doing. This direction is intended to apply to the laws of countries other than the United States of America which restrict or prohibit the disclosure of bank or other financial information without the consent of the holder of the account, and shall be construed as consent with respect thereto, and the same shall apply to any of the accounts for which I may be the relevant principal.

Dated: _____, 2003

[Signature]

[Print Name]