

FILE

# Ohio | Public Utilities Commission

## PUCO USE ONLY

Date Received	Case Number	Version
	17-1313-EL-AGG	May 2016

### INITIAL CERTIFICATION APPLICATION FOR ELECTRIC AGGREGATORS/ POWER BROKERS

Please print or type all required information. Identify all attachments with an exhibit label and title (Example: Exhibit A-12 Company History). All attachments should bear the legal name of the Applicant. Applicants should file completed applications and all related correspondence with the Public Utilities Commission of Ohio, Docketing Division; 180 East Broad Street, Columbus, Ohio 43215-3793.

This PDF form is designed so that you may input information directly onto the form.  
You may also download the form, by saving it to your local disk, for later use.

#### A. APPLICANT INFORMATION

A-1 Applicant intends to be certified as: (check all that apply)

☒ Power Broker      ☐ Aggregator

A-2 Applicant's legal name, address, telephone number and web site address

Legal Name Greg Loughead

Address 3240 Oakwood Lane Westlake, Ohio 44145

Telephone # 216-346-3258      Web site address (if any) www.clepowerinc.com

A-3 List name, address, telephone number and web site address under which Applicant will do business in Ohio

Legal Name CLE Power Inc

Address 3240 Oakwood Lane West lake, Ohio 44145

Telephone # 440-835-1866      Web site address (if any) www.clepowerinc.com

A-4 List all names under which the applicant does business in North America

CLE Power Inc

A-5 Contact person for regulatory or emergency matters

Name Greg Laughead

Title Co-Owner

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.  
Technician AMA Date Processed MAY 23 2017

PUCO

2017 MAY 23 PM 2:26

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Business address 3240 Oakwood Lane Westlake, Ohio 44145  
 Telephone# 440-835-1866 Fax# \_\_\_\_\_  
 E-mail address Giclepower@gmail.com

A-6 Contact person for Commission Staff use in investigating customer complaints

Name James Ziegan  
 Title Vice President  
 Business address 8254 E Joann In Marblehead Ohio  
 Telephone# 440-610-2859  
 Fax# \_\_\_\_\_ E-mail address  
Jamesz.clepower@gmail.com

A-7 Applicant's address and toll-free number for customer service and complaints

Customer Service address 3240 Oakwood Lane Westlake, Ohio 44145  
 Toll-free Telephone# 800 775 - 5000 Fax# \_\_\_\_\_  
 E-mail address Giclepower@gmail.com

A-8 Applicant's federal employer identification number# 900765944

A-9 Applicant's form of ownership (check one)

☒ Sole Proprietorship ☐ Partnership  
☐ Limited Liability Partnership (LLP) ☐ Limited Liability Company (LLC)  
☐ Corporation ☐ Other \_\_\_\_\_

A-10 (Check all that apply) Identify each electric distribution utility certified territory in which the applicant intends to provide service, including identification of each customer class that the applicant intends to serve, for example, residential, small commercial, mercantile commercial, and industrial. (A mercantile customer, as defined in (A) (19) of Section 4928.01 of the Revised Code, is a commercial customer who consumes more than 700,000 kWh/year or is part of a national account in one or more states).

First Energy				
Ohio Edison	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
Toledo Edison	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
<input checked="" type="checkbox"/> Cleveland Electric Illuminating	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
<input checked="" type="checkbox"/> Duke Energy	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
<input type="checkbox"/> Monongahela Power	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
<input checked="" type="checkbox"/> American Electric Power				
<input checked="" type="checkbox"/> Ohio Power	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
<input checked="" type="checkbox"/> Columbus Southern Power	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial
<input checked="" type="checkbox"/> Dayton Power and Light	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Industrial



A-II Provide the approximate start date that the applicant proposes to begin delivering services

07/27/2017

PROVIDE THE FOLLOWING AS SEPARATE ATTACHMENTS AND LABEL AS INDICATED:

- A-12 Exhibit A-12 "Principal Officers, Directors & Partners" provide the names, titles, addresses and telephone numbers of the applicant's principal officers, directors, partners, or other similar officials.
- A-13 Exhibit A-13 "Company History," provide a concise description of the applicant's company history and principal business interests.
- A-14 Exhibit A-14 "Articles of Incorporation and Bylaws," if applicable, provide the articles of incorporation filed with the state or jurisdiction in which the Applicant is incorporated and any amendments thereto.
- A-15 Exhibit A-15 "Secretary of State," provide evidence that the applicant has registered with the Ohio Secretary of the State.

## B. APPLICANT MANAGERIAL CAPABILITY AND EXPERIENCE

PROVIDE THE FOLLOWING AS SEPARATE ATTACHMENTS AND LABEL AS INDICATED:

- B-1 Exhibit B-1 "Jurisdictions of Operation," provide a list of all jurisdictions in which the applicant or any affiliated interest of the applicant is, at the date of filing the application, certified, licensed, registered, or otherwise authorized to provide retail or wholesale electric services including aggregation services.
- B-2 Exhibit B-2 "Experience & Plans," provide a description of the applicant's experience and plan for contracting with customers, providing contracted services, providing billing statements, and responding to customer inquiries and complaints in accordance with Commission rules adopted pursuant to Section 4928.10 of the Revised Code.



- B-3 Exhibit B-3 "Summary of Experience," provide a concise summary of the applicant's experience in providing aggregation service(s) including contracting with customers to combine electric load and representing customers in the purchase of retail electric services. (e.g. number and types of customers served, utility service areas, amount of load, etc.).
- B-4 Exhibit B-4 "Disclosure of Liabilities and Investigations," provide a description of all existing, pending or past rulings, judgments, contingent liabilities, revocation of authority, regulatory investigations, or any other matter that could adversely impact the applicant's financial or operational status or ability to provide the services it is seeking to be certified to provide.
- B-5 Disclose whether the applicant, a predecessor of the applicant, or any principal officer of the applicant have ever been convicted or held liable for fraud or for violation of any consumer protection or antitrust laws within the past five years.
- ☐ No ☐ Yes

If yes, provide a separate attachment labeled as Exhibit B-5 "Disclosure of Consumer Protection Violations" detailing such violation(s) and providing all relevant documents.

- B-6 Disclose whether the applicant or a predecessor of the applicant has had any certification, license, or application to provide retail or wholesale electric service including aggregation service denied, curtailed, suspended, revoked, or cancelled within the past two years.
- ☐ No ☐ Yes

If yes, provide a separate attachment labeled as Exhibit B-6 "Disclosure of Certification Denial, Curtailment, Suspension, or Revocation" detailing such action(s) and providing all relevant documents.

## C. APPLICANT FINANCIAL CAPABILITY AND EXPERIENCE

PROVIDE THE FOLLOWING AS SEPARATE ATTACHMENTS AND LABEL AS INDICATED:

- C-1 Exhibit C-1 "Annual Reports," provide the two most recent Annual Reports to Shareholders. If applicant does not have annual reports, the applicant should provide similar information in Exhibit C-1 or indicate that Exhibit C-1 is not applicable and why. (This is generally only applicable to publicly traded companies who publish annual reports)
- C-2 Exhibit C-2 "SEC Filings," provide the most recent 10-K/8-K Filings with the SEC. If the applicant does not have such filings, it may submit those of its parent company. An applicant may submit a current link to the filings or provide them in paper form. If the applicant does not have such filings, then the applicant may indicate in Exhibit C-2 that the applicant is not required to file with the SEC and why.



C-3 Exhibit C-3 "Financial Statements," provide copies of the applicant's two most recent years of audited financial statements (balance sheet, income statement, and cash flow statement). If audited financial statements are not available, provide officer certified financial statements. If the applicant has not been in business long enough to satisfy this requirement, it shall file audited or officer certified financial statements covering the life of the business. If the applicant does not have a balance sheet, income statement, and cash flow statement, the applicant may provide a copy of its two most recent years of tax returns (with social security numbers and account numbers redacted).

C-4 Exhibit C-4 "Financial Arrangements." provide copies of the applicant's financial to satisfy collateral requirements to conduct retail electric/gas business activity (e.g., parental or third party guarantees, contractual arrangements, credit agreements, etc.,).

Renewal applicants can fulfill the requirements of Exhibit C-4 by providing a current statement from an Ohio local distribution utility (LDU) that shows that the applicant meets the LDU's collateral requirements.

First time applicants or applicants whose certificate has expired as well as renewal applicants can meet the requirement by one of the following methods:

1. The applicant itself stating that it is investment grade rated by Moody's, Standard & Poor's or Fitch and provide evidence of rating from the rating agencies.
2. Have a parent company or third party that is investment grade rated by Moody's, Standard & Poor's or Fitch guarantee the financial obligations of the applicant to the LDU(s).
3. Have a parent company or third party that is not investment grade rated by Moody's, Standard & Poor's or Fitch but has substantial financial wherewithal in the opinion of the Staff reviewer to guarantee the financial obligations of the applicant to the LDU(s). The guarantor company's financials must be included in the application if the applicant is relying on this option.
4. Posting a Letter of Credit with the LDU(s) as the beneficiary.

If the applicant is not taking title to the electricity or natural gas, enter "N/A" in Exhibit C-4. An N/A response is only applicable for applicants seeking to be certified as an aggregator or broker.

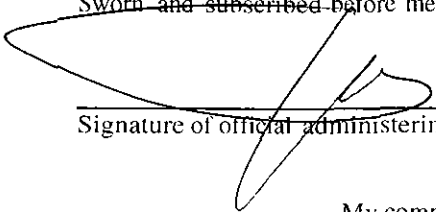
C-5 Exhibit C-5 "Forecasted Financial Statements," provide two years of forecasted income statements for the applicant's ELECTRIC related business activities in the state of Ohio Only, along with a list of assumptions, and the name, address, email address, and telephone number of the preparer. The forecasts should be in an annualized format for the two years succeeding the Application year.



- C-6 Exhibit C-6 "Credit Rating." provide a statement disclosing the applicant's credit rating as reported by two of the following organizations: Duff & Phelps, Dun and Bradstreet Information Services, Fitch IBCA, Moody's Investors Service, Standard & Poors, or a similar organization. In instances where an applicant does not have its own credit ratings, it may substitute the credit ratings of a parent or affiliate organization, provided the applicant submits a statement signed by a principal officer of the applicant's parent or affiliate organization that guarantees the obligations of the applicant. If an applicant or its parent does not have such a credit rating, enter "N/A" in Exhibit C-6.
- C-7 Exhibit C-7 "Credit Report." provide a copy of the applicant's credit report from Experian, Dun and Bradstreet or a similar organization. An applicant that provides an investment grade credit rating for Exhibit C-6 may enter "N/A" for Exhibit C-7.
- C-8 Exhibit C-8 "Bankruptcy Information." provide a list and description of any reorganizations, protection from creditors or any other form of bankruptcy filings made by the applicant, a parent or affiliate organization that guarantees the obligations of the applicant or any officer of the applicant in the current year or within the two most recent years preceding the application.
- C-9 Exhibit C-9 "Merger Information." provide a statement describing any dissolution or merger or acquisition of the applicant within the two most recent years preceding the application.
- C-10 Exhibit C-10 "Corporate Structure," provide a description of the applicant's corporate structure, not an internal organizational chart, including a graphical depiction of such structure, and a list of all affiliate and subsidiary companies that supply retail or wholesale electricity or natural gas to customers in North America. If the applicant is a stand-alone entity, then no graphical depiction is required and applicant may respond by stating that they are a stand-alone entity with no affiliate or subsidiary companies.

  
Signature of Applicant & Title

Sworn and subscribed before me this 19 day of MAY 2017  
Month Year

  
Signature of official administering oath

William D. Kirkwood Jr. Notary  
Print Name and Title

My commission expires on 11-27-2017



WILLIAM D. KIRKWOOD JR.  
Notary Public, State of Ohio  
My Commission Expires 11/27/2017  
Recorded in Cuyahoga County



# AFFIDAVIT

State of Ohio

Bay Village  
(Town)

County of **Cuyahoga**

Gregory Loughhead, Affiant, being duly sworn/affirmed according to law, deposes and says that:

He/She is Co-Owner (Office of Affiant) of CLE Power INC (Name of Applicant);

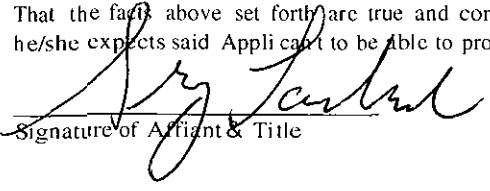
That he/she is authorized to and does make this affidavit for said Applicant,

1. The Applicant herein, attests under penalty of false statement that all statements made in the application for certification are true and complete and that it will amend its application while the application is pending if any substantial changes occur regarding the information provided in the application.
2. The Applicant herein, attests it will timely file an annual report with the Public Utilities Commission of Ohio of its intrastate gross receipts, gross earnings, and sales of kilowatt-hours of electricity pursuant to Division (A) of Section 4905.10, Division (A) of Section 4911.18, and Division (F) of Section 4928.06 of the Revised Code.
3. The Applicant herein, attests that it will timely pay any assessments made pursuant to Sections 4905.10, 4911.18, or Division F of Section 4928.06 of the Revised Code.
4. The Applicant herein, attests that it will comply with all Public Utilities Commission of Ohio rules or orders as adopted pursuant to Chapter 4928 of the Revised Code.
5. The Applicant herein, attests that it will cooperate fully with the Public Utilities Commission of Ohio, and its Staff on any utility matter including the investigation of any consumer complaint regarding any service offered or provided by the Applicant.
6. The Applicant herein, attests that it will fully comply with Section 4928.09 of the Revised Code regarding consent to the jurisdiction of Ohio Courts and the service of process.
7. The Applicant herein, attests that it will comply with all state and/or federal rules and regulations concerning consumer protection, the environment, and advertising/promotions.
8. The Applicant herein, attests that it will use its best efforts to verify that any entity with whom it has a contractual relationship to purchase power is in compliance with all applicable licensing requirements of the Federal Energy Regulatory Commission and the Public Utilities Commission of Ohio.
9. The Applicant herein, attests that it will cooperate fully with the Public Utilities Commission of Ohio, the electric distribution companies, the regional transmission entities, and other electric suppliers in the event of an emergency condition that may jeopardize the safety and reliability of the electric service in accordance with the emergency plans and other procedures as may be determined appropriate by the Commission.
10. If applicable to the service(s) the Applicant will provide, the Applicant herein, attests that it will adhere to the reliability standards of (1) the North American Electric Reliability Council (NERC), (2) the appropriate regional reliability council(s), and (3) the Public Utilities Commission of Ohio. (Only applicable if pertains to the services the Applicant is offering)

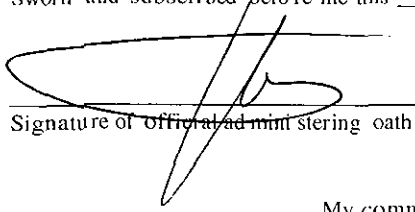


11. The Applicant herein, attests that it will inform the Commission of any material change to the information supplied in the application within 30 days of such material change, including any change in contact person for regulatory purposes or contact person for Staff use in investigating customer complaints.

That the facts above set forth are true and correct to the best of his/her knowledge, information, and belief and that he/she expects said Applicant to be able to prove the same at any hearing hereof.

  
Signature of Affiant & Title

Sworn and subscribed before me this 19 day of May 2017  
Month Year

  
Signature of official administering oath

William D. Kirkwood Jr  
Print Name and Title Notary Public

My commission expires on 10-27-2017



**WILLIAM D. KIRKWOOD JR.**  
Notary Public, State of Ohio  
My Commission Expires 10-27-2017  
Recorded in Cuyahoga County



Greg Loughead  
3240 Oakwood Lane, Westlake, Ohio 44145  
E-mail: glclepower@gmail.com  
Phone: 216-346-3258

5/19/2017

Dear Public Utilities Commission of Ohio.

Thank you for taking your time to review our application for the Retail Generation Provider and Power Marketers License under the Business name CLE Power Inc. I am confident that by obtaining this license CLE Power can further assist our Clients with their energy procurement needs.

I believe my companies experience and track record make CLE Power an excellent fit for the Retail Electric Generation Providers and Power Marketers License. Feel free to contact me via phone or email at a time of your convenience to discuss anything else you require from me.

Sincerely,

Gregory Loughead

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CLE Power INC

**Exhibit A-12**  
**"Principal Officers, Directors & Partners"**

The applicant has three members, Greg Loughhead (President and Secretary), Dorothy Babson (Co-owner/Treasurer) and James Ziegen (Director of operations). The address is 3240 Oakwood Lane Westlake, OH 44145. The phone number is 1-440-835-1866.



CLE Power INC

Exhibit A-13  
"Company History"

CLE Power Inc. has been in existence for the last five years. CLE Power Inc. is owned by Greg Loughhead and specializes in power quality products, such as the uninterruptible power systems and surge protection, breakers, batteries and other power related products. General Electric, Tripp Lite and APC are some of the OEM's we buy from. Cleveland Clinic, PPG, Next-Era, Suzlon, Noble Energy and Vesta's are some of our larger clients.



CLE Power INC

**Exhibit A-14**  
**"Articles of Incorporation and Bylaws"**

See the attached Certificate of Organization.







ORIGINAL APPOINTMENT OF STATUTORY AGENT			
The undersigned, being at least a majority of the incorporators of <u>CLE Power Inc.</u> hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is:			
<u>Shawn S. Finnman</u> Name			
<u>27020 Detroit Rd. #106</u> Mailing Address			
<u>Westlake</u> City	<u>Ohio</u> State	<u>44145</u> Zip Code	
Must be signed by the incorporators or a majority of the incorporators			
<u>[Signature]</u> Signature			
<u>[Signature]</u> Signature			
<u>[Signature]</u> Signature			
ACCEPTANCE OF APPOINTMENT			
The Undersigned, <u>Shawn S. Finnman</u> Statutory Agent Name			
<u>[Signature]</u> Individual Agent's Signature/Signature on Behalf of Corporate Agent			

PA



CLE Power Inc

Exhibit A-15  
"Secretary of State"





DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
08/22/2012	201223400926	DOMESTIC FOR PROFIT CORP - ARTICLES (ARF)	125.00	.00		.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

FINN POWER COMPANY LLC  
27070 DETROIT RD  
STE 106  
WESTLAKE, OH 44145

# STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, Jon Husted**

2130064

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**CLE POWER INC.**

and, that said business records show the filing and recording of:

Document(s):

**DOMESTIC FOR PROFIT CORP - ARTICLES**

Document No(s):

**201223400926**

United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus,  
Ohio this 17th day of August, A.D.  
2012.

Ohio Secretary of State





Form 532A Prescribed by:

**JON HUSTED**  
**Ohio Secretary of State**

 Central Ohio: (614) 466-3910  
 Toll Free: (877) SOS-FILE (767-3453)  
 www.OhioSecretaryofState.gov  
 BusServ@OhioSecretaryofState.gov

Mail this form to one of the following:

 Regular Filing (non expedite)  
 P.O. Box 870  
 Columbus, OH 43216

 Expedite Filing (Two-business day processing  
 time requires an additional \$100.00).  
 P.O. Box 1390  
 Columbus, OH 43216

**Initial Articles of Incorporation**  
**(For Profit, Domestic Corporation)**  
**Filing Fee: \$125**  
**(113 - ARF)**

**First:** Name of Corporation Uk Power Inc.  
 (Name must include the following word or abbreviation: company, co.,  
 corporation, corp., incorporated, or inc.)

**Second:** Location of Principal office in Ohio  
27070 Detroit Rd Ohio  
 City Westlake 44145 State  
Cuyahoga  
 County

**Effective Date (Optional)** 7/17/12 The legal existence of the corporation begins upon  
 the filing of the articles or on a later date specified  
 that is not more than ninety days after filing

**Third:** The number of shares which the corporation is authorized to have outstanding.  
 (Please state if shares are common or preferred and their par value, if any.)

<u>1000</u>	<u>Common</u>	<u>0</u>
Number of Shares	Type	Par Value

**Fourth:** If the corporation is to have an initial stated capital, please state the amount of that stated capital

500  
 Amount

**\*\*Note:** ORC Chapter 1701 allows additional provisions to be included in the Articles of Incorporation that are filed with this office. If including any of these additional provisions, please do so by including them in an attachment to this form.\*\*



The undersigned, being at least a majority of the incorporators of Che Power Inc. hereby appoint the following to be statutory agent upon whom any process, notice or demand required or permitted by statute to be served upon the corporation may be served. The complete address of the agent is

Name \_\_\_\_\_

Mailing Address

City

Ohio

State

**Zip Code**

**Signature**

**Signature**

**Signature**

## Statutory Agent Name

, named herein as the

**Corporation Name**

hereby acknowledges and accepts the appointment of statutory agent for said corporation.

Individual Agent's Signature/Signature on Behalf of Corporate Agent

☐ If the agent is an individual and using a P.O. Box, check this box to confirm the agent is an Ohio resident.



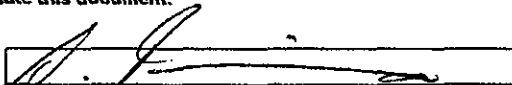
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.



**Required**

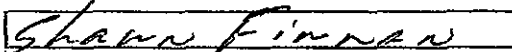
Articles and original appointment of agent must be signed by the incorporator(s).

If the incorporator is an individual, then they must sign in the "signature" box and print his/her name in the "Print Name" box.


If the incorporator is a business entity, not an individual, then please print the entity name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print his/her name and title/authority in the "Print Name" box.


  
Signature

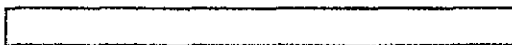
  
By 


  
Print Name


  
Signature

  
By

  
Print Name

  
Signature

  
By

  
Print Name





Form 590 Prescribed by:

**JON HUSTED**  
 Ohio Secretary of State

 Central Ohio: (614) 466-3910  
 Toll Free: (877) SOS-FILE (767-3453)  
[www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov)  
[BusServ@OhioSecretaryofState.gov](mailto:BusServ@OhioSecretaryofState.gov)

 2012 AUG -3  
 PM 9:13

### Consent for Use of Similar Name

 (To be filed with new business formation document or amendment to  
 change business name where a name conflict will occur.)

Name of Entity/Individual Giving Consent

Finn Power Company, LLC

Charter/Registration/License Number of Entity giving Consent

2043016

Gives it Consent To

Cle Power, Inc.

To Use The Name

Cle Power, Inc.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

#### REQUIRED

 Consent form must  
 be signed by an authorized  
 representative of the  
 consenting entity.

 If authorized representative  
 is an individual, then they  
 must sign in the "signature"  
 box and print their name  
 in the "Print Name" box.

 If authorized representative  
 is a business entity, not an  
 individual, then please print  
 the business name in the  
 "signature" box, an  
 authorized representative  
 of the business entity  
 must sign in the "By" box  
 and print their name in the  
 "Print Name" box.

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name



CLE Power Inc

Exhibit B1

"Jurisdictions of Operation"

Ohio



CLE Power INC

**Exhibit B-2**  
**"Experience & Plans"**

Applicant's 3 members, Greg Iouthead, Dorothy Babson and James Ziegen, have a combined experience of 31 years in the energy procurement and energy efficiencies gas and electric domain. Applicant will use its experience and existing infrastructure to work in its preferred business segments to build new relationships and leverage existing relationships into new aggregator/power broker business in Ohio.



Exhibit B-3 "Summary of  
Experience"

CLE Power Inc. is comprised of three associates, Greg Loughhead, Dorothy Babson and James Ziegen. They have a combined experience of more than 31 years in the electricity and natural gas industry.

Greg Loughhead, President and Secretary, has been involved with electrical and related consulting services since 2009. He is currently a VAR partner with GE

Dorothy Babson, Co-Owner has cultivated customer relationships and logistics for CLE Power since its inception.

James Ziegen, Director of Operations has worked for Commerce Energy and Volunteer Energy as a master distributor of Natural Gas and Electricity to over 290 commercial businesses. He has also negotiated and managed electricity and natural gas supply sales agreements. He has assisted companies of various sizes in navigating the complexities of a deregulated energy marketplace and provided objective and unbiased cost saving solutions.



CLE Power Inc

Exhibit B-4  
"Disclosure of Liabilities and Investigations"

The applicant is not aware of the existence of any pending or past rulings, judgments, contingent liabilities, revocation of authority, regulatory investigations, or any other matter that could adversely impact its financial or operational status or ability to provide the services it is seeking to be certified to provide.



**Exhibit C-1**  
**"Annual Reports"**

The applicant is a privately held company and does not publish or prepare annual reports.



**Exhibit C-2**  
**"SEC Filings"**

Applicant does not and is not required to have such filings nor does it have a parent that makes such filings.



CLE Power Inc

Exhibit C-3 "Financial  
Statements"

See attached



Form **1120S**Department of the Treasury  
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**▶ Do not file this form unless the corporation has filed or is  
attaching Form 2553 to elect to be an S corporation.▶ Information about Form 1120S and its separate instructions is at [www.irs.gov/form1120s](http://www.irs.gov/form1120s).

OMB No. 1545-0123

**2015**

For calendar year 2015 or tax year beginning

, ending

<b>A</b> Selection effective date  8/17/2012	<b>TYPE OR PRINT</b>	Name <b>CLE POWER, INC.</b>	<b>D</b> Employer identification number  90-0765944
<b>B</b> Business activity code number (see instructions)  221100		Number, street, and room or suite no. If a P.O. box, see instructions. <b>3240 OAKWOOD LANE</b>	<b>E</b> Date incorporated  8/17/2012
		City or town State ZIP code <b>WESTLAKE OH 44145</b>	<b>F</b> Total assets (see instructions)  \$ 27,257
<b>C</b> Check if Sch. M-3 attached <input type="checkbox"/>		Foreign country name Foreign province/state/county Foreign postal code	

**G** Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☐ No If "Yes," attach Form 2553 if not already filed**H** Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation**I** Enter the number of shareholders who were shareholders during any part of the tax year . . . . . ▶ 1**Caution:** Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

<b>Income</b>	<b>1a</b> Gross receipts or sales . . . . .	<b>1a</b>	511,017	
	<b>b</b> Returns and allowances . . . . .	<b>1b</b>		
	<b>c</b> Balance. Subtract line 1b from line 1a . . . . .	<b>1c</b>	511,017	
	<b>2</b> Cost of goods sold (attach Form 1125-A) . . . . .	<b>2</b>	406,649	
	<b>3</b> Gross profit. Subtract line 2 from line 1c . . . . .	<b>3</b>	104,368	
	<b>4</b> Net gain (loss) from Form 4797, line 17 (attach Form 4797) . . . . .	<b>4</b>		
<b>Deductions (see instructions for limitations)</b>	<b>5</b> Other income (loss) (see instructions—attach statement) . . . . .	<b>5</b>		
	<b>6</b> Total income (loss). Add lines 3 through 5 . . . . . ▶	<b>6</b>	104,368	
	<b>7</b> Compensation of officers (see instructions — attach Form 1125-E) . . . . .	<b>7</b>	25,000	
	<b>8</b> Salaries and wages (less employment credits) . . . . .	<b>8</b>		
	<b>9</b> Repairs and maintenance . . . . .	<b>9</b>	1,010	
	<b>10</b> Bad debts . . . . .	<b>10</b>		
	<b>11</b> Rents . . . . .	<b>11</b>	12,000	
	<b>12</b> Taxes and licenses . . . . .	<b>12</b>		
	<b>13</b> Interest . . . . .	<b>13</b>		
	<b>14</b> Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562) . . . . .	<b>14</b>		
	<b>15</b> Depletion (Do not deduct oil and gas depletion.) . . . . .	<b>15</b>		
	<b>16</b> Advertising . . . . .	<b>16</b>	1,674	
	<b>17</b> Pension, profit-sharing, etc., plans . . . . .	<b>17</b>		
	<b>18</b> Employee benefit programs . . . . .	<b>18</b>		
	<b>19</b> Other deductions (attach statement) . . . . .	<b>19</b>	23,356	
<b>20</b> Total deductions. Add lines 7 through 19 . . . . . ▶	<b>20</b>	63,040		
<b>21</b> Ordinary business income (loss). Subtract line 20 from line 6 . . . . .	<b>21</b>	41,328		
<b>Tax and Payments</b>	<b>22a</b> Excess net passive income or LIFO recapture tax (see instructions) . . . . .	<b>22a</b>		
	<b>b</b> Tax from Schedule D (Form 1120S) . . . . .	<b>22b</b>		
	<b>c</b> Add lines 22a and 22b (see instructions for additional taxes) . . . . .	<b>22c</b>	0	
	<b>23a</b> 2015 estimated tax payments and 2014 overpayment credited to 2015 . . . . .	<b>23a</b>		
	<b>b</b> Tax deposited with Form 7004 . . . . .	<b>23b</b>		
	<b>c</b> Credit for federal tax paid on fuels (attach Form 4136) . . . . .	<b>23c</b>		
	<b>d</b> Add lines 23a through 23c . . . . .	<b>23d</b>	0	
	<b>24</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached . . . . . ▶ <input type="checkbox"/>	<b>24</b>		
	<b>25</b> Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed . . . . .	<b>25</b>	0	
	<b>26</b> Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid . . . . .	<b>26</b>	0	
<b>27</b> Enter amount from line 26 Credited to 2016 estimated tax ▶ Refunded ▶	<b>27</b>	0		

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

Title

May the IRS discuss this return  
with the preparer shown below  
(see instructions)? ☒ Yes ☐ No**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if  
self-employed

PTIN

WILLIAM J YORK, CPA

WILLIAM J YORK, CPA

9/22/2016

P00269333

Firm's name ▶ NETCO

Firm's EIN ▶ 34-1657178

Firm's address ▶ 4418 BIRKDALE TURN

Phone no. 440-427-1212

City WESTLAKE

State OH

ZIP code 44145

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120S** (2015)

HTA



Schedule B	Other Information (see instructions)
------------	--------------------------------------

1	Check accounting method:	a	<input checked="" type="checkbox"/> Cash	b	<input type="checkbox"/> Accrual				
	c	<input type="checkbox"/>	Other (specify) _____						
2	See the instructions and enter the:								
a	Business activity ▶ DISTRIBUTION			b	Product or service ▶ BACKUP POWER UNITS				
3	At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation . . . . .								
4	At the end of the tax year, did the corporation:								
a	Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.								
(i)	Name of Corporation	(ii)	Employer Identification Number (if any)	(iii)	Country of Incorporation	(iv)	Percentage of Stock Owned	(v)	If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made
b	Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below.								
(i)	Name of Entity	(ii)	Employer Identification Number (if any)	(iii)	Type of Entity	(iv)	Country of Organization	(v)	Maximum Percentage Owned in Profit, Loss, or Capital
5 a	At the end of the tax year, did the corporation have any outstanding shares of restricted stock? . . . . . If "Yes," complete lines (i) and (ii) below.								
(i)	Total shares of restricted stock . . . . .								
(ii)	Total shares of non-restricted stock . . . . .								
b	At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? . . . . . If "Yes," complete lines (i) and (ii) below.								
(i)	Total shares of stock outstanding at the end of the tax year . . . . .								
(ii)	Total shares of stock outstanding if all instruments were executed . . . . .								
6	Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction? . . . . .								
7	Check this box if the corporation issued publicly offered debt instruments with original issue discount . . . . . If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.								
8	If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years (see instructions) . . . . . \$								
9	Enter the accumulated earnings and profits of the corporation at the end of the tax year. \$								
10	Does the corporation satisfy both of the following conditions?								
a	The corporation's total receipts (see instructions) for the tax year were less than \$250,000 . . . . .								
b	The corporation's total assets at the end of the tax year were less than \$250,000 . . . . . If "Yes," the corporation is not required to complete Schedules L and M-1.								
11	During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction \$								
12	During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions . . . . .								
13 a	Did the corporation make any payments in 2015 that would require it to file Form(s) 1099? . . . . .								
b	If "Yes," did the corporation file or will it file required Forms 1099? . . . . .								



Schedule K		Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1	Ordinary business income (loss) (page 1, line 21)		1	41,328
	2	Net rental real estate income (loss) (attach Form 8825)		2	
	3a	Other gross rental income (loss)	3a		
	b	Expenses from other rental activities (attach statement)	3b		
	c	Other net rental income (loss). Subtract line 3b from line 3a	3c	0	
	4	Interest income	4		
	5	Dividends: a Ordinary dividends	5a		
	b	Qualified dividends	5b		
	6	Royalties	6		
	7	Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7		
Deductions	8a	Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a		
	b	Collectibles (28%) gain (loss)	8b		
	c	Unrecaptured section 1250 gain (attach statement)	8c		
	9	Net section 1231 gain (loss) (attach Form 4797)	9		
	10	Other income (loss) (see instructions) Type ▶	10		
Credits	11	Section 179 deduction (attach Form 4562)	11		
	12a	Charitable contributions	12a		
	b	Investment interest expense	12b		
	c	Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)		
Foreign Transactions	d	Other deductions (see instructions) Type ▶	12d		
	13a	Low-income housing credit (section 42(j)(5))	13a		
	b	Low-income housing credit (other)	13b		
	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c		
	d	Other rental real estate credits (see instructions) Type ▶	13d		
	e	Other rental credits (see instructions) Type ▶	13e		
	f	Biofuel producer credit (attach Form 6478)	13f		
Alternative Minimum Tax (AMT) Items	g	Other credits (see instructions) Type ▶	13g		
	14a	Name of country or U.S. possession ▶	14a		
	b	Gross income from all sources	14b		
	c	Gross income sourced at shareholder level	14c		
	d	Foreign gross income sourced at corporate level			
	e	Passive category	14d		
	f	General category	14e		
	g	Other (attach statement)	14f		
	h	Deductions allocated and apportioned at shareholder level			
	i	Interest expense	14g		
	j	Other	14h		
	k	Deductions allocated and apportioned at corporate level to foreign source income			
	l	Passive category	14i		
	m	General category	14j		
Items Affecting Shareholder Basis	n	Other (attach statement)	14k		
	o	Other information			
	p	Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l		
	q	Reduction in taxes available for credit (attach statement)	14m		
	r	Other foreign tax information (attach statement)			
Items Affecting Shareholder Basis	15a	Post-1986 depreciation adjustment	15a		
	b	Adjusted gain or loss	15b		
	c	Depletion (other than oil and gas)	15c		
	d	Oil, gas, and geothermal properties—gross income	15d		
	e	Oil, gas, and geothermal properties—deductions	15e		
	f	Other AMT items (attach statement)	15f		
Items Affecting Shareholder Basis	16a	Tax-exempt interest income	16a		
	b	Other tax-exempt income	16b		
	c	Nondeductible expenses	16c	1,125	
	d	Distributions (attach statement if required) (see instructions)	16d	42,756	
	e	Repayment of loans from shareholders	16e		



Schedule K		Shareholders' Pro Rata Share Items (continued)	Total amount	
Other Information	17a	Investment income . . . . .	17a	
	b	Investment expenses . . . . .	17b	
	c	Dividend distributions paid from accumulated earnings and profits . . . . .	17c	
	d	Other items and amounts (attach statement)		
Reconciliation	18	Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l . . .	18	41,328

Schedule L		Balance Sheets per Books		Beginning of tax year		End of tax year	
		Assets		(a)	(b)	(c)	(d)
1	Cash . . . . .						16,733
2a	Trade notes and accounts receivable . . . . .						
b	Less allowance for bad debts . . . . .				0		0
3	Inventories . . . . .						
4	U.S. government obligations . . . . .						
5	Tax-exempt securities (see instructions) . . . . .						
6	Other current assets (attach statement) . . . . .						
7	Loans to shareholders . . . . .						10,524
8	Mortgage and real estate loans . . . . .						
9	Other investments (attach statement) . . . . .						
10a	Buildings and other depreciable assets . . . . .						
b	Less accumulated depreciation . . . . .				0		0
11a	Depletable assets . . . . .						
b	Less accumulated depletion . . . . .				0		0
12	Land (net of any amortization) . . . . .						
13a	Intangible assets (amortizable only) . . . . .						
b	Less accumulated amortization . . . . .				0		0
14	Other assets (attach statement) . . . . .						
15	Total assets . . . . .				0		27,257
		Liabilities and Shareholders' Equity					
16	Accounts payable . . . . .						
17	Mortgages, notes, bonds payable in less than 1 year . . . . .						
18	Other current liabilities (attach statement) . . . . .						
19	Loans from shareholders . . . . .						
20	Mortgages, notes, bonds payable in 1 year or more . . . . .						
21	Other liabilities (attach statement) . . . . .						
22	Capital stock . . . . .						
23	Additional paid-in capital . . . . .						
24	Retained earnings . . . . .				25,636		27,257
25	Adjustments to shareholders' equity (attach statement) . . . . .						
26	Less cost of treasury stock . . . . .						
27	Total liabilities and shareholders' equity . . . . .				25,636		27,257



**Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1	Net income (loss) per books . . . . .	40,203	5	Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize):	
2	Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		a	Tax-exempt interest \$ . . . . .	0
3	Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14i (itemize):		6	Deductions included on Schedule K, lines 1 through 12 and 14i, not charged against book income this year (itemize):	
a	Depreciation \$ . . . . .		a	Depreciation \$ . . . . .	0
b	Travel and entertainment \$ . . . . .	1,125			0
		1,125	7	Add lines 5 and 6 . . . . .	0
4	Add lines 1 through 3 . . . . .	41,328	8	Income (loss) (Schedule K, line 18). Line 4 less line 7 . . . . .	41,328

**Schedule M-2 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed (see instructions)**

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1	Balance at beginning of tax year . . . . .	29,810	
2	Ordinary income from page 1, line 21 . . . . .	41,328	
3	Other additions . . . . .		
4	Loss from page 1, line 21 . . . . .		
5	Other reductions . . . . .	1,125	
6	Combine lines 1 through 5 . . . . .	70,013	0
7	Distributions other than dividend distributions . . . . .	42,756	
8	Balance at end of tax year. Subtract line 7 from line 6 . . . . .	27,257	0



**Schedule K-1  
(Form 1120S)**Department of the Treasury  
Internal Revenue Service**2015**For calendar year 2015, or tax  
year beginning \_\_\_\_\_, 2015  
ending \_\_\_\_\_, 20\_\_\_\_**Shareholder's Share of Income, Deductions,  
Credits, etc.**

▶ See back of form and separate instructions.

**Part I Information About the Corporation****A** Corporation's employer identification number

90-0765944

**B** Corporation's name, address, city, state, and ZIP codeCLE POWER, INC.  
3240 OAKWOOD LANE  
WESTLAKE, OH 44145**C** IRS Center where corporation filed return

e-file

**Part II Information About the Shareholder****D** Shareholder's identifying number

Shareholder: 1

296-68-9515

**E** Shareholder's name, address, city, state, and ZIP codeGREGORY LOUGHEAD  
3240 OAKWOOD LANE  
WESTLAKE, OH 44145**F** Shareholder's percentage of stock

ownership for tax year . . . . . 100.000000%

For IRS Use Only

☐ Final K-1☐ Amended K-1

<b>Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items</b>			
<b>1</b>	Ordinary business income (loss)	<b>13</b>	Credits
	41,328		
<b>2</b>	Net rental real estate income (loss)		
<b>3</b>	Other net rental income (loss)		
<b>4</b>	Interest income		
<b>5a</b>	Ordinary dividends		
<b>5b</b>	Qualified dividends	<b>14</b>	Foreign transactions
<b>6</b>	Royalties		
<b>7</b>	Net short-term capital gain (loss)		
<b>8a</b>	Net long-term capital gain (loss)		
<b>8b</b>	Collectibles (28%) gain (loss)		
<b>8c</b>	Unrecaptured section 1250 gain		
<b>9</b>	Net section 1231 gain (loss)		
<b>10</b>	Other income (loss)	<b>15</b>	Alternative minimum tax (AMT) items
<b>11</b>	Section 179 deduction	<b>16</b>	Items affecting shareholder basis
		C	1,125
<b>12</b>	Other deductions	D	42,756
		<b>17</b>	Other information
* See attached statement for additional information.			



**K-1 Statement (Sch K-1, Form 1120S)****Line 16 - Items affecting shareholder basis**

<b>C</b> Code C - Nondeductible expenses . . . . .	<b>C</b>	<u>1,125</u>
<b>D</b> Code D - Distributions . . . . .	<b>D</b>	<u>42,756</u>



**Cost of Goods Sold**

OMB No. 1545-2225

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.**▶ **Information about Form 1125-A and its instructions is at [www.irs.gov/form1125a](http://www.irs.gov/form1125a).**

Name

Employer identification number

CLE POWER, INC.

90-0765944

<b>1</b>	Inventory at beginning of year . . . . .	<b>1</b>	
<b>2</b>	Purchases . . . . .	<b>2</b>	406,649
<b>3</b>	Cost of labor . . . . .	<b>3</b>	
<b>4</b>	Additional section 263A costs (attach schedule) . . . . .	<b>4</b>	
<b>5</b>	Other costs (attach schedule) . . . . .	<b>5</b>	
<b>6</b>	<b>Total.</b> Add lines 1 through 5 . . . . .	<b>6</b>	406,649
<b>7</b>	Inventory at end of year . . . . .	<b>7</b>	
<b>8</b>	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions) . . . . .	<b>8</b>	406,649

**9 a** Check all methods used for valuing closing inventory:(i) ☒ Cost(ii) ☐ Lower of cost or market(iii) ☐ Other (Specify method used and attach explanation.) ▶**b** Check if there was a writedown of subnormal goods . . . . . ▶ ☐**c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) . . . . . ▶ ☐**d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory  
computed under LIFO . . . . .**9d****e** If property is produced or acquired for resale, do the rules of section 263A apply to the entity (see instructions)? . . . ☐ Yes ☐ No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If  
"Yes," attach explanation . . . . . ☐ Yes ☐ No



1	Travel, Meals and Entertainment		
a	Travel	1a	1,330
b	Meals and entertainment, subject to 50% limit	1b	2,249
c	Meals and entertainment, subject to 80% limit (DOT)	1c	
d	Less disallowed	1d	1,125
e	Subtract line d from lines b and c	1e	1,124
2	AUTOMOBILE EXPENSE	2	10,050
3	BANK SERVICE CHARGES	3	246
4	PARKING & TOLLS	4	85
5	OUTSIDE SERVICES	5	4,852
6	OFFICE SUPPLIES	6	1,179
7	OTHER BUSINESS EXPENSES	7	1,795
8	POSTAGE AND DELIVERY	8	73
9	PROFESSIONAL FEES	9	1,350
10	TELEPHONE	10	499
11	CONVENTION FEES	11	273
12	RENTAL EQUIPMENT	12	500
13	Total other deductions	13	23,356

<b>A. Cash</b>				42,756
<b>B. Property</b>				
Description	Date Acquired	Date Distributed	FMV on date of distribution	Basis in property
Total property				0
<b>C. Other</b>				
Total distributions				42,756



CLE Power Inc

Exhibit C-4 "Financial  
Arrangements"

Because the applicant does not propose to take title to the electric power, it is the applicant's understanding that this exhibit is not applicable.



CLE Power Inc

Exhibit C-5  
"Forecasted Financial Statements"

See attached



<p align="center"><b>CLE POWER</b></p> <p align="center"><b>BALANCE SHEET PROJECTION</b></p>
--

	YEAR 1	YEAR 2
--	--------	--------

**CURRENT ASSETS**

CASH	77,200	224,400
ACCOUNTS RECEIVABLE	-	-
<b>TOTAL CURRENT</b>	<u>77,200</u>	<u>224,400</u>

**FIXED ASSETS**

COMPUTER/EQUIPMENT	5,000	5,000
OFFICE FURNITURE	5,000	5,000
<b>TOTAL FIXED</b>	<u>10,000</u>	<u>10,000</u>

<b>TOTAL ASSETS</b>	<u><u>87,200</u></u>	<u><u>234,400</u></u>
---------------------	----------------------	-----------------------

**LIABILITIES**

<b>CURRENT LIABILITIES</b>	0	0
----------------------------	---	---

<b>LONG TERM LIABILITIES</b>	0	0
------------------------------	---	---

**SHAREHOLDER EQUITY**

RETAINED EARNING	0	87,200
CURRENT YEAR INCOME/LOSS	<u>87,200</u>	<u>147,200</u>

<b>TOTAL LIABILITIES AND EQUITY</b>	<u><u>87,200</u></u>	<u><u>234,400</u></u>
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**Cle Power**  
**Two Year Profit & Loss Forecast**

	YEAR 1	YEAR 2
Revenue	<u>\$ 180,000</u>	<u>\$ 300,000</u>
Expenses:		
Commissions	\$ 54,000	\$ 90,000
Office Expense	3,600	6,000
Rent	3,600	6,000
Automobile Expense	5,400	10,800
Advertising	4,500	7,500
Printing & Production	2,000	3,500
Travel	5,000	7,500
Meals & Entertainment	5,000	7,500
Professional Fees	7,200	10,500
Telephone/Communications	2,500	3,500
Total Expenses	<u>\$ 92,800</u>	<u>\$ 152,800</u>
Net Profits	<u>\$ 87,200</u>	<u>\$ 147,200</u>



CLE POWER  
CASH FLOW 2 YEAR

OPERATING ACTIVITIES

NET INCOME	<u>\$ 87,200</u>	<u>\$ 147,200</u>
------------	------------------	-------------------

INVESTING ACTIVITIES

CAPITAL EXPENDITURES	<u>\$ (10,000)</u>	<u>\$ -</u>
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CASH BEGINNING OF THE YEAR		\$ 77,200
----------------------------	--	-----------

CASH END OF YEAR	<u>\$ 77,200</u>	<u>\$ 224,400</u>
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CLE Power Inc

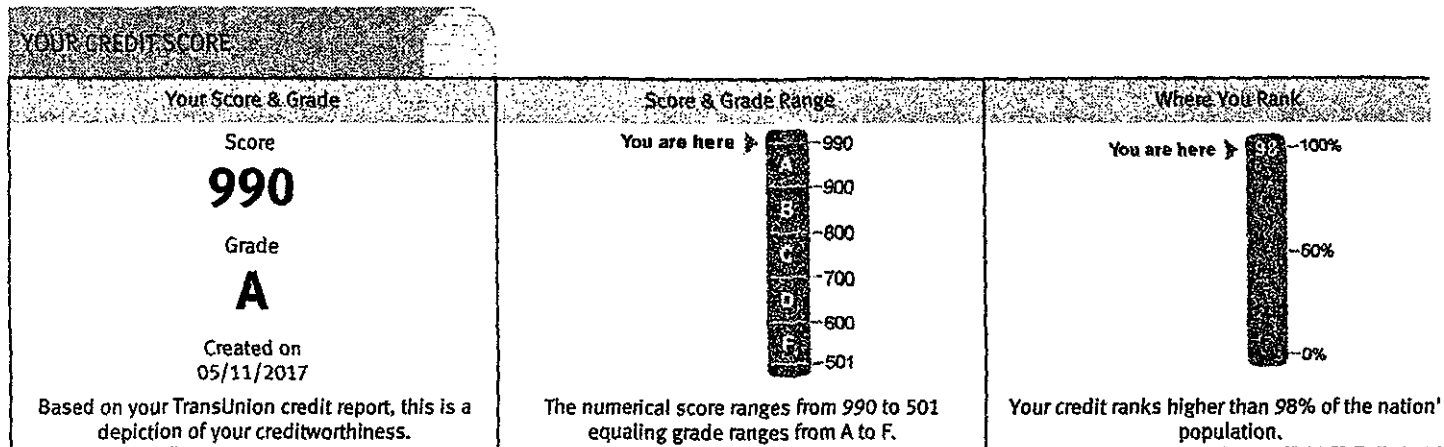
**Exhibit C-6**  
**"Credit Rating"**

See Attached



# TransUnion Personal Credit Score

DOROTHY C. BABSON



## About your TransUnion Personal Credit Score

Your TransUnion Personal Credit Score is displayed above, and was calculated with the VantageScore credit scoring formula. Your credit score is a snapshot of contents of your credit report at the time the score was calculated. Using objective, impartial formulas to translate the contents of your credit report into a 3-digit score enables lenders to evaluate your application for credit in a fast, fair and more objective manner. Remember, we constantly update the information contained in your credit report, so your TransUnion Personal Credit Score only represents the score a lender would receive if they requested it today.

### Summary

Given that you have a very high credit score, lenders should be able to conclude that you are capable of repaying your debts. This would then enable lenders to provide you with the best available interest rates and loan offers. Keep in mind that lenders' offers will differ based on the information you provide concerning your monthly income, employment history, and monthly debt. This information may help you enhance your ability to receive lower interest rates and higher loan amounts. Your credit score can probably increase in value; however, since you are at the top level of credit scores, you more than likely will not see any additional reward.

### Answers About Credit Scores

#### • How are credit scores used?

A credit score is just one of several factors a company usually uses when deciding to extend credit, give insurance coverage or provide financial services to you. A variety of other factors will be considered, such as length of employment, income or previous experience with you. Depending on what you are applying for, different companies weigh each of these factors differently. By using a credit score, they can evaluate your application quickly, fairly and consistently.

#### • How can I improve my credit score?

A credit score is a snapshot of the contents of your credit report at the time it was calculated. Long-term, responsible credit behavior is the most effective way to improve future scores. Pay bills on time, lower balances and use credit wisely to improve your score over time. You should also review your credit report to ensure it is accurate.

#### • How do inquiries affect my credit score?

When your credit is checked by a business for the purpose of an application a 'hard inquiry' appears on your credit report. These inquiries can affect your credit score; and typically they have only a small impact. Delinquencies, balances owed, and the length of time you have used credit are all more important. Inquiries have a greater impact if you have a limited credit history.

### Additional Information

The TransUnion Personal Credit Score is provided to help you better understand how lenders view your credit report. It is not an endorsement or a determination of your qualification for a loan. The VantageScore credit scoring model was used for this Score Analysis and is not necessarily the same scoring model that may be used by a lender. The resulting credit score may not be identical in every respect to any consumer credit score produced by any other company. Any credit information that has not yet been reported to TransUnion will not be reflected in your consumer disclosure or score. Also, some items disputed directly with creditors are not incorporated in the assessment of your credit score.





CLE Power Inc

**Exhibit C-7**  
**"Credit Report"**

See Attached



\*\*\* 356360124-007 \*\*\*  
TransUnion LLC  
PO Box 805  
Woodlyn, PA 19094-0805



05/03/2017

TransUnion 

P6X10F00202590-1034583-033517590



DOROTHY C. BABSON  
3231 CLARK PKWY  
WESTLAKE, OH 44145-4644

Find an inaccuracy on your report?  
Submit your dispute online at:  
<http://transunion.com/disputeonline>

Enclosed is the TransUnion Personal Credit Report that you requested. As a trusted leader in the consumer credit information industry, TransUnion takes the accuracy of your credit information very seriously. We are committed to providing the complete and reliable credit information that you need to participate in everyday transactions and purchases.

If you believe an item of information to be incomplete or inaccurate, please alert us immediately. We will investigate the data and notify you of the results of our investigation.

To make it easier to request an investigation, you can now submit your request online, **24 hours a day, 7 days a week**. You must have an active email address to use the online service. Please note that your email address will only be used for communicating with you regarding your request and the results of our investigation. Your email address will not be shared with any non-TransUnion entities.

**To submit an online request for investigation:**

- Step 1.** Go to the TransUnion online investigation service at <http://transunion.com/disputeonline>  
**Step 2.** Follow the instructions provided by the web site.

Once submitted, you will receive online confirmation of your request. You will also be notified by email when we complete our investigation and your results will be available online. You can check the status of your investigation online by logging into your account.

Thank you for helping ensure the accuracy of your credit information.

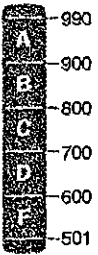

TransUnion Consumer Relations

For frequently asked questions about your credit report, please visit <http://transunion.com/consumerfaqs>.



# TransUnion Personal Credit Score

DOROTHY C. BABSON

YOUR CREDIT SCORE		
Your Score & Grade	Score & Grade Range	Where You Rank
<p>Score <b>Not Purchased</b> (See Below)</p> <p>Grade -</p> <p>Created on 05/03/2017</p> <p>Based on your TransUnion credit report, this is a depiction of your creditworthiness.</p>	<p>Unavailable (See Below)</p>  <p>The numerical score ranges from 990 to 501 equating grade ranges from A to F.</p>	<p>Unavailable (See Below)</p>  <p>Your credit ranks higher than --% of the nation's population.</p>

## Summary

You did not order a TransUnion credit score. You can purchase your credit score for \$9.95 by calling 1-866-SCORE-TU or 1-866-726-7388.

## Important Information Concerning Your TransUnion Credit Report:

- Your SSN has been masked for your protection. You may request disclosure of your full Social Security number by writing to us at the address found at the end of this report.
- For your protection, your account numbers have been partially masked, and in some cases scrambled.
- Please note: Accounts are reported as "Current; Paid or paying as agreed" if paid within 30 days of the due date. Accounts reported as Current may still incur late fees or interest charges if not paid on or before the due date.

### YOUR CREDIT FILE CONTAINS:

- One or more satisfactory accounts.
- Regular Inquiries. Inquiries are posted when someone accesses your credit information from TransUnion. The presence of an inquiry means that the company listed received your credit information on the dates specified. These inquiries will remain on your credit file for up to 2 years.
- Promotional Inquiries. The companies listed received your name, address and other limited information about you so they could make a firm offer of credit or insurance. They did not receive your full credit report. These inquiries are not seen by anyone but you and do not affect your score.
- Account Review Inquiries. The listing of a company's inquiry in this section means that they obtained information from your credit file in connection with an account review or other business transaction with you. These inquiries are not seen by anyone but you and will not be used in scoring your credit file (except insurance companies may have access to other insurance company inquiries, certain collection companies may have access to other collection company inquiries, and users of a report for employment purposes may have access to other employment inquiries, where permitted by law).



## Personal Information

SSN: XXX-XX-2170

You have been on our files since 10/01/1975

Date of Birth: 01/04/1939

**Names Reported:** DOROTHY C. BABSON, DOROTHY W. BABSON, and DOROTHY C. BARSON

## Addresses Reported:

Address  
3231 CLARK PKWY, WESTLAKE, OH 44145-4644

Date Reported  
10/01/1997

Address  
1001 ISLAMORADA BLVD APT 13C, PUNTA GORDA, FL  
33955-1813

Date Reported  
02/01/2001

PO BOX 450746, WESTLAKE, OH 44145-0615

## Telephone Numbers Reported:

(440) 835-1252 (216) 835-1252

## Employment Data Reported:

Employer Name  
BABSON GARDEN CTR

Date Verified  
04/01/1989

## Account Information

Typically, creditors report any changes made to your account information monthly. This means that some accounts listed below may not reflect the most recent activity until the creditor's next reporting. This information may include things such as balances, payments, dates, remarks, ratings, etc. The key(s) below are provided to help you understand some of the account information that could be reported.

### Rating Key

Some creditors report the timeliness of your payments each month in relation to your agreement with them. The ratings in the key below describe the payments that may be reported by your creditors. Any rating that is shaded indicates that it is considered adverse. Please note: Some but not all of these ratings may be present in your credit report.

N/R	X	OK	30	60	90	120	COL	VS	RPO	C/O	FC
Not Reported	Unknown	Current	30 days late	60 days late	90 days late	120+ days late	Collection	Voluntary Surrender	Repossession	Charge Off	Foreclosure

### Remark Key

Additionally, some creditors may notate your account with comments each month. We refer to these creditor comments as "Remarks". The key below gives the descriptions of the abbreviated remarks contained in your credit file. Any remark containing brackets ( ) indicates that this remark is considered adverse.

DRC DISP INVG COMP CONSUM DISAGRS

## Satisfactory Accounts

**AMERICAN EXPRESS #349992351564\*\*\*\*** (PO BOX 981537, EL PASO, TX 79998, (800) 874-2717)

Date Opened: 06/01/2016

Date Updated: 04/19/2017

Pay Status: Current; Paid or Paying as Agreed  
Terms: Paid Monthly

Responsibility: Individual Account

Account Type: Revolving Account

Loan Type: CREDIT CARD

Credit Limit: Credit limit of \$25,000 from 07/2016 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016
Balance	\$2,562	\$2,458	\$2,312	\$2,069	\$2,303	\$271	\$215	\$241	\$14	\$810
Scheduled Payment		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
High Balance	\$2,562	\$2,458	\$2,312	\$2,303	\$2,303	\$810	\$810	\$810	\$810	\$810
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

**AMERICAN EXPRESS #349991749829\*\*\*\*** (PO BOX 981537, EL PASO, TX 79998, (800) 874-2717)

Date Opened: 05/10/2010

Balance: \$0

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Relationship Terminated (07/13/2016)

Date Updated: 07/13/2016

Terms: Paid Monthly

Account Type: Revolving Account

High Balance: \$3,073

Date Closed: 06/17/2016

Loan Type: CREDIT CARD

Credit Limit: \$7,900

Remarks: PURCHASED BY ANOTHER LENDER

	06/2016	05/2016	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015
Rating	X	X	X	X	X	X	X	X	X	X	X	X
	06/2015	05/2015	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014
Rating	X	X	X	X	X	X	X	X	X	X	X	X

To dispute online go to: <http://transunion.com/disputeonline>



Consumer Credit Report for DOROTHY C. BABSON

File Number: 356360124 Date Issued: 05/03/2017

	06/2014	05/2014	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>N/R</div>
	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	10/2010	09/2010	08/2010	07/2010												
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>												

**BARCLAYS BANK DELAWARE #00005382011\*\*\*\*** (125 S WEST ST, WILMINGTON, DE 19801, (866) 370-5931)

Date Opened: 07/06/2007

Balance: \$0

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Authorized Account

Date Updated: 11/27/2013

Terms: Paid Monthly

Account Type: Revolving Account

High Balance: \$0

Date Closed: 07/15/2009

Loan Type: FLEXIBLE SPENDING CREDIT CARD

Credit Limit: \$50,000

Remarks: ACCOUNT CLOSED BY CONSUMER; CLOSED

	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012	11/2012				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	10/2011	09/2011	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	10/2010	09/2010	08/2010	07/2010	06/2010	05/2010	04/2010	03/2010	02/2010	01/2010	12/2009	11/2009	10/2009	09/2009	08/2009	07/2009
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	06/2009	05/2009	04/2009	03/2009	02/2009	01/2009	12/2008	11/2008	10/2008	09/2008	08/2008	07/2008	06/2008	05/2008	04/2008	03/2008
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	02/2008	01/2008	12/2007	11/2007	10/2007	09/2007	08/2007	07/2007								
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>								

**BEST BUY/CBNA #603535028077\*\*\*\*** (PO BOX 6497, SIOUX FALLS, SD 57117, Phone number not available)

Date Opened: 10/17/2015

Date Updated: 04/22/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Last Payment Made: 08/12/2016

Terms: Paid Monthly

Account Type: Revolving Account

Date Paid: 08/12/2016

Loan Type: CHARGE ACCOUNT

High Balance: High balance of \$1,166 from 10/2015 to 04/2017

Credit Limit: Credit limit of \$6,000 from 10/2015 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$126	\$226	\$32
Scheduled Payment		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$25	\$25	\$2
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015					
Balance	\$426	\$526	\$626	\$726	\$826	\$926	\$1,166					
Scheduled Payment	\$25	\$25	\$25	\$25	\$25	\$25	\$25					
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0	\$0					
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0					
Rating	OK	OK	OK	OK	OK	OK	OK					

**CAPITAL ONE #552030008823\*\*\*\*** (P O BOX 30253, SALT LAKE CITY, UT 84130-0253, (800) 947-1000)

Date Opened: 11/13/1992

Date Updated: 04/25/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Joint Account

Last Payment Made: 01/16/2014

Terms: Paid Monthly

Account Type: Revolving Account

Date Paid: 01/16/2014

Loan Type: CREDIT CARD

High Balance: High balance of \$11,057 from 11/2014 to 04/2017

Credit Limit: Credit limit of \$15,000 from 11/2014 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$
Scheduled Payment		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$
Remarks	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DR
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

To dispute online go to: <http://transunion.com/disputeonline>

P 6X10F-002 02590-1034586 04/



	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015				
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Scheduled Payment	\$0	\$0	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25				
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Remarks	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC	DRC				
Rating	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK				
	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014				
Balance	\$0	\$0	\$0	\$0	\$0	\$0										
Scheduled Payment	\$25	\$25	\$25	\$25	\$25	\$25										
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0										
Past Due	\$0	\$0	\$0	\$0	\$0	\$0										
Remarks	DRC	DRC	DRC	DRC	DRC	DRC										
Rating	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK				
	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013
Rating	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK
	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011
Rating	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK
	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	
Rating	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	<input type="checkbox"/> OK	

**CAPITAL ONE #552030009093\*\*\*\*** (P O BOX 30253, SALT LAKE CITY, UT 84130-0253, (800) 947-1000)

Date Opened: 11/13/1992  
 Responsibility: Joint Account  
 Account Type: Revolving Account  
 Loan Type: CREDIT CARD

Balance: \$0  
 Date Updated: 04/30/2008  
 Payment Received: \$1,917  
 Last Payment Made: 04/06/2008  
 High Balance: \$11,057

Pay Status: Current; Paid or Paying as Agreed  
 Terms: Paid Monthly  
 Date Closed: 04/30/2008

Remarks: DISP INVG COMP-CONSUM DISAGRS; CREDIT CARD LOST OR STOLEN; CLOSED

	03/2008	02/2008	01/2008	12/2007	11/2007	10/2007	09/2007	08/2007	07/2007	06/2007	05/2007	04/2007
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	03/2007	02/2007	01/2007	12/2006	11/2006	10/2006	09/2006	08/2006	07/2006	06/2006	05/2006	04/2006
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	03/2006	02/2006	01/2006	12/2005	11/2005	10/2005	09/2005	08/2005				
Rating	OK	OK	OK	OK	OK	OK	OK	OK				

**CITICARDS CBNA #410039049956\*\*\*\*** (PO BOX 6190, SIOUX FALLS, SD 57117, (855) 378-6467)

Date Opened: 05/10/2010  
 Responsibility: Authorized Account  
 Account Type: Revolving Account  
 Loan Type: FLEXIBLE SPENDING CREDIT CARD

Date Updated: 04/07/2017  
 Last Payment Made: 03/29/2017

Pay Status: Current; Paid or Paying as Agreed  
 Terms: \$25 per month, paid Monthly

High Balance: High balance of \$5,211 from 09/2016 to 04/2017

Credit Limit: Credit limit of \$7,900 from 09/2016 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016
Balance	\$621	\$534	\$367	\$421	\$778	\$587	\$679	\$597
Scheduled Payment	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK

**COMENITY BANK/BEALFL #585637350831\*\*\*\*** (P O BOX 182789, COLUMBUS, OH 43218-2789, Phone number not available)

Date Opened: 03/25/2015  
 Responsibility: Individual Account  
 Account Type: Revolving Account  
 Loan Type: CHARGE ACCOUNT

Date Updated: 07/17/2015  
 Last Payment Made: 06/04/2015

Pay Status: Current; Paid or Paying as Agreed  
 Terms: Paid Monthly  
 Date Paid: 06/04/2015

High Balance: High balance of \$121 from 04/2015 to 07/2015

Credit Limit: Credit limit of \$1,500 from 04/2015 to 07/2015

	07/2015	06/2015	05/2015	04/2015
Balance	\$0	\$0	\$56	\$121
Scheduled Payment		\$25	\$25	\$25
Amount Paid		\$56	\$121	\$0
Past Due		\$0	\$0	\$0
Rating	OK	OK	OK	OK



**DSNB/MACYS #41604173\*\*\*\*** (PO BOX 8218, MASON, OH 45050, (800) 289-6229)

Date Opened: 10/01/1975

Date Updated: 04/29/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Last Payment Made: 03/24/2017

Terms: Paid Monthly

Account Type: Revolving Account

Date Paid: 03/24/2017

Loan Type: CHARGE ACCOUNT

High Balance: High balance of \$1,136 from 11/2014 to 08/2015; \$1,136 from 12/2015 to 04/2017

Credit Limit: Credit limit of \$2,300 from 11/2014 to 08/2015; \$2,300 from 12/2015 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016				
Balance	\$0	\$0	\$69	\$21	\$37	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Scheduled Payment		\$0	\$27	\$21	\$27	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015				
Balance	\$0	\$0	\$0	\$0	\$19				\$120	\$123	\$0	\$0				
Scheduled Payment	\$0	\$0	\$19	\$19	\$19				\$5	\$5	\$5	\$5				
Amount Paid	\$0	\$0	\$0	\$0	\$0				\$0	\$0	\$0	\$121				
Past Due	\$0	\$0	\$0	\$0	\$0				\$0	\$0	\$0	\$0				
Rating	OK	OK	OK	OK	OK	N/R	N/R	N/R	OK	OK	OK	OK				
	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014				
Balance	\$121	\$0	\$0	\$0	\$205	\$7										
Scheduled Payment	\$5	\$7	\$7	\$7	\$7	\$5										
Amount Paid	\$0	\$0	\$0	\$205	\$7	\$0										
Past Due	\$0	\$0	\$0	\$0	\$0	\$0										
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	

**KOHL'S DEPARTMENT STORE #2664750\*\*\*\*** (PO BOX 15298, WILMINGTON, DE 19850, (800) 564-5740)

Date Opened: 06/27/1997

Balance: \$0

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Joint Account

Date Updated: 02/18/2010

Date Closed: 02/16/2010

Account Type: Revolving Account

Payment Received: \$46

Date Paid: 01/09/2008

Loan Type: CHARGE ACCOUNT

Last Payment Made: 01/09/2008

High Balance: \$355

Credit Limit: \$2,000

Remarks: INACTIVE ACCOUNT; CLOSED

	01/2010	12/2009	11/2009	10/2009	09/2009	08/2009	07/2009	06/2009	05/2009	04/2009	03/2009	02/2009				
Rating	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>				
	01/2009	12/2008	11/2008	10/2008	09/2008	08/2008	07/2008	06/2008	05/2008	04/2008	03/2008	02/2008				
Rating	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>				
	01/2008	12/2007	11/2007	10/2007	09/2007	08/2007	07/2007	06/2007	05/2007	04/2007	03/2007	02/2007				
Rating	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>				
	01/2007	12/2006	11/2006	10/2006	09/2006	08/2006	07/2006	06/2006	05/2006	04/2006	03/2006	02/2006	01/2006	12/2005	11/2005	10/2005
Rating	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>
	09/2005	08/2005	07/2005	06/2005	05/2005	04/2005	03/2005	02/2005	01/2005	12/2004	11/2004	10/2004	09/2004	08/2004	07/2004	06/2004
Rating	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>
	05/2004	04/2004	03/2004	02/2004	01/2004	12/2003	11/2003	10/2003	09/2003	08/2003	07/2003	06/2003	05/2003	04/2003		
Rating	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>	<input type="text" value="OK"/>		

**SYNCB/BELK #604583159483\*\*\*\*** (PO BOX 965005, ORLANDO, FL 32896, (800) 669-6550)

Date Opened: 05/17/2015

Date Updated: 04/21/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Last Payment Made: 06/09/2015

Terms: Paid Monthly

Account Type: Revolving Account

Date Paid: 06/09/2015

Loan Type: CHARGE ACCOUNT

High Balance: High balance of \$201 from 05/2015 to 05/2015; \$231 from 06/2015 to 04/2017

Credit Limit: Credit limit of \$1,500 from 05/2015 to 07/2015; \$1,800 from 08/2015 to 06/2016; \$1,024 from 07/2016 to 04/2017



Consumer Credit Report for DOROTHY C. BABSON

File Number: 356360124 Date Issued: 05/03/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Scheduled Payment		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$201
Scheduled Payment	\$0	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

**SYNCB/BELK #604583152243\*\*\*\*** (PO BOX 965005, ORLANDO, FL 32896, (800) 669-6550)

Date Opened: 02/24/2009  
 Responsibility: Individual Account  
 Account Type: Revolving Account  
 Loan Type: CHARGE ACCOUNT

Balance: \$0  
 Date Updated: 07/31/2015  
 Last Payment Made: 02/12/2010  
 High Balance: \$291  
 Credit Limit: \$124

Pay Status: Current; Paid or Paying as Agreed  
 Terms: Paid Monthly  
 Date Closed: 03/31/2013  
 Date Paid: 02/12/2010

Remarks: CLOSED

	06/2015	05/2015	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	06/2014	05/2014	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	05/2010	04/2010	03/2010	02/2010	01/2010	12/2009	11/2009
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	10/2009	09/2009	08/2009	07/2009	06/2009	05/2009	04/2009	03/2009	02/2009
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK

**SYNCB/HH GREGG #601917021177\*\*\*\*** (PO BOX 965036, ORLANDO, FL 32896-5036, (866) 396-8254)

Date Opened: 12/20/2006  
 Responsibility: Individual Account  
 Account Type: Revolving Account  
 Loan Type: CHARGE ACCOUNT

Balance: \$0  
 Date Updated: 09/16/2016  
 Last Payment Made: 12/23/2007  
 High Balance: \$3,399  
 Credit Limit: \$8,000

Pay Status: Current; Paid or Paying as Agreed  
 Terms: Paid Monthly  
 Date Closed: 01/30/2011  
 Date Paid: 12/23/2007

Remarks: INACTIVE ACCOUNT; CLOSED

	08/2016	07/2016	06/2016	05/2016	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	08/2015	07/2015	06/2015	05/2015	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	08/2014	07/2014	06/2014	05/2014	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	05/2010	04/2010	03/2010	02/2010	01/2010	12/2009	11/2009
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

**SYNCB/JC PENNEY #600889072168\*\*\*\*** (PO BOX 965007, ORLANDO, FL 32896-5007, (866) 227-5213)

Date Opened: 04/23/1983  
 Responsibility: Individual Account  
 Account Type: Revolving Account  
 Loan Type: CHARGE ACCOUNT

Date Updated: 04/09/2017  
 Last Payment Made: 02/02/2015

Pay Status: Current; Paid or Paying as Agreed  
 Terms: Paid Monthly  
 Date Paid: 02/02/2015

High Balance: High balance of \$610 from 11/2014 to 04/2017  
 Credit Limit: Credit limit of \$1,000 from 11/2014 to 04/2017



Consumer Credit Report for DOROTHY C. BABSON

File Number: 356360124 Date Issued: 05/03/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016				
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Scheduled Payment		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015				
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Scheduled Payment	\$0	\$17	\$17	\$17	\$17	\$17	\$17	\$17	\$17	\$17	\$17	\$17				
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014				
Balance	\$0	\$0	\$0	\$17	\$0	\$0										
Scheduled Payment	\$17	\$17	\$17	\$17	\$0	\$0										
Amount Paid	\$0	\$0	\$17	\$0	\$0	\$0										
Past Due	\$0	\$0	\$0	\$0	\$0	\$0										
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	

**SYNCB/KIRKLANDS #604412103434\*\*\*\*** (PO BOX 965005, ORLANDO, FL 32896-5005, (866) 230-9175)

Date Opened: 01/20/2010  
 Responsibility: Individual Account  
 Account Type: Revolving Account  
 Loan Type: CHARGE ACCOUNT

Balance: \$0  
 Date Updated: 04/21/2017  
 Last Payment Made: 03/08/2010  
 High Balance: \$88  
 Credit Limit: \$124

Pay Status: Current; Paid or Paying as Agreed  
 Terms: Paid Monthly  
 Date Closed: 01/03/2012  
 Date Paid: 03/08/2010

Remarks: CLOSED

	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016	04/2016				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015	04/2015				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014	04/2014				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010		
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>		

**SYNCB/LEVIN FURNITURE #601919270229\*\*\*\*** (C/O P.O. BOX 965036, ORLANDO, FL 32896-5036, (866) 396-8254)

Date Opened: 10/04/2015  
 Responsibility: Individual Account  
 Account Type: Revolving Account  
 Loan Type: CHARGE ACCOUNT

Date Updated: 04/21/2017  
 Payment Received: \$100  
 Last Payment Made: 04/10/2017

Pay Status: Current; Paid or Paying as Agreed  
 Terms: \$77 per month, paid Monthly

High Balance: High balance of \$5,502 from 10/2015 to 04/2017

Credit Limit: Credit limit of \$6,500 from 10/2015 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$2,150	\$2,250	\$2,350	\$2,450	\$2,550	\$2,657	\$2,757	\$2,857	\$2,957	\$3,057	\$3,157	\$3,257
Scheduled Payment	\$77	\$77	\$77	\$77	\$77	\$77	\$77	\$77	\$77	\$77	\$77	\$77
Amount Paid	\$100	\$100	\$100	\$100	\$107	\$100	\$100	\$100	\$100	\$100	\$100	\$100
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

To dispute online go to: <http://transunion.com/disputeonline>

P 6X10F-002 02590-1034590 08:



	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015
Balance	\$3,357	\$4,022	\$4,422	\$4,822	\$5,022	\$5,222	\$5,502
Scheduled Payment	\$77	\$102	\$109	\$121	\$125	\$129	\$136
Amount Paid	\$665	\$400	\$400	\$200	\$0	\$0	\$0
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK

**SYNCB/ROOMS TO GO #601919123642\*\*\*\*** (C/O PO BOX 965036, ORLANDO, FL 32896-5036, (866) 396-8254)

Date Opened: 02/10/2016

Date Updated: 04/18/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Last Payment Made: 01/06/2017

Terms: Paid Monthly

Account Type: Revolving Account

Date Paid: 01/06/2017

Loan Type: CHARGE ACCOUNT

High Balance: High balance of \$0 from 02/2016 to 02/2016; \$588 from 03/2016 to 04/2017

Credit Limit: Credit limit of \$6,500 from 02/2016 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$0	\$0	\$0	\$0	\$100	\$188	\$238	\$288	\$338	\$388	\$438	\$488
Scheduled Payment		\$0	\$0	\$0	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50
Amount Paid		\$0	\$0	\$100	\$88	\$50	\$50	\$50	\$50	\$50	\$50	\$50
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	04/2016	03/2016	02/2016
Balance	\$538	\$588	\$0
Scheduled Payment	\$50	\$50	\$0
Amount Paid	\$50	\$0	\$0
Past Due	\$0	\$0	\$0
Rating	OK	OK	OK

**SYNCB/TJX CO PLCC #604585200070\*\*\*\*** (PO BOX 965015, ORLANDO, FL 32896, (800) 926-6299)

Date Opened: 05/07/2009

Balance: \$0

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Date Updated: 04/25/2017

Terms: Paid Monthly

Account Type: Revolving Account

High Balance: \$135

Date Closed: 09/28/2011

Loan Type: CHARGE ACCOUNT

Credit Limit: \$1,200

Remarks: CLOSED

	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016	04/2016				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015	04/2015				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014	04/2014				
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>				
	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>
	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010		
Rating	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>	<div>OK</div>		

**SYNCB/WALMART DUAL CARD #523914111441\*\*\*\*** (P O BOX 965024, ORLANDO, FL 32896-5024, (866) 611-1148)

Date Opened: 02/11/2016

Date Updated: 04/18/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Payment Received: \$25

Terms: \$25 per month, paid Monthly

Account Type: Revolving Account

Last Payment Made: 04/07/2017

Loan Type: CREDIT CARD

High Balance: High balance of \$834 from 02/2016 to 04/2017

Credit Limit: Credit limit of \$2,900 from 02/2016 to 05/2016; \$5,000 from 06/2016 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$177	\$202	\$252	\$302	\$352	\$402	\$427	\$452	\$502	\$577	\$627	\$677
Scheduled Payment	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
Amount Paid	\$25	\$50	\$50	\$50	\$50	\$25	\$25	\$50	\$75	\$50	\$50	\$50
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK



	04/2016	03/2016	02/2016
Balance	\$727	\$780	\$829
Scheduled Payment	\$25	\$25	\$25
Amount Paid	\$50	\$0	\$0
Past Due	\$0	\$0	\$0
Rating	OK	OK	OK

**US BANK #300038\*\*\*\*** (CRA MANAGEMENT, PO BOX 3447, OSHKOSH, WI 54903, (844) 624-8230)

Date Opened: 07/13/2005

Date Updated: 03/31/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Individual Account

Payment Received: \$2,000

Terms: \$286 per month, paid Monthly

Account Type: Line of Credit Account

Last Payment Made: 03/09/2017

Loan Type: HOME EQUITY LOAN

High Balance: High balance of \$184,764 from 11/2014 to 03/2017

Credit Limit: Credit limit of \$216,000 from 11/2014 to 03/2017

	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016	04/2016				
Balance	\$18,320	\$20,260	\$21,899	\$22,828	\$24,254	\$25,727	\$26,943	\$28,458	\$29,966	\$31,368	\$32,569	\$33,863				
Scheduled Payment	\$286	\$294	\$297	\$300	\$305	\$307	\$314	\$318	\$319	\$325	\$325	\$331				
Amount Paid	\$2,000	\$1,700	\$1,000	\$1,500	\$1,550	\$1,300	\$1,600	\$1,600	\$1,500	\$1,300	\$1,400	\$1,200				
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015	04/2015				
Balance	\$34,956	\$36,143	\$37,933	\$38,810	\$39,684	\$40,560	\$42,528	\$35,504	\$37,383	\$38,256	\$39,130	\$40,097				
Scheduled Payment	\$329	\$339	\$342	\$339	\$351	\$115	\$124	\$128	\$126	\$134	\$133	\$141				
Amount Paid	\$1,300	\$1,900	\$1,000	\$1,000	\$1,000	\$2,100	\$1,100	\$2,000	\$1,000	\$1,000	\$1,100	\$1,400				
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014	04/2014				
Balance	\$41,365	\$42,425	\$43,795	\$45,146	\$45,993											
Scheduled Payment	\$132	\$150	\$154	\$150	\$158											
Amount Paid	\$1,200	\$1,500	\$1,500	\$1,000	\$300											
Past Due	\$0	\$0	\$0	\$0	\$0											
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK				
	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	05/2010	
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	

**WELLS FARGO NA/DILLARDS #579674119040\*\*\*\*** (CREDIT BUREAU DISP, PO BOX 14517, DES MOINES, IA 50306, (800) 642-4720)

Date Opened: 01/01/1988

Date Updated: 03/29/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Joint Account

Payment Received: \$51

Terms: Paid Monthly

Account Type: Revolving Account

Last Payment Made: 03/22/2017

Date Paid: 03/22/2017

Loan Type: CHARGE ACCOUNT

High Balance: High balance of \$705 from 11/2014 to 11/2014; \$705 from 01/2015 to 03/2017

Credit Limit: Credit limit of \$1,000 from 11/2014 to 11/2014; \$1,000 from 01/2015 to 03/2017

	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016	04/2016
Balance	\$0	\$51	\$142	\$0	\$0	\$164	\$0	\$0	\$0	\$0	\$0	\$0
Scheduled Payment		\$25	\$25	\$0	\$0	\$25	\$0	\$0	\$0	\$0	\$0	\$0
Amount Paid	\$51	\$142	\$0	\$0	\$164	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015	04/2015
Balance	\$0	\$104	\$143	\$61	\$81	\$55	\$136	\$0	\$24	\$0	\$0	\$0
Scheduled Payment	\$0	\$35	\$40	\$35	\$35	\$25	\$25	\$24	\$24	\$0	\$0	\$0
Amount Paid	\$104	\$108	\$61	\$55	\$0	\$136	\$0	\$24	\$0	\$0	\$0	\$0
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK



	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014	04/2014
Balance	\$0	\$0	\$0	\$0	\$0	\$0						
Scheduled Payment	\$0	\$0	\$0	\$0	\$0	\$0						
Amount Paid	\$0	\$0	\$354	\$0	\$0	\$0						
Past Due	\$0	\$0	\$0	\$0	\$0	\$0						
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013	12/2012
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011	08/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010	05/2010
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

**WORLD'S FOREMOST BANK #430023003404\*\*\*\*** (4800 NW 1ST ST STE 300, LINCOLN, NE 68521-4463, (800) 850-8402)

Date Opened: 12/10/2004

Date Updated: 04/13/2017

Pay Status: Current; Paid or Paying as Agreed

Responsibility: Joint Account

Last Payment Made: 10/31/2013

Terms: Paid Monthly

Account Type: Revolving Account

Loan Type: CREDIT CARD

High Balance: High balance of \$1,398 from 11/2014 to 04/2017

Credit Limit: Credit limit of \$21,000 from 11/2014 to 04/2017

	04/2017	03/2017	02/2017	01/2017	12/2016	11/2016	10/2016	09/2016	08/2016	07/2016	06/2016	05/2016
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Scheduled Payment		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Amount Paid		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	04/2016	03/2016	02/2016	01/2016	12/2015	11/2015	10/2015	09/2015	08/2015	07/2015	06/2015	05/2015
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Scheduled Payment	\$0	\$28	\$28	\$28	\$28	\$28	\$28	\$28	\$28	\$28	\$28	\$28
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Past Due	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	04/2015	03/2015	02/2015	01/2015	12/2014	11/2014	10/2014	09/2014	08/2014	07/2014	06/2014	05/2014
Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0					
Scheduled Payment	\$28	\$28	\$28	\$28	\$28	\$28						
Amount Paid	\$0	\$0	\$0	\$0	\$0	\$0						
Past Due	\$0	\$0	\$0	\$0	\$0	\$0						
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	04/2014	03/2014	02/2014	01/2014	12/2013	11/2013	10/2013	09/2013	08/2013	07/2013	06/2013	05/2013	04/2013	03/2013	02/2013	01/2013
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	12/2012	11/2012	10/2012	09/2012	08/2012	07/2012	06/2012	05/2012	04/2012	03/2012	02/2012	01/2012	12/2011	11/2011	10/2011	09/2011
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

	08/2011	07/2011	06/2011	05/2011	04/2011	03/2011	02/2011	01/2011	12/2010	11/2010	10/2010	09/2010	08/2010	07/2010	06/2010
Rating	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

**Regular Inquiries**

SYNCB ( CO PO BOX 965037, ORLANDO, FL 32896, (866) 419-4096 )

Requested On: 10/03/2015

Inquiry Type: Individual

SYNCBELK ( PO BOX 965028, ORLANDO, FL 32896, (800) 669-6550 )

Requested On: 05/17/2015

Inquiry Type: Individual

**Promotional Inquiries**

AUTO CLUB GROUP ( 1 AUTO CLUB DR, DEARBORN, MI 48126-4213, (313) 222-6424 )

Requested On: 02/27/2017, 01/26/2017, 11/25/2016, 07/26/2016, 05/14/2016

CHASE MORTGAGE ( P.O. BOX 24696, COLUMBUS, OH 43224, (800) 848-9136 )

Requested On: 10/26/2016, 08/31/2016, 07/06/2016

FST BANK SYSTEM ( 4325 17TH AVE S, FARGO, ND 58103, (612) 370-4141 )

Requested On: 10/10/2016, 08/19/2016, 07/18/2016



**GE MONEY** ( 4246 SOUTH RIVERBOAT RD, SALT LAKE CITY, UT 84123, (866) 423-3796 )  
Requested On: 09/28/2016

**FIRST USA** ( 800 BROOKSEGE BLVD, WESTERVILLE, OH 43081-2822, (877) 242-7372 )  
Requested On: 07/02/2016, 06/02/2016

**THE TRAVELERS COMPANIES** ( 1 TOWER SQ, 18CP, HARTFORD, CT 06183-0001, (866) 240-2682 )  
Requested On: 05/14/2016

## Account Review Inquiries

**SYNCB/JC PENNEY** ( PO BOX 965007, ORLANDO, FL 32896-5007, (866) 227-5213 )  
Requested On: 02/28/2017

**SYNCB/BELK** ( PO BOX 965005, ORLANDO, FL 32896, (800) 669-6550 )  
Requested On: 02/28/2017

**SYNCB/WALMART DUAL CARD** ( P O BOX 965024, ORLANDO, FL 32896-5024, (866) 611-1148 )  
Requested On: 02/28/2017

**SYNCB/LEVIN FURNITURE** ( C/O P.O. BOX 965036, ORLANDO, FL 32896-5036, (866) 396-8254 )  
Requested On: 02/22/2017

**SYNCB/ROOMS TO GO** ( C/O PO BOX 965036, ORLANDO, FL 32896-5036, (866) 396-8254 )  
Requested On: 02/22/2017

**FRAUD ALERT FREE DISCLOSU** ( P O BOX 1000, CHESTER, PA 19016, (800) 888-4213 )  
Requested On: 09/29/2016

**HASTINGS MUTUAL INS CO** ( 3001 EAST BYPASS, COLLEGE STATIO, TX 77845, (800) 442-8877 )  
Permissible Purpose: INSURANCE UNDERWRITING  
Requested On: 05/25/2016

**SAFECO INS AUTO** ( SAFECO PLAZA, 1001 FOURTH AVENUE, SEATTLE, WA 98154, (888) 398-8924 )  
Permissible Purpose: INSURANCE UNDERWRITING  
Requested On: 05/25/2016

**TRAVELERS via TRAVELERS** ( PO BOX 42486, HOUSTON, TX 77242, (800) 550-7717 )  
Permissible Purpose: INSURANCE UNDERWRITING  
Requested On: 05/13/2016, 07/21/2015

## Should you wish to contact TransUnion, you may do so,

### Online:

To dispute information contained in your credit report, please visit: [www.transunion.com/disputeonline](http://www.transunion.com/disputeonline)  
For answers to general questions, please visit: [www.transunion.com](http://www.transunion.com)

### By Mail:

TransUnion Consumer Relations  
P.O. Box 2000  
Chester, PA 19016-2000

### By Phone:

(800) 916-8800

You may contact us between the hours of 8:00 a.m. and 11:00 p.m. Eastern Time, Monday through Friday, except major holidays.

For all correspondence, please have your TransUnion file number available (located at the top of this report).





## Summary of Rights

### GENERAL SUMMARY OF CONSUMER RIGHTS UNDER THE FCRA

Para informacion en espanol, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

#### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment -- or to take another adverse action against you--must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security Number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for more additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688 (888-5OPTOUT).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).



**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:**

<b>TYPE OF BUSINESS:</b>	<b>CONTACT:</b>
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates	Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
2. To the extent not included in item 1 above:	
a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks	Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act	Federal Reserve Consumer Help (FRCH) PO Box 1200 Minneapolis, MN 55480 1-888-851-1920
c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and Insured state savings associations	FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
d. Federal Credit Unions	National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590 1-202-366-1306
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors subject to Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street NE Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center-FCRA Washington, DC 20580 1-877-382-4357

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## OHIO BILL OF RIGHTS

### Ohio Consumers Have the Right to Obtain a Security Freeze

"You may obtain a "security freeze" on your credit report to protect your privacy and ensure that credit is not granted in your name without your knowledge. You have a right to place a "security freeze" on your credit report pursuant to Ohio law. The "security freeze" will prohibit a consumer reporting agency from releasing any information in your credit report without your express authorization or approval. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. When you place a security freeze on your credit report, within five business days you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or to temporarily authorize the release of your credit report for a specific party or parties or for a specific period of time after the security freeze is in place. To provide that authorization you must contact the consumer reporting agency and provide all of the following:

- (a) Information generally considered sufficient to identify the consumer;
- (b) The unique personal identification number or password provided by the consumer credit reporting agency; and
- (c) The proper information regarding the third party who is to receive the consumer credit report or the time period for which the credit report shall be available to users of the credit report.

A consumer reporting agency that receives a request from a consumer to temporarily lift a security freeze on a credit report shall comply with the request not later than fifteen minutes after receiving the request.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control, or similar activities.

You have a right to bring civil action against anyone, including a consumer reporting agency, who improperly obtains access to a file, knowingly or willfully misuses file data, or fails to correct inaccurate file data.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your own applications for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, a few days before actually applying for new credit

The parent or guardian of a minor under the age of sixteen or the guardian or conservator of an incapacitated or protected adult, collectively referred to as a "protected consumer" may seek a security freeze to protect the identity of a protected consumer and ensure that credit is not inappropriately granted in the protected consumer's name. In order to request a security freeze for a protected consumer, the protected consumer's parent, guardian, or conservator must present sufficient proof of authority to act on the protected consumer's behalf. The parent, guardian, or conservator must also present sufficient proof of identity for the parent, guardian, or conservator, in addition to proof of identity for the protected consumer

In order for the representative of a protected consumer to request the removal of a security freeze of a protected consumer, the representative must contact the consumer credit reporting agency and provide all of the following:

- (a) Sufficient proof of identity for both the protected consumer and the protected consumer's representative;
- (b) Sufficient proof of authority to act on the behalf of the protected consumer.

A minor protected consumer, upon reaching sixteen years of age, may also request that the security freeze be removed. A minor protected consumer making such a request must provide proof of identity and age.

A consumer credit reporting agency that receives a proper request by certified mail or other comparable service, secure electronic method selected by the consumer credit reporting agency, telephone, or by any other means authorized by the consumer credit reporting agency to remove a security freeze on a credit report shall comply with the request not later than thirty days after receiving the request. A security freeze does not apply to circumstances in which a protected consumer already has an existing account relationship and a copy of the protected consumer's credit report is requested by the protected consumer's existing creditor or its agents or affiliates for certain types of account review, collection, fraud control, or similar activities. If a protected consumer is actively seeking credit, it should be understood that the



procedures involved in removing a security freeze may slow any applications for credit. Plan ahead and remove a freeze a month before actually applying for new credit."

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**Exhibit C-8 "Bankruptcy  
Information"**

The applicant has not filed any reorganization, protection from creditors or other form of bankruptcy.



**Exhibit C-9 "Merger  
Information"**

The applicant has not been involved with any dissolution, merger, or acquisition within the five most recent years, or ever, in the history of the company.



CLE Power Inc

Exhibit C-10  
"Corporate Structure"

Stand Alone Entity