

17-1313-EL-AGG



Original AGG Case Number	Version
- EL-AGG	May 2016

FILE

RENEWAL APPLICATION FOR ELECTRIC AGGREGATORS/POWER BROKERS

Please print or type all required information. Identify all attachments with an exhibit label and title (Example: Exhibit C-10 Corporate Structure). 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. RENEWAL 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, PUCO certificate number, and web site address

Legal Name Greg Loughhead
 Address 3240 Oakwood Ln Westlake Ohio 44145
 PUCO Certificate # and Date Certified _____
 Telephone # 216-346-3258 Web site address (if any) www.clepower.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 Ln Westlake Ohio 44145
 Telephone # 216-346-3258 Web site address (if any) www.clepower.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 Loughhead
 Title Owner
 Business address 3240 Oakwood Ln Westlake Ohio 44145
 Telephone # 216-346-3258 Fax # _____
 E-mail address glclepower@gmail.com

RECEIVED-DOCKETING DIV
 2019 MAY 20 PM 1:49
 PUCO

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 Bmm Date Processed 05/20/19

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

Name Greg Loughead
Title Owner
Business address 3240 Oakwood Ln Westlake Ohio 44145
Telephone # 216-346-3258 Fax # _____
E-mail address glclepower@gmail.com

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

Customer Service address 3240 Oakwood Ln Westlake Ohio 44145
Toll-free Telephone # 216-345-3258 Fax # _____
E-mail address glclepower@gmail.com

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

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

- | | |
|--|---|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Limited Liability Partnership (LLP) | <input checked="" type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Other _____ |

PROVIDE THE FOLLOWING AS SEPARATE ATTACHMENTS AND LABEL AS INDICATED:

A-10 Exhibit A-10 "Principal Officers, Directors & Partners" provide the names, titles, addresses and telephone numbers of the applicant's principal officers, directors, partners, or other similar officials.

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 "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-4 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-4 "Disclosure of Consumer Protection Violations"** detailing such violation(s) and providing all relevant documents.

B-5 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-5 "Disclosure of Certification Denial, Curtailment, Suspension, or Revocation"** detailing such action(s) and providing all relevant documents.

C. 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 arrangements to conduct CRES as a business activity (e.g., guarantees, bank commitments, contractual arrangements, credit agreements, etc.).

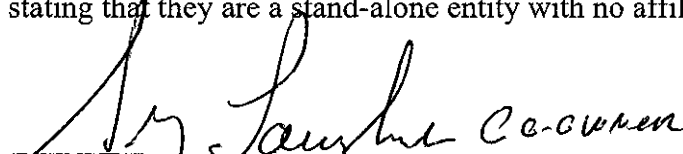
Renewal applicants can fulfill the requirements of Exhibit C-4 by providing a current statement from an Ohio local distribution utility (LDU) that shows that the applicant meets the LDU’s collateral requirements.

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.

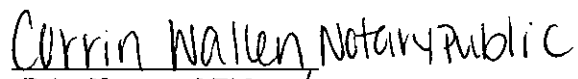
- C-5 Exhibit C-5 "Forecasted Financial Statements,"** provide two years of forecasted income statements for the applicant's **ELECTRIC related business activities in the state of Ohio Only**, along with a list of assumptions, and the name, address, email address, and telephone number of the preparer. 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, Fitch IBCA, Moody's Investors Service, Standard & Poor's, 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 an 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 Experion, 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 17 day of May, 2019
 Month Year


 Signature of official administering oath

CORRIN E. WALLEN
 Notary Public, State of Ohio
 My Comm. Expires Nov. 25, 2023


 Print Name and Title

My commission expires on NOV. 25, 2023
 Recorded in Lorain County



AFFIDAVIT

State of Ohio :

County of Cuyahoga :

North Olmsted ss.
(Town)



CORRIN E. WALLEN
Notary Public, State of Ohio
My Comm. Expires Nov. 25, 2023
Recorded in Lorain County

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

He/She is the _____ (Office of Affiant) of _____ (Name of Applicant);

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

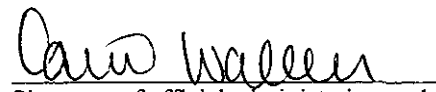
1. The Applicant herein, attests under penalty of false statement that all statements made in the application for certification renewal are true and complete and that it will amend its application while the application is pending if any substantial changes occur regarding the information provided in 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 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.
8. 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.
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 renewal 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 17 day of May, 2019
Month Year


Signature of official administering oath

Corrin Wallen, Notary Public
Print Name and Title



CORRIN E. WALLEN My commission expires on NOV. 25, 2023
Notary Public, State of Ohio
My Comm. Expires Nov. 25, 2023
Recorded in Lorain County

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

12:50 PM
05/17/19
Cash Basis

CLE Power, Inc.
Balance Sheet
As of December 31, 2018

	<u>Dec 31, 18</u>
ASSETS	
Current Assets	
Checking/Savings	
Checking Energy	3,423.35
Huntington 2813	-4,241.00
Total Checking/Savings	<u>-817.65</u>
Total Current Assets	<u>-817.65</u>
TOTAL ASSETS	<u>-817.65</u>
LIABILITIES & EQUITY	
Equity	
Distribution-Greg	-132,519.25
Health Ins	-8,784.16
Retained Earnings	33,029.35
Net Income	107,456.41
Total Equity	<u>-817.65</u>
TOTAL LIABILITIES & EQUITY	<u>-817.65</u>

12:49 PM
05/17/19
Cash Basis

CLE Power, Inc.
Profit & Loss
January through December 2018

	<u>Jan - Dec 18</u>
Ordinary Income/Expense	
Income	
Sales	575,053.05
Sales - Power	<u>13,122.22</u>
Total Income	588,175.27
Cost of Goods Sold	
Equipment	<u>439,558.14</u>
Total COGS	<u>439,558.14</u>
Gross Profit	148,617.13
Expense	
Advertising & promotions	2,169.50
Automobile Expense	9,810.00
Bank Service Charges	513.19
Commission	47.00
Computer and Internet Expenses	2,315.93
Meals and Entertainment	4,075.51
o/s - Jim Willis	200.00
O/S B Ziegler	291.92
O/S J Ziegler	7,777.02
O/S Lauri O'Neil	0.00
O/S Nicole	90.00
O/S Pat Gannon	500.00
Office Supplies	4,420.41
Permits and Fees	200.00
Postage and Delivery	74.96
Professional Fees	3,400.00
Repairs & Maintenance	32.39
Taxes other	2,180.50
Telephone Expense	1,040.89
Travel Expense	1,697.50
Web services	<u>324.00</u>
Total Expense	<u>41,160.72</u>
Net Ordinary Income	<u>107,456.41</u>
Net Income	<u><u>107,456.41</u></u>

12:50 PM
05/17/19
Cash Basis

CLE Power, Inc.
Balance Sheet
As of December 31, 2017

	<u>Dec 31, 17</u>
ASSETS	
Current Assets	
Checking/Savings	
Huntington 2813	29,431.55
Total Checking/Savings	<u>29,431.55</u>
Other Current Assets	
LOAN - JIMMY ZEIGAN	3,597.80
Total Other Current Assets	<u>3,597.80</u>
Total Current Assets	<u>33,029.35</u>
TOTAL ASSETS	<u><u>33,029.35</u></u>
LIABILITIES & EQUITY	
Equity	
Distribution-Greg	-91,707.40
Health Ins	-8,866.50
Retained Earnings	28,608.65
Net Income	105,094.60
Total Equity	<u>33,029.35</u>
TOTAL LIABILITIES & EQUITY	<u><u>33,029.35</u></u>

12:50 PM
05/17/19
Cash Basis

CLE Power, Inc.
Profit & Loss
January through December 2017

	<u>Jan - Dec 17</u>
Ordinary Income/Expense	
Income	
Sales	518,895.44
Total Income	518,895.44
Cost of Goods Sold	
Equipment	326,513.81
Total COGS	326,513.81
Gross Profit	192,381.63
Expense	
Advertising & promotions	2,667.92
Automobile Expenses	11,598.00
Bank Service Charges	332.24
Cable Internet	1,481.21
Convention fees	595.00
Dues and Subscriptions	114.24
Insurance Expense	831.00
Meals and Entertainment	5,792.76
o/s - Jim Willis	300.00
o/s Cheryl Mikfur	500.00
O/S Fin Power	4,500.00
O/S Lauri O'Neil	-3,700.00
O/S Laurie	3,700.00
Office Supplies	1,225.72
Officers Compensation	45,500.00
Parking and Tolls	20.00
Postage and Delivery	730.27
Professional Fees	2,100.00
Repairs & Maintenance	1,802.34
Security service	542.93
Taxes other	1,464.00
Telephone Expense	2,023.44
Travel Expense	3,165.96
Total Expense	87,287.03
Net Ordinary Income	105,094.60
Net Income	<u>105,094.60</u>

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

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>

CLEV POWER
BALANCE SHEET PROJECTION

YEAR 1 YEAR 2

CURRENT ASSETS

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

FIXED ASSETS

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

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

LIABILITIES

CURRENT LIABILITIES	0	0
----------------------------	---	---

LONG TERM LIABILITIES	0	0
------------------------------	---	---

SHAREHOLDER EQUITY

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

TOTAL LIABILITIES AND EQUITY	<u><u>87,200</u></u>	<u><u>234,400</u></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>
----------------------	--------------------	-------------

CASH BEGINNING OF THE YEAR		\$ 77,200
----------------------------	--	-----------

CASH END OF YEAR	<u>\$ 77,200</u>	<u>\$ 224,400</u>
------------------	------------------	-------------------

CLE Power Inc

Exhibit C-6
"Credit Rating"

See Attached

CLE Power Inc

Exhibit C-7
"Credit Report"

See Attached

PO Box 9701
Allen, TX 75013



0009407 02 MB 0.425 **AUTO T8 0 7102 44145-464431 -C02-P09416-I
DOROTHY C BABSON
3231 CLARK PKWY
WESTLAKE OH 44145-4644



Your Credit Report

Report # **0758-6945-33** for **04/29/19**

DOROTHY C BABSON

Disputing information in this report

Before contacting us, please review this report carefully. If you disagree with an item, you may dispute it. We will process your dispute generally by sending your dispute to the furnisher of the information or to the vendor who collected the information from a public record.

The fastest and easiest way to dispute most information is to visit us at:

www.experian.com/disputes

You can also submit your disputes in writing by mailing them to:

Experian, NCAC, PO BOX 9701, Allen TX 75013

Call us with your disputes or questions:

800 509 8495, M - F 8am to 10pm and Saturday 10am to 7pm, CT

You may also submit additional relevant information or supporting documentation for your disputes electronically at experian.com/upload. Be advised that written information or documents you provide with respect to your disputes may be shared with any and all creditors with which you are disputing.

You have your Credit Report.

Now, keep an eye
on it for free.

Get these free benefits, with no
credit card required:

- Your Experian Credit Report
(refreshed every 30 days upon sign in)
- Experian credit monitoring & alerts
- Educational resources

Enroll today at experian.com/view

Medical Information

By law, we cannot disclose certain medical information (relating to physical, mental, or behavioral health or condition). Although we do not generally collect such information, it could appear in the name of a data furnisher (i.e. "Cancer Center") that reports your payment history to us. If so, those names display on your report, but on reports to others, they display only as MEDICAL PAYMENT DATA. Consumer statements included on your report at your request that contain medical information are disclosed to others.

Payment History Legend

Current/Terms of agreement met	Creditor received deed	Claim filed with government
Account 30 days past due	Foreclosure proceedings started	Defaulted on contract
Account 60 days past due	Foreclosed	Collection
Account 90 days past due	Voluntarily surrendered	Charge off
Account 120 days past due	Repossession	Closed
Account 150 days past due	Paid by creditor	No data for this time period
Account 180 days past due	Insurance claim	

*If your creditor reported your account balances to us, we list them in this section as additional information about your account. Your account history may also include your credit limit and high balance or the original loan amount for an installment loan. This section also includes the scheduled payment amounts, amounts actually paid and the dates those payments were made. ND: No Data

7102-02-00-0009407-0001-0067749

Your accounts in good standing These items may stay on your credit report for as long as they are open. Once an account is closed or paid off it may continue to appear on your report for up to ten years.

Credit items

AMERICAN EXPRESS Partial account #
3499917498297353

PO BOX 981537, EL PASO, TX 79998 or (800) 874 2717

Date opened
May 2010
Address ID #
0095223118
Type
Credit card
Responsibility
Authorized user

First reported
Jul 2010
Terms
Not reported
Monthly payment
Not reported
Credit limit or original amount
\$7,900
High balance
\$3,073
Recent balance
Not reported
Status
Closed/Never late.
This account is scheduled to continue on record until Jul 2021.
Comment:
Purchased by another lender.
Date of Status
Jul 2016

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2016	ND	ND	ND	ND	ND	ND	CLS					
2015	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
2014	OK	OK	OK	OK	OK	OK	ND	ND	ND	ND	ND	ND
2013	Full Year in Good Standing											
2012	Full Year in Good Standing											
2011	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK



AMERICAN EXPRESS Partial account #
3499923515640573

PO BOX 981537, EL PASO, TX 79998 or (800) 874 2717

Date opened
Jun 2016
Address ID #
0095223118
Type
Credit card
Responsibility
Individual

First reported
Jun 2016
Terms
Not reported
Monthly payment
\$35
Credit limit or original amount
\$25,000
High balance
\$3,598
Recent balance
\$944 as of Apr 2019
Status
Open/Never late.
Date of Status
Apr 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	OK	OK								
2018	Full Year in Good Standing											
2017	Full Year in Good Standing											
2016	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	1,561	1,147	993	2,585	864	966	1,127	731	1,203	672	621	393	378	988	965
DPR	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
SPA (\$)	35	35	220	220	35	35	35	35	ND	ND	ND	ND	ND	ND	ND
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	3,553	763	3,598	426	1,539	1,401	1,538	1,940	2,562						
DPR	ND	ND	ND	ND	ND	ND	ND	ND	ND						
SPA (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Apr 2017 and Mar 2019, your credit limit/high balance was \$25,000

BARCLAYS BANK DELAWARE Partial account #
00005382011....

PO BOX 8803, WILMINGTON, DE 19899 or (888) 232 0780

Date opened
Jul 2007
Address ID #
0095223118
Type
Credit Card
Responsibility
Authorized user

First reported
Jul 2007
Terms
1 Months
Monthly payment
Not reported
Credit limit or original amount
\$50,000
High balance
Not reported
Recent balance
Not reported
Status
Paid, Closed/Never late.
This account is scheduled to continue on record until Jul 2019.
Comment
Account closed at consumer's request.
Date of Status
Jul 2009

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2009	OK	OK	OK	OK	OK	OK	CLS					
2008	Full Year in Good Standing											
2007	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

Your accounts in good standing (continued)

BEST BUY/CBNA Partial account #
603535028077....

PO BOX 6497, SIOUX FALLS, SD 57117 or (888) 237 8289

Date opened	First reported	Recent balance	Payment history
Oct 2015	Oct 2015	\$68 as of Apr 2019	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Open/Never late.	2019 OK OK OK OK
Type	Monthly payment	Date of Status	2018 Full Year - In Good Standing
Charge Card	\$27	Apr 2019	2017 Full Year - In Good Standing
Responsibility	Credit limit or original amount		2016 Full Year - In Good Standing
Individual	\$6,000		2015 OK OK OK
	High balance		
	\$1,166		

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	118	158	198	228	268	298	338	378	418	458	498	538	578	618	658
DPR	Mar15	Feb15	Jan15	Dec13	Nov15	Oct13	Sep14	Aug15	Jul13	Jun15	May15	Apr14	Mar14	Feb14	Jan12
SPA (\$)	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	698	0	0	0	0	0	0	0	0						
DPR	Aug12	Aug12	Aug12	Aug12	Aug12	Aug12	Aug12	Aug12	Aug12						
SPA (\$)	27	25	25	25	25	25	25	25	25						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Apr 2017 and Mar 2019, your credit limit/high balance was \$6,000

CAPONE/CABELAS Partial account #
546325729168....

PO BOX 30285, SALT LAKE CITY, UT 84130 or (800) 227 4825

Date opened	First reported	Recent balance	Payment history
Dec 2004	Dec 2004	\$0 /paid as of Apr 2019	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Open/Never late.	2019 OK OK OK OK
Type	Monthly payment	Date of Status	2018 Full Year - In Good Standing
Credit card	\$28	Apr 2019	2017 Full Year - In Good Standing
Responsibility	Credit limit or original amount		2016 Full Year - In Good Standing
Joint with JOHN BABSON	\$21,000		2015 Full Year - In Good Standing
	High balance		2014 Full Year - In Good Standing
	\$1,398		2013 Full Year - In Good Standing
			2012 OK OK OK OK OK OK OK OK

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DPR	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31
SPA (\$)	28	28	28	28	28	28	28	28	28	28	28	28	28	28	28
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	0	0	0	0	0	0	0	0	0						
DPR	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31	Oct31						
SPA (\$)	28	28	28	28	28	28	28	28	28						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Apr 2017 and Mar 2019, your credit limit/high balance was \$21,000

Your accounts in good standing (continued)

CAPITALONE Partial account # 552030008823....

PO BOX 30253, SALT LAKE CITY, UT 84130 or (800) 947 1000

Date opened
Nov 1992
Address ID #
0095223118
Type
Credit card
Responsibility
Joint with
JOHN W BABSON

First reported
May 2008
Terms
Not reported
Monthly payment
\$25
Credit limit or original amount
\$15,000
High balance
\$11,057

Recent balance
\$0 /paid as of Apr 2019
Status
Open/Never late.
Comment
FCBA dispute resolved - consumer disagrees.
Date of Status
Apr 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	OK	OK								
2018	Full Year - In Good Standing											
2017	Full Year - In Good Standing											
2016	Full Year - In Good Standing											
2015	Full Year - In Good Standing											
2014	Full Year - In Good Standing											
2013	Full Year - In Good Standing											
2012	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK



Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DPR	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16
SPA (\$)	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	0	0	0	0	0	0	0	0	0						
DPR	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16	Jan16						
SPA (\$)	25	25	25	25	25	25	25	25	25						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Apr 2017 and Mar 2019, your credit limit/high balance was \$15,000

CITI Partial account # 410039049956....

PO BOX 6190, SIOUX FALLS, SD 57117 or (855) 378 6467

Date opened
May 2010
Address ID #
0095223118
Type
Credit Card
Responsibility
Authorized user

First reported
Sep 2016
Terms
Not reported
Monthly payment
\$25
Credit limit or original amount
\$7,900
High balance
\$5,211

Recent balance
\$462 as of Apr 2019
Status
Open/Never late.
Date of Status
Apr 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	OK	OK								
2018	Full Year - In Good Standing											
2017	Full Year - In Good Standing											
2016	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	1,011	1,301	1,772	1,469	1,543	902	1,723	653	580	1,078	3,135	391	650	962	1,054
DPR	Mar01	Jan29	Dec25	Nov28	Oct27	Oct02	Aug25	Aug01	Jun29	May30	Apr28	Mar30	Feb28	Jan31	Dec30
SPA (\$)	25	25	27	25	25	25	25	25	25	25	47	25	25	25	25
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	719	966	1,528	580	338	448	856	514	621						
DPR	Nov28	Nov02	Sep30	Aug30	Aug01	Jun30	Jun01	Apr29	Mar29						
SPA (\$)	25	25	25	25	25	25	25	25	25						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Apr 2017 and Mar 2019, your credit limit/high balance was \$7,900

ADS/COMENITY/BEALLSFL Partial account # 585637350831....

PO BOX 182789, COLUMBUS, OH 43218 or No phone number available

Date opened
Mar 2015
Address ID #
0095223118
Type
Charge Card
Responsibility
Individual

First reported
Apr 2015
Terms
Not reported
Monthly payment
\$25
Credit limit or original amount
\$1,500
High balance
\$121

Recent balance
\$0 /paid as of Apr 2019
Status
Open/Never late.
Date of Status
Apr 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	OK	OK								
2018	Full Year - In Good Standing											
2017	Full Year - In Good Standing											
2016	Full Year - In Good Standing											
2015	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

Your accounts in good standing (continued)

SYNCB/BELK Partial account # 604583159483...

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

Date opened
May 2015
Address ID #
0095223118
Type
Charge Card
Responsibility
Individual

First reported
May 2015
Terms
Not reported
Monthly payment
\$18
Credit limit or original amount
\$1,800
High balance
\$231
Recent payment
\$18

Recent balance
\$0 /paid as of Apr 2019
Status
Open/Never late.
Date of Status
Apr 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	OK	OK								
2018	Full Year - In Good Standing											
2017	Full Year - In Good Standing											
2016	Full Year - In Good Standing											
2015	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK



Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	18	0	0	0	90	0	0	0	0	0	0	0	0	0	0
DPR	Dec12	Dec12	Dec12	Dec12	Jan07	Jan07	Jan07	Jan07	Jan07	Jan07	Jan07	Jan07	Jan07	Jan07	Jan07
SPA (\$)	18	25	25	25	25	25	25	25	25	25	25	25	25	25	25
AAP (\$)	ND	ND	ND	79	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	55
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	55	0	0	0	0	0	0	0	0						
DPR	Jun09	Jun09	Jun09	Jun09	Jun09	Jun09	Jun09	Jun09	Jun09						
SPA (\$)	25	25	25	25	25	25	25	25	25						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Mar 2019 and Mar 2019, your credit limit/high balance was \$1,800

Between Apr 2017 and Feb 2019, your credit limit/high balance was \$1,024

SYNCB/HOME DESIGN HVAC Partial account # 603462222467...

C/O P O BOX 965036, ORLANDO, FL 32896 or (866) 396 8254

Date opened
Feb 2019
Address ID #
0095223118
Type
Charge Card
Responsibility
Individual

First reported
Feb 2019
Terms
Not reported
Monthly payment
\$117
Credit limit or original amount
\$6,000
High balance
\$4,651

Recent balance
\$4,531 as of Apr 2019
Status
Open/Never late.
Date of Status
Apr 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	OK	OK								

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19
AB (\$)	4,651	0
DPR	ND	ND
SPA (\$)	117	ND
AAP (\$)	ND	ND

Between Feb 2019 and Mar 2019, your credit limit/high balance was \$6,000

SYNCB/JCPENNEY Partial account # 600889072168...

PO BOX 965007, ORLANDO, FL 32896 or (800) 542 0800

Date opened
Apr 1983
Address ID #
0095223118
Type
Charge Card
Responsibility
Individual

First reported
May 1994
Terms
Not reported
Monthly payment
Not reported
Credit limit or original amount
\$1,000
High balance
\$610

Recent balance
Not reported
Status
Paid, Closed/Never late.
This account is scheduled to continue on record until Mar 2029.
Date of Status
Mar 2019

Payment history

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2019	OK	OK	CLS									
2018	Full Year - In Good Standing											
2017	Full Year - In Good Standing											
2016	Full Year - In Good Standing											
2015	Full Year - In Good Standing											
2014	Full Year - In Good Standing											
2013	Full Year - In Good Standing											
2012	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18	Dec17
AB (\$)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DPR	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02
SPA (\$)	17	17	17	17	17	17	17	17	17	17	17	17	17	17	17
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND

Your accounts in good standing (continued)

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	26
DPR	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11	Jan11
SPA (\$)	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	69
	Dec17	Nov17	Oct17	Sep17	Jul17	Jun17	May17								
AB (\$)	69	0	0	0	0	0	27								
DPR	May26	May26	May26	May26	May26	May26	Jun04								
SPA (\$)	25	25	25	25	25	25	25								
AAP (\$)	ND	27	27	27	ND	27	ND								

Between May 2017 and Mar 2019, your credit limit/high balance was \$1,500

KOHLS/CHASE Partial account # 02664750....

PO BOX 3115, MILWAUKEE, WI 53201 or (800) 564 5740

Date opened Jun 1997	First reported Oct 2001	Recent balance Not reported	Payment history												
Address ID # 0095223118	Terms Not reported	Status Paid, Closed/Never late.	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Type Charge Card	Monthly payment Not reported	This account is scheduled to continue on record until Feb 2020.	2010	OK	CLS										
Responsibility Joint with JOHN W BABSON	Credit limit or original amount \$2,000		2009	Full Year - In Good Standing											
	High balance \$355	Date of Status Feb 2010	2008	Full Year - In Good Standing											
			2007	Full Year - In Good Standing											
			2006	Full Year - In Good Standing											
			2005	Full Year - In Good Standing											
			2004	Full Year - In Good Standing											
			2003	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	

MACYS/DSNB Partial account # 41604173....

PO BOX 8218, MASON, OH 45040 or (800) 243 6552

Date opened	First reported	Recent balance	Payment history
Oct 1975	Sep 2006	\$98 as of Mar 2019	
Address ID #	Terms	Status	
0095223118	Not reported	Open/Never late.	2019 OK OK OK
Type	Monthly payment	Date of Status	
Charge Card	\$27	Mar 2019	2018 Full Year - In Good Standing
Responsibility	Credit limit or original amount		2017 Full Year - In Good Standing
Individual	\$2,300		2016 Full Year - In Good Standing
	High balance		2015 OK OK OK OK OK OK OK ND OK ND ND OK
	\$1,136		2014 Full Year - In Good Standing
			2013 Full Year - In Good Standing
			2012 OK OK OK OK OK OK OK OK OK OK

SYNCB/BELK Partial account # 604583152243....

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

Date opened	First reported	Recent balance	Payment history
Feb 2009	Feb 2009	Not reported	
Address ID #	Terms	Status	
0095223118	Not reported	Paid, Closed/Never late.	2013 OK OK CLS
Type	Monthly payment	This account is	
Charge Card	Not reported	scheduled to continue on	2012 Full Year - In Good Standing
Responsibility	Credit limit or original amount	record until Mar 2023.	
Individual	Not reported	Date of Status	2011 Full Year - In Good Standing
	High balance	Mar 2013	2010 Full Year - In Good Standing
	\$291		2009 OK OK OK OK OK OK OK OK OK OK

Your accounts in good standing (continued)

	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17
AB (\$)	0	0	0	0	0	0	0	0
DPR	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02	Feb02
SPA (\$)	17	17	17	17	17	17	17	17
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND

Between Apr 2017 and Feb 2019, your credit limit/high balance was \$1,000

SYNCB/KIRKLANDS Partial account #
604412103434....

PO BOX 965005, ORLANDO, FL 32896 or (866) 230 9175

Date opened	First reported	Recent balance	Payment history
Jan 2010	Jan 2010	Not reported	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Paid, Closed/Never late.	2012 CLS
Type	Monthly payment	This account is	2011
Charge Card	Not reported	scheduled to continue on	Full Year in Good Standing
Responsibility	Credit limit or original amount	record until Jan 2022.	2010
Individual	Not reported	Date of Status	Full Year in Good Standing
	High balance	Jan 2012	
	\$88		

SYNCB/LEVIN FURNITURE Partial account #
601919270229....

C/O P O BOX 965036, ORLANDO, FL 32896 or (866) 396 8254

Date opened	First reported	Recent balance	Payment history
Oct 2015	Oct 2015	\$0 /paid as of Apr 2019	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Open/Never late.	2019 OK OK OK OK
Type	Monthly payment	Date of Status	2018
Charge Card	\$77	Apr 2019	Full Year in Good Standing
Responsibility	Credit limit or original amount		2017
Individual	\$6,500		Full Year in Good Standing
	High balance		2016
	\$5,502		Full Year in Good Standing
	Recent payment		2015
	\$85		OK OK OK

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	85	165	245	330	430	510	610	710	790	870	970	1,050	1,130	1,230	1,310
DPR	Mar13	Feb13	Dec26	Dec13	Nov13	Oct12	Sep12	Aug13	Jul13	Jun13	May11	Apr13	Mar14	Feb14	Jan12
SPA (\$)	77	77	77	77	77	77	77	77	77	77	77	77	77	77	77
AAP (\$)	80	80	84	100	80	100	100	80	80	100	80	80	100	80	80
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	1,390	1,490	1,570	1,670	1,750	1,850	1,950	2,050	2,150						
DPR	Dec13	Nov10	Oct12	Sep13	Aug11	Jul10	Jun13	May09	Apr10						
SPA (\$)	77	77	77	77	77	77	77	77	77						
AAP (\$)	100	80	ND	80	100	100	100	100	100						

Between Apr 2017 and Mar 2019, your credit limit/high balance was \$6,500

SYNCB/HOME Partial account # 601917021177....

C/O P O BOX 965036, ORLANDO, FL 32896 or (866) 396 8254

Date opened	First reported	Recent balance	Payment history
Dec 2006	Jan 2007	Not reported	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Paid, Closed/Never late.	2011 CLS
Type	Monthly payment	This account is	2010
Charge Card	Not reported	scheduled to continue on	Full Year in Good Standing
Responsibility	Credit limit or original amount	record until Feb 2021	2009
Individual	\$8,000	Date of Status	Full Year in Good Standing
	High balance	Feb 2011	2008
	\$3,399		Full Year in Good Standing
			2007
			Full Year in Good Standing

Your accounts in good standing (continued)

SYNCB/ROOMS TO GO Partial account #
601919123642....

C/O P.O. BOX 965036, ORLANDO, FL 32896 or (866) 396 8254

Date opened	First reported	Recent balance	Payment history
Feb 2016	Feb 2016	\$0 /paid as of Apr 2019	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
Address ID #	Terms	Status	2019 OK OK OK OK
0095223118	Not reported	Open/Never late.	2018 Full Year - In Good Standing
Type	Monthly payment	Date of Status	2017 Full Year - In Good Standing
Charge Card	\$50	Apr 2019	2016 OK OK OK OK OK OK OK OK OK OK OK OK
Responsibility	Credit limit or original amount		
Individual	\$6,000		
	High balance		
	\$588		



Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DPR	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06
SPA (\$)	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	0	0	0	0	0	0	0	0	0						
DPR	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06	Jan06						
SPA (\$)	50	50	50	50	50	50	50	50	50						
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND						

Between Feb 2018 and Mar 2019, your credit limit/high balance was \$6,000

Between Apr 2017 and Jan 2018, your credit limit/high balance was \$6,500

SYNCB/TJX COS Partial account #
604585200070....

PO BOX 965015, ORLANDO, FL 32896 or (877) 890 3150

Date opened	First reported	Recent balance	Payment history
May 2009	May 2009	Not reported	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
Address ID #	Terms	Status	2011 OK OK OK OK OK OK OK OK CLS
0095223118	Not reported	Paid, Closed/Never late.	2010 Full Year - In Good Standing
Type	Monthly payment	This account is scheduled to continue on record until Sep 2021.	2009 OK OK OK OK OK OK OK OK OK OK OK OK
Charge Card	Not reported	Date of Status	
Responsibility	Credit limit or original amount	Sep 2011	
Individual	\$1,200		
	High balance		
	\$135		

SYNCB/WALMART DC Partial account #
523914111441....

PO BOX 965024, ORLANDO, FL 32896 or (866) 611 1148

Date opened	First reported	Recent balance	Payment history
Feb 2016	Feb 2016	\$0 /paid as of Apr 2019	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
Address ID #	Terms	Status	2019 OK OK OK OK
0095223118	Not reported	Open/Never late.	2018 Full Year - In Good Standing
Type	Monthly payment	Date of Status	2017 Full Year - In Good Standing
Credit card	\$25	Apr 2019	2016 OK OK OK OK OK OK OK OK OK OK OK OK
Responsibility	Credit limit or original amount		
Individual	\$1,524		
	High balance		
	\$834		

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18
AB (\$)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DPR	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10
SPA (\$)	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND
	Dec17	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17						
AB (\$)	0	0	0	0	0	0	77	127	177						
DPR	Jul10	Jul10	Jul10	Jul10	Jul10	Jul10	Jun09	May10	Apr07						
SPA (\$)	25	25	25	25	25	25	25	25	25						
AAP (\$)	ND	ND	ND	ND	ND	77	50	50	25						

Between Aug 2018 and Mar 2019, your credit limit/high balance was \$1,524

Between Apr 2017 and Jul 2018, your credit limit/high balance was \$5,000

Your accounts in good standing (continued)

THE HOME DEPOT/CITIBANK Partial account #
603532085083....

PO BOX 6497, SIOUX FALLS, SD 57117 or (800) 677 0232

Date opened	First reported	Recent balance	Payment history
Jun 2018	Jun 2018	\$0 /paid as of Apr 2019	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Open/Never late.	2019
Type	Monthly payment	Date of Status	2018
Charge Card	\$27	Apr 2019	
Responsibility	Credit limit or original amount		
Individual	\$8,000		
	High balance		
	\$217		

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Mar19	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18
AB (\$)	0	0	0	0	0	0	0	28	29	187
DPR	Sep12	Sep12	Sep12	Sep12	Sep12	Sep12	Sep12	Aug05	Jul08	ND
SPA (\$)	27	27	27	27	27	27	27	27	27	27
AAP (\$)	ND	ND	ND	ND	ND	ND	ND	ND	ND	ND

Between Jun 2018 and Mar 2019, your credit limit/high balance was \$8,000

US BANK Partial account # 300038....

PO BOX 3447, OSHKOSH, WI 54903 or (844) 624 8230

Date opened	First reported	Recent balance	Payment history
Jul 2005	Jul 2005	\$6,767 as of Mar 2019	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Open/Never late.	2019
Type	Monthly payment	Date of Status	2018
Home Equity	\$28	Mar 2019	
Responsibility	Credit limit or original amount		2017
Individual	\$216,000		2016
	High balance		2015
	\$184,764		2014
	Recent payment		2013
	\$300		2012

Account History * (AB = Account Balance, DPR = Date Payment Received, SPA = Scheduled Payment Amount, AAP = Actual Amount Paid)

	Feb19	Jan19	Dec18	Nov18	Oct18	Sep18	Aug18	Jul18	Jun18	May18	Apr18	Mar18	Feb18	Jan18	Dec17
AB (\$)	7,038	7,511	7,231	7,501	5,774	6,151	4,932	5,513	6,236	6,971	7,805	8,578	9,448	10,019	10,586
DPR	Feb11	Jan08	Dec11	Nov08	Oct10	Sep10	Aug09	Jul12	Jun12	May10	Apr09	Mar13	Feb09	Jan12	Dec12
SPA (\$)	29	29	23	22	17	20	22	245	257	258	260	259	263	264	265
AAP (\$)	500	500	300	300	400	400	599	745	757	858	800	900	600	600	765
	Nov17	Oct17	Sep17	Aug17	Jul17	Jun17	May17	Apr17							
AB (\$)	11,316	12,049	13,109	13,668	14,623	15,575	16,026	16,874							
DPR	Nov08	Oct10	Sep06	Aug08	Jul10	Jun07	May12	Apr13							
SPA (\$)	268	268	272	274	274	277	280	286							
AAP (\$)	768	1,100	600	1,000	1,000	500	899	1,500							

Between Apr 2017 and Feb 2019, your credit limit/high balance was \$216,000

WF/DILLARD Partial account # 579674119040....

PO BOX 14517, DES MOINES, IA 50306 or (877) 302 6157

Date opened	First reported	Recent balance	Payment history
Jan 1988	Feb 2003	\$85 as of Apr 2019	
Address ID #	Terms	Status	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
0095223118	Not reported	Open/Never late.	2019
Type	Monthly payment	Date of Status	2018
Charge Card	\$25	Apr 2019	
Responsibility	Credit limit or original amount		2017
Joint with	\$1,000		2016
JOHN W BABSON	High balance		2015
	\$705		2014
	Recent payment		2013
	\$60		2012

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

A Summary of Your Rights under the Fair Credit Reporting Act

Para informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, D.C. 20552.

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 or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, D.C. 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 for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your creditworthiness 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 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.
- 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 5OPTOUT (1 888 567 8688).
- 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.

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 more information about your federal rights, contact:



TYPE OF BUSINESS:	CONTACT:
<p>1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list in addition to the Bureau:</p>	<p>a. Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center – FCRA Washington, D.C. 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>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</p> <p>c. Nonmember Insured banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center PO Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
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
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	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 St 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 (877) 382-4357

**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