

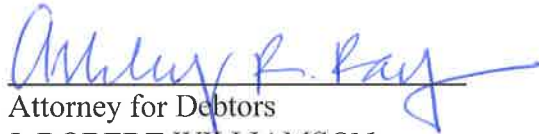
**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION**

IN RE:) **CHAPTER 11**
)
MILLER AUTO PARTS & SUPPLY) **Jointly Administered Under**
COMPANY, INC., et al.,) **CASE NO. 14-68113-mgd**
)
Debtors.)

**DEBTORS' MONTHLY FINANCIAL REPORTS
FOR THE PERIOD**

FROM September 1, 2015 TO September 30, 2015

Come now the above-named debtors and file their Periodic Financial Reports in accordance with the Guidelines established by the United States Trustee and FRBP 2015.



Attorney for Debtors
J. ROBERT WILLIAMSON
Georgia Bar No. 765214
ASHLEY REYNOLDS RAY
Georgia Bar No. 601559

Debtor's Address
and Phone Number:

5944 Peachtree Corners East
Norcross, GA 30071

Attorney's Address
and Phone Number:

1500 Candler Building
127 Peachtree Street, NE
Atlanta, GA 30303
Tel. (404) 893-3880

SCHEDULE OF RECEIPTS AND DISBURSEMENTS

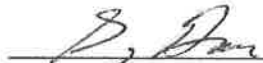
FOR THE PERIOD: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015
 NAME OF DEBTOR: MILLER AUTO PARTS & SUPPLY CASE NO. 14-68113-mgd
 DATE OF PETITION:

	CURRENT MONTH	CUMULATIVE PETITION TO DATE
1. FUNDS AT BEGINNING OF PERIOD	\$3,565,721.69	\$1,235,231.08
2. RECEIPTS:		
A. Cash Sales	0.00	0.00
Minus: Cash Refunds	0.00	0.00
Net Cash Sales	0.00	0.00
B. Accounts Receivable	0.00	21,052,646.37
D. Other Receipts (Attach List)	-	29,508,336.25
3. TOTAL RECEIPTS	<u>0.00</u>	<u>50,560,982.62</u>
4. TOTAL FUNDS AVAILABLE FOR OPERATIONS (Line 1 + Line 3)	<u>3,565,721.69</u>	<u>51,796,213.70</u>
5. DISBURSEMENTS		
A. Advertising	0.00	0.00
B. Bank Charges	946.44	65,466.34
C. Contract Labor	2,228.75	249,022.31
D. Fixed Asset Payments (not incl. In "N")	0.00	0.00
E. Insurance	0.00	274,235.06
F. Inventory Payments (See Attach. 2)	0.00	10,250,556.61
G. Leases	0.00	2,725.98
H. Manufacturing Supplies	0.00	51,107.29
I. Office Supplies	0.00	86,776.19
J. Payroll - Net (See Attachment 4A)	0.00	1,752,653.46
K. Professional Fees (Accounting & Legal)	4,306.27	993,226.63
L. Rent	0.00	243,400.18
M. Repairs & Maintenance	0.00	47,211.26
N. Secured Creditor Payments	0.00	31,910,288.01
O. Taxes Paid - Payroll (See Attachment 4A)	0.00	75.00
P. Taxes Paid - Sales & Use (See Attachment 4A)	0.00	228,858.68
Q. Taxes Paid - Other (See Attachment 4A)	0.00	1,112.00
R. Telephone	0.00	17,316.65
S. Travel & Entertainment	0.00	211,106.94
T. U.S. Trustee Quarterly Fees	0.00	88,900.00
U. Utilities	0.00	195,908.20
V. Vehicle Expenses	0.00	993,026.68
W. Other Operating Expenses (See MOR-3)	0.00	575,000.00
6. TOTAL DISBURSEMENTS (Sum of 5A thru W)	<u>7,481.46</u>	<u>48,237,973.47</u>
7. ENDING BALANCE (Line 4 Minus Line 6)	<u>\$3,558,240.23</u>	<u>\$3,558,240.23</u>

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief.

This 17 day of October 2015

By:



MONTHLY SCHEDULE OF RECEIPTS AND DISBURSEMENTS (cont'd)

Detail of other Receipts and Other Disbursements

OTHER RECEIPTS:

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
DIP Advances	0.00	14,769,890.58
Proceeds from ADW APA paid to First Capital	0.00	12,507,810.23
Net proceeds from APAs in S&W Escrow	0.00	1,670,875.27
Parts Authority repay for Ford inventory	0.00	278,528.03
Commerica	0.00	50,000.00
Greg Buckley Interest Payment	0.00	574.58
Vendor refunds	0.00	86,576.86
Insurance & utility refunds	0.00	65,612.19
Sale of inventory	0.00	5,000.00
Change in balance Regions x8290	0.00	3,663.58
Change in balance FNB x3082	0.00	21,850.63
TOTAL OTHER RECEIPTS	\$ -	\$ 29,460,381.95

<u>Loan Amount</u>	<u>Source of Funds</u>	<u>Purpose</u>	<u>Repayment Schedule</u>
None			

OTHER DISBURSEMENTS:

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
		0.00
Ford Settlement from x5159		217,583.18
Ford Settlement from S&W Escrow		357,416.82
		0.00
		0.00
		0.00
		0.00
TOTAL OTHER DISBURSEMENTS	\$ -	\$ 575,000.00

Note: As agreed to with the United States Trustee during the Initial Debtor Interview, disbursements by Debtor for the purpose of calculating United States Trustee Quarterly Fees will be as a percentage of sales by Debtor. Below is a summary of the percentages and disbursements for the period.

<u>Debtor</u>	<u>Case Number</u>	<u>%</u>	<u>Disbursement Amount</u>
Johnson Industries, Inc.	14-68111	54.1%	4,045.19
Miller Auto Parts & Supply Company, Inc.	14-68113	12.8%	955.73
Miller Auto Parts & Paint Company, Inc.	14-68114	29.6%	2,211.90
AutoPartsTomorrow.com	14-68116	3.6%	268.64
Total			7,481.46

ATTACHMENT 1

MONTHLY ACCOUNTS RECEIVABLE AGEING AND RECONCILIATION

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

ACCOUNTS RECEIVABLE RECONCILIATION

(Include all accounts receivable, pre-petition and post-petition, including charge card sales which have not been received)

Beginning of Month Balance	\$0.00
PLUS: Current Month New Billings	0.00
LESS: Collections During the Month	0.00
Writeoffs or credits	0.00
End of Month Balance	<u><u>\$0.00</u></u>

POST PETITION ACCOUNTS RECEIVABLE AGING

(Show the total for each aging category for all accounts receivable)

<u>0-30</u>	<u>31-60</u>	<u>61-90</u>	<u>over 90</u>	<u>Total</u>
0.00	0.00	0.00	0.00	0.00

For any receivables in the "Over 90 Days" category, please provide the following:

<u>Customer</u>	<u>Receivable Date</u>	<u>Status (Collection efforts taken, estimate of collectibility, write-off, disputed account, etc.)</u>
-----------------	------------------------	---

ATTACHMENT 2

MONTHLY ACCOUNTS PAYABLE AND SECURED PAYMENTS REPORT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

In the space below list all invoices or bills incurred and not paid since the filing of the petition. Do not include amounts owed prior to filing the petition.

POST-PETITION ACCOUNTS PAYABLE

<u>Date</u>	<u>Days</u>	<u>Vendor</u>	<u>Description</u>	<u>Amount</u>
<u>Incurred</u>	<u>Outstanding</u>			

No Open Accounts Payable as of September 30, 2015

Check here if pre-petition debts have been paid. Attach an explanation and copies of supporting documentation

ACCOUNTS PAYABLE RECONCILIATION (Post Petition Only):

Opening Balance (total from prior report)	\$ -
PLUS: Current Accounts Payable	0.00
LESS: Amount Paid on Prior Accounts Payable	0.00
End of Month Balance	<u>\$ -</u>

SECURED: List the status of payments to Secured Creditors and Lessors (Post Petition Only)

ATTACHMENT 3

INVENTORY AND FIXED ASSETS REPORT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

INVENTORY REPORT

INVENTORY BALANCE AT PETITION DATE: \$20,280,054.00
 INVENTORY RECONCILIATION:

Inventory Balance at Beginning of Month	\$374,788.11
Inventory Purchased During Month	0.00
Inventory Used or Sold	0.00
Inventory on Hand at End of Month	<u>\$374,788.11</u>

METHOD OF COSTING INVENTORY:

INVENTORY AGING

Less than 6 months old	6 months to 2 years old	Greater than 2 years old	Considered Obsolete	<u>Total Inventory</u>
0%	100%	0%	0%	100%

* Aging Percentages must equal 100%
 Check here if inventory contains perishable items.

Description of Obsolete Inventory: _____

FIXED ASSET REPORT

FIXED ASSETS FAIR MARKET VALUE AT PETITION DATE: \$777,180.20
 (Includes Furniture, Fixtures and Equipment)

BRIEF DESCRIPTION (First Report Only):

FIXED ASSETS RECONCILIATION:

Fixed Asset FMV at Beginning of Month	\$0.00
LESS: Depreciation Expense	0.00
PLUS: New Purchases	0.00
Ending Monthly Balance	<u>\$0.00</u>

BRIEF DESCRIPTION OF FIXED ASSETS PURCHASED OR DISPOSED OF DURING THIS REPORTING PERIOD:

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: Wells Fargo Bank BRANCH: _____
 ACCOUNT NAME: Miller Auto Parts & Supply Co. Inc. ACCOUNT NUMBER: x5159
 PURPOSE OF ACCOUNT: Operating Account

Ending Bank Balance per Bank Statement	\$594,345.24
Plus Total Amount of Outstanding Deposits	0.00
Minus Total Amount of Outstanding Check and other debits	416.33
Minus Service Charges	_____
Ending Balance per Check Register	<u><u>\$593,928.91</u></u>

* Debit cards are used by N/A
 ** If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not include items reported as Petty Cash on Attachment 4D:
 Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
N/A				

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

"Total Amount of Outstanding Checks and other debits", listed above, includes:

- \$ - Transferred to Payroll Account
- \$ - Transferred to Tax Account

WellsOne® Account

Account number: ██████████ 5159 ■ September 1, 2015 - September 30, 2015 ■ Page 1 of 1



MILLER AUTO PARTS & SUPPLY CO. INC.
 JOHNSON INDUSTRIES, DEBTOR IN POSSESSION
 MILLER AUTO PARTS AND PAINT CO
 AUTO PARTS TOMORROW COM
 5944 PEACHTREE CORS E
 NORCROSS GA 30071-1336

W0

Questions?

Call your Customer Service Officer or Client Services
1-800-AT WELLS (1-800-289-3557)
 5:00 AM TO 6:00 PM Pacific Time Monday - Friday

Online: wellsfargo.com

Write: Wells Fargo Bank, N.A. (182)
 PO Box 63020
 San Francisco, CA 94163

Account summary

WellsOne® Account

Account number	Beginning balance	Total credits	Total debits	Ending balance
██████████ 5159	\$620,903.13	\$0.00	-\$26,557.89	\$594,345.24

Debits

Electronic debits/bank debits

Effective date	Posted date	Amount	Transaction detail
	09/11	946.44	Client Analysis Srvc Chrg 150910 Svc Chge ██████████ 5159
	09/29	4,306.27	WT Fed#00661 PNC Bank, NA /Ftr/Bnf=Logan & Company Srf# IN15092810263873 Trn#150928092745 Rfb# 000000438
		\$5,252.71	Total electronic debits/bank debits

Checks paid

Number	Amount	Date	Number	Amount	Date
1170	19,076.43	09/03	1171	2,228.75	09/09
		\$21,305.18	Total checks paid		
		\$26,557.89	Total debits		

Daily ledger balance summary

Date	Balance	Date	Balance	Date	Balance
08/31	620,903.13	09/09	599,597.95	09/29	594,345.24
09/03	601,826.70	09/11	598,651.51		
Average daily ledger balance		\$600,546.00			

Well Fargo X5159
Outstanding Checks at 9-30-15

<u>Doc Number</u>	<u>G/L</u>	<u>Date</u>	<u>Explanation</u>	<u>LT 1 Amount</u>
1008		12/23/15	Parts House	(365.25)
1023		1/12/15	LAUREL FORD LINCOLN-MERCURY	(51.08)
				<u>(416.33)</u>

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: Scroggins & Williamson Escrow Account BRANCH: _____
 ACCOUNT NAME: Miller Auto Parts & Supply Co. Inc. ACCOUNT NUMBER: _____
 PURPOSE OF ACCOUNT: Deposit Account

Ending Bank Balance per Bank Statement	\$2,964,311.32
Plus Total Amount of Outstanding Deposits	0.00
Minus Total Amount of Outstanding Check and other debits	0.00
Minus Service Charges	_____
Ending Balance per Check Register	<u><u>\$2,964,311.32</u></u>

* Debit cards are used by N/A
 ** If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not include items reported as Petty Cash on Attachment 4D:
 Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
<u>N/A</u>				

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

"Total Amount of Outstanding Checks and other debits", listed above, includes:

- \$ - Transferred to Payroll Account
- \$ - Transferred to Tax Account

ATTACHMENT 5A

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
Case Number: 14-68113-mgd
Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

NAME OF BANK: Wells Fargo Bank BRANCH: _____

ACCOUNT NAME: Miller Auto Parts & Supply Co. Inc. ACCOUNT NUMBER: x5159

PURPOSE OF ACCOUNT: Operating Account

Account for All Check Numbers, including voided, lost, stopped payment, etc.

<u>Date</u>	<u>Check Number</u>	<u>Payee</u>	<u>Purpose</u>	<u>Amount</u>
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See Attachment September 2015 Disbursements

Miller Auto Parts & Supply Co
September 2015 Disbursements Wells Fargo X5159 & S&W Escrow Account

Description	Check Date	Check #	Vnd Name	Vnd Number	Pmt Amount
Contract Labor	9/8/15	1171	George Hare	Unknown	2,228.75
Professional	9/29/15	Wire	Logan & Co	Unknown	4,306.27
Bank Charges	9/11/15	ACH	Bank Fees	Unknown	946.44
					7,481.46

ATTACHMENT 4B

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: Payroll Account

NOT APPLICABLE

Ending Bank Balance per Bank Statement	\$0.00
Plus Total Amount of Outstanding Deposits	0.00
Minus Total Amount of Outstanding Check and other debits	0.00
Minus Service Charges	_____
 Ending Balance per Check Register	 <u><u>\$0.00</u></u>

* Debit cards are used by N/A

** If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not include items reported as Petty Cash on Attachment 4D):

Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
<u>N/A</u>				

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

"Total Amount of Outstanding Checks and other debits", listed above, includes:

- \$ - Transferred to Operating Account
- \$ - Transferred to Tax Account

ATTACHMENT 5B

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
Case Number: 14-68113-mgd
Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: Payroll Account

Account for All Check Numbers, including voided, lost, stopped payment, etc.

<u>Date</u>	<u>Check Number</u>	<u>Payee</u>	<u>Purpose</u>	<u>Amount</u>
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NOT APPLICABLE

ATTACHMENT 4C

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: Tax Account

NOT APPLICABLE

Ending Bank Balance per Bank Statement	\$0.00
Plus Total Amount of Outstanding Deposits	0.00
Minus Total Amount of Outstanding Check and other debits	0.00
Minus Service Charges	_____
 Ending Balance per Check Register	 <u><u>\$0.00</u></u>

* Debit cards are used by N/A

** If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not include items reported as Petty Cash on Attachment 4D):

Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
N/A				

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

"Total Amount of Outstanding Checks and other debits", listed above, includes:

\$ - Transferred to Operating Account
 \$ - Transferred to Payroll Account

ATTACHMENT 5C

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
Case Number: 14-68113-mgd
Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: Tax Account

Account for All Check Numbers, including voided, lost, stopped payment, etc.

<u>Date</u>	<u>Check Number</u>	<u>Payee</u>	<u>Purpose</u>	<u>Amount</u>
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NOT APPLICABLE

ATTACHMENT 4D

INVESTMENT ACCOUNTS AND PETTY CASH REPORT

INVESTMENT ACCOUNTS

Each savings and investment account, i.e. certificates of deposits, money market accounts, stocks and bonds, etc., should be listed separately. Attach copies of account statements.

<u>Type of Negotiable Instrument</u>	<u>Face Value</u>	<u>Purchase Price</u>	<u>Date of Purchase</u>	<u>Current Market Value</u>
None				
TOTAL				\$ -

PETTY CASH REPORT

The following Petty Cash Drawers/Accounts are maintained:

<u>Location of Box/Account</u>	<u>(Column 2) Maximum Amount of Cash in Drawer/Acct.</u>	<u>(Column 3) Amount of Petty Cash on Hand At End of Month</u>	<u>(Column 4) Difference between (Column 2) and (Column 3)</u>
None			
TOTAL		\$ -	

For any Petty Cash Disbursements over \$100 per transaction, attach copies of receipts. If there are no receipts, provide an explanation

TOTAL INVESTMENT ACCOUNTS AND PETTY CASH \$ -

ATTACHMENT 6

MONTHLY TAX REPORT

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

TAXES OWED AND DUE

Report all unpaid post-petition taxes including Federal and State withholding FICA, State sales tax, property tax, unemployment tax, State workmen's compensation, etc.

<u>Name of Taxing Authority</u>	<u>Date Payment Due</u>	<u>Description</u>	<u>Amount</u>	<u>Date Last Tax Return Filed</u>	<u>Tax Return Period</u>
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TAXES PAYABLE RECONCILIATION (Post-Petition Only)

Opening Balance	\$	-
PLUS: New Indebtedness Incurred This Month	\$	-
MINUS: Amount Paid on Post Petition	\$	-
Taxes this month	\$	-
PLUS/Minus: Adjustments	\$	-
Ending Month Balance	\$	-

ATTACHMENT 7

SUMMARY OF OFFICER OR OWNER COMPENSATION

SUMMARY OF PERSONNEL AND INSURANCE COVERAGES

Name of Debtor: MILLER AUTO PARTS & SUPPLY
 Case Number: 14-68113-mgd
 Reporting Period: FROM SEPTEMBER 1, 2015 TO SEPTEMBER 30, 2015

Report all compensation received during the month. Do not include reimbursement for expenses incurred for which you have receipts.

<u>Name of Officer or Owner</u>	<u>Description</u>	<u>Title</u>	<u>Amount Paid</u>
Randy Kulamer	Salary & Auto Allowance	CEO	0.00
George Hare	Salary & Auto Allowance	CFO	0.00
Charlie Lightner	Salary	Pres, Miller Auto Parts & Supply	0.00
Chris Bolden	Salary & Auto Allowance	VP/GM, Johnson Industries	0.00
Jeff Santoro	Salary & Auto Allowance	VP/GM, Miller Auto & Paint Co	0.00
			\$ -

PERSONNEL REPORT

	<u>Full Time</u>	<u>Part Time</u>
Number of employees at beginning of period	0	0
Number hired during the period	0	0
Number terminated or resigned during period	0	0
Number of employees on payroll at end of period	0	0

CONFIRMATION OF INSURANCE

<u>Carrier</u>	<u>Agent & Phone Number</u>	<u>Policy No.</u>	<u>Coverage Type</u>	<u>Expiration Date</u>	<u>Date Premium Due</u>
Hiscox Insurance	Insurance Office of America - Atlanta 770-308-2386 Nan MacGruer	UVA136314714	Directors & Officers	11-19-2017	Fully Paid

The following lapse in insurance coverage occurred this month:

<u>Policy Type</u>	<u>Date Lapsed</u>	<u>Date Reinstated</u>	<u>Reason for Lapse</u>
None			

√ Check here if U.S. Trustee has been listed as Certificate Holder for all insurance policies.

CERTIFICATE OF SERVICE

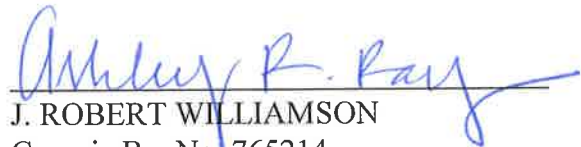
This is to certify that on this date I served a true and correct copy of the within and foregoing **Debtors' Monthly Financial Reports** by causing same to be deposited in the United States Mail with adequate postage affixed thereon and addressed to the following person(s):

Office of the United States Trustee
362 Richard Russell Federal Building
75 Spring Street, S. W.
Atlanta, Georgia 30303

This 21st day of October, 2015.

Respectfully submitted,

SCROGGINS & WILLIAMSON, P.C.



J. ROBERT WILLIAMSON
Georgia Bar No. 765214
ASHLEY REYNOLDS RAY
Georgia Bar No. 601559
Counsel for the Debtors

1500 Candler Building
127 Peachtree Street, NE
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