

TRANSMITTAL OF FINANCIAL REPORTS AND
 CERTIFICATION OF COMPLIANCE WITH
 UNITED STATES TRUSTEE OPERATING REQUIREMENTS FOR
 THE PERIOD ENDED: 8/31/10

IN RE: _____ :
 : CASE NO.: 09-21325
 : Chapter 11
 : Judge: Morgenstern-Clarren
AmTrust Insurance Agency Inc. nka
AmFin Insurance Agency Inc. :
 Debtor :

As debtor in possession, I affirm:

1. That I have reviewed the financial statements attached hereto, consisting of:

<u> x </u>	Operating Statement [1]	(Form 2)
<u> x </u>	Balance Sheet [1]	(Form 3)
<u> x </u>	Summary of Operations [1]	(Form 4)
<u> x </u>	Monthly Cash Statement	(Form 5)
<u> x </u>	Statement of Compensation	(Form 6)
<u> x </u>	Schedule of In-Force Insurance	(Form 7)

and that they have been prepared in accordance with normal and customary accounting practices, and fairly and accurately reflect the debtor's financial activity for the period stated;

2. That the insurance, including workers' compensation and unemployment insurance, as described in Section 4 of the Reporting Requirements For Chapter 11 Cases is in effect; and, (If not, attach a written explanation) YES X NO _____

3. That all postpetition taxes as described in Sections 1 and 14 of the Operating Instructions and Reporting Requirements For Chapter 11 cases are current. (If not, attach a written explanation) YES X NO _____

4. No professional fees (attorney, accountant, etc.) have been paid without specific court authorization. (If not, attach a written explanation) YES X NO _____

5. All United States Trustee Quarterly fees have been paid and are current. YES X NO _____

6. Have you filed your prepetition tax returns. (If not, attach a written explanation) YES X NO _____

I hereby certify, under penalty of perjury, that the information provided above and in the attached documents is true and correct.

[1] - The Debtor has made substantial efforts to prepare and complete the information in this Monthly Operating Report (the "Report"). However, given the nature of the Debtor's accounting system, it is somewhat difficult to verify the accuracy of the information contained in the Report. Therefore, the Debtor can give no assurance as to the accuracy of the information provided in the Report. Also, please note that certain GL balances related to prior months have changed based on additional information and further review.

Dated: 9-15-10

Ronald J. Hines
 Responsible Officer of the Debtor in Possession

CFO
 Title

404-235-8830
 Phone



092132310092100000000003

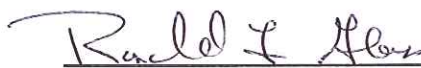
OPERATING STATEMENT (P&L)

Period Ending: 8/31/10

Case No: 09-21325

	<u>Current Month</u>	<u>Total Since Filing</u>
Commission	\$ -	\$ 1,072,198
Cost of Sales	-	-
GROSS PROFIT	<u>-</u>	<u>1,072,198</u>
EXPENSES:		
Allocated Salary Expenses	-	572,372
Employee Benefits & Pensions	-	-
Other Taxes	8,772	73,730
Rent and Lease Expense	-	6,478
Interest Expense	-	-
Insurance	-	3,565
Automobile and Truck Expense	-	-
Utilities (gas, electric, phone)	-	1,139
Depreciation	-	-
Travel and Entertainment	-	-
Repairs and Maintenance	-	-
Bank Service Charges	-	-
Supplies, Office Expense, etc.	-	4,474
Other Exp.	-	306
TOTAL EXPENSES:	<u>8,772</u>	<u>662,064</u>
NET OPERATING PROFIT/(LOSS)	(8,772)	410,134
Add: Non-Operating Income:		
Interest Income	-	-
Sale of Business	-	643,480
Less: Non-Operating Expenses:		
Professional Fees	-	-
Interest Expense	-	-
US Trustee Fees	2	7,152
NET INCOME/(LOSS)	<u>\$ (8,774)</u>	<u>\$ 1,046,462</u>

Dated: 9-15-10



Responsible Officer of the Debtor in Possession

BALANCE SHEET
Period Ending: 8/31/10

Case No: 09-21325

	<u>Current Month</u>	<u>Prior Month</u>	<u>11/30/2009 At Filing</u>
ASSETS:			
Cash	\$ 1,746,902	\$ 1,746,051	\$ 489,670
Inventory	-	-	-
Accounts Receivable	-	-	212,301
Insider Receivables	-	-	-
Land and Buildings	-	-	-
Furniture, Fixtures & Equip	-	-	39,535
Prepaid Expenses	35,089	43,861	4,501
Equity in Joint Venture	-	-	-
TOTAL ASSETS:	1,781,991	1,789,912	746,007
LIABILITIES:			
Postpetition Liabilities	-	-	-
Accounts Payable	-	-	-
Rent and Lease Payable	-	-	-
Wages and Salaries	-	-	-
Payable to Affiliate	(37,323)	(37,323)	-
Other Payable	156,103	156,103	-
Other	21,134	20,281	-
TOTAL Postpetition Liab.	139,915	139,062	-
Secured Liabilities:			
Subject to Postpetition			
Collateral or Financing Order	-	-	-
All Other Secured Liab.	-	-	-
TOTAL Secured Liab.	-	-	-
Prepetition Liabilities:			
Taxes & Other Priority Liab.	-	-	-
Unsecured Liabilities	-	-	63,818
Payable to Affiliate	902,146	902,146	902,146
Other	-	-	86,574
TOTAL Prepetition Liab.	902,146	902,146	1,052,538
Equity:			
Owners Capital:	585,000	585,000	585,000
Retained Earnings-Pre Pet.	(891,531)	(891,531)	(891,531)
Retained Earnings-Post Pet.	1,046,461	1,055,236	-
TOTAL Equity:	739,930	748,705	(306,531)
TOTAL LIABILITIES AND EQUITY:	1,781,991	1,789,912	746,007

Dated: 9-15-10 Ronald J. Glass
Responsible Officer of the Debtor in Possession

SUMMARY OF OPERATIONS
 Period Ended: 8/31/10

Case No: 09-21325

Schedule of Postpetition Taxes Payable

	<u>Beginning Balance</u>	<u>Accrued/ Withheld</u>	<u>Payments/ Deposits</u>	<u>Ending Balance</u>
Income Taxes Withheld:				
Federal	\$ -	\$ -	\$ -	\$ -
State	-	-	-	-
Local	-	-	-	-
 FICA Withheld	-	-	-	-
 Employers FICA	-	-	-	-
 Unemployment Tax:				
Federal	-	-	-	-
State	-	-	-	-
 Sales, Use & Excise Taxes	-	-	-	-
 Property Taxes	-	-	-	-
 Workers' Compensation	-	-	-	-
 Ohio Franchise Tax	-	-	-	-
 TOTALS:	<u>\$ -</u>	<u>-</u>	<u>-</u>	<u>\$ -</u>

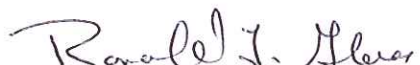
**AGING OF ACCOUNTS RECEIVABLE
 AND POSTPETITION ACCOUNTS PAYABLE**

Age in Days	0-30	30-60	Over 60
Post Petition Accounts Payable	<u>NONE</u>	<u>-</u>	<u>-</u>
Accounts Receivable	<u>NONE</u>	<u>-</u>	<u>-</u>

For all postpetition accounts payable over 30 days old, please attached a sheet listing each such account, to whom the account is owed, the date the account was opened, and the reason for non-payment of the account.

Describe events or factors occurring during this reporting period materially affecting operations and formulation of a Plan of Reorganization:

Dated: 9-15-10



 Responsible Officer of the Debtor in Possession

MONTHLY CASH STATEMENT

Period Ending: 8/31/10

Cash Activity Analysis (Cash Basis Only):

Case No: 09-21325

	<u>Operating</u> <u>Acct. - Old</u>	<u>Operating</u> <u>Acct.</u>	<u>Acct.</u>	<u>Acct.</u>	<u>Acct.</u>
A. Beginning Balance	\$ -	\$ 1,746,051			
B. Receipts (Attach separate schedule)	-	853			
C. Balance Available (A + B)	-	1,746,904			
D. Less Disbursements (Attach separate schedule)	-	2			
E. ENDING BALANCE (C - D)	-	1,746,902			

(PLEASE ATTACH COPIES OF MOST RECENT RECONCILED BANK STATEMENTS FROM EACH ACCOUNT)

Operating Account - Old:

1. Depository Name & Location National City Bank - Cleveland OH
2. Account Number 140582639

Operating Account:

1. Depository Name & Location PNC Bank - Cleveland OH
2. Account Number 42-2719-0724

Date: 9-15-10

Ronald J. Hayes

Responsible Officer of the Debtor in Possession

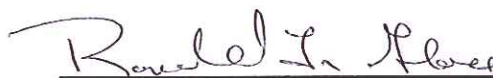
SCHEDULE OF IN-FORCE INSURANCE

Period Ending: 8/31/10

Case No: 09-21325

<u>INSURANCE TYPE</u>	<u>CARRIER</u>	<u>EXPIRATION DATE</u>
<u>Business Insurance Policy</u>	<u>Sentinel Insurance Company</u>	<u>04/01/11</u>
<u>Package Policy (including Terrorism)</u>	<u>Midwestern Indemnity Ins. Co.</u>	<u>04/01/11</u>
<u>General Liability</u>	<u>Peerless Indemnity Ins. Co.</u>	<u>04/01/11</u>
<u>Umbrella</u>	<u>Ohio Casualty Ins. Company</u>	<u>04/01/11</u>
<u>Workers Comp</u>	<u>Ohio Bureau of Workers' Comp</u>	<u>Ongoing</u>

Dated: 9-15-10



Responsible Officer of the Debtor in Possession

AmFin Insurance Agency Inc - Case No.: 09-21325
Reconciliation Summary
PNC Bank Acct 42-2719-0724

	<u>Aug 31, 10</u>
Beginning Balance	1,747,445.96
Cleared Transactions	
Checks and Payments - 2 Items	-976.99
Deposits and Credits - 15 Items	852.87
Total Cleared Transactions	<u>-124.12</u>
Cleared Balance	<u><u>1,747,321.84</u></u>
Uncleared Transactions	
Checks and Payments - 2 Items	-419.92
Total Uncleared Transactions	<u>-419.92</u>
Register Balance as of 08/31/2010	<u>1,746,901.92</u>
Ending Balance	1,746,901.92

AmFin Insurance Agency Inc - Case No.: 09-21325
Schedule of Cash Receipts - PNC Acct 42-2719-0724
As of August 31, 2010

Type	Date	Name	Amount
CASH			
102129 - Cash in Bank, NCB - AIAI			
Deposit	8/3/2010	Trailing Income - 100% Due to NYCB	15.00
Deposit	8/3/2010	Trailing Income - 100% Due to NYCB	7.51
Deposit	8/4/2010	Trailing Income - 100% due to Novak	0.36
Deposit	8/10/2010	Trailing Income - 100% Due to NYCB	6.50
Deposit	8/10/2010	Trailing Income - 100% Due to NYCB	233.58
Deposit	8/10/2010	Trailing Income - 100% due to Novak	85.08
Deposit	8/11/2010	Trailing Income - 100% Due to NYCB	59.18
Deposit	8/17/2010	Trailing Income - 100% Due to NYCB	0.52
Deposit	8/18/2010	Trailing Income - 100% Due to NYCB	191.56
Deposit	8/20/2010	Trailing Income - 100% Due to NYCB	202.18
Deposit	8/24/2010	Trailing Income - 100% Due to NYCB	6.41
Deposit	8/24/2010	Trailing Income - 100% Due to NYCB	3.25
Deposit	8/31/2010	Trailing Income - 100% Due to NYCB	15.00
Deposit	8/31/2010	Trailing Income - 100% Due to NYCB	9.83
Deposit	8/31/2010	Trailing Income - 100% Due to NYCB	16.91
Total 102129 - Cash in Bank, NCB - AIAI			852.87
Total CASH			852.87
TOTAL			852.87

AmFin Insurance Agency Inc - Case No.: 09-21325
Schedule of Cash Disbursements - PNC Acct 42-2719-0724
As of August 31, 2010

Type	Date	Num	Adj	Name	Amount
CASH					
102129 · Cash in Bank, NCB - AIAI					
Check	8/24/2010	117		U.S. Trustee	-1.99
Total 102129 · Cash in Bank, NCB - AIAI					-1.99
Total CASH					-1.99
TOTAL					-1.99

Corporate Business Account Statement



Page 1 of 2
Account Number: 42-2719-0724

For the period 07/31/2010 to 08/31/2010

AMFIN INSURANCE AGENCY INC
3391 PEACHTREE RD NE STE 110
ATLANTA GA 30326-1014

Number of enclosures: 0
Tax ID Number: 34-1092834
For Client Services:
Call 1-800-669-1518
Visit us at www.treasury.pncbank.com
Write to: One Ncc Parkway
Kalamazoo MI 49009

Account Summary Information

Balance Summary

Beginning balance	Deposits and other credits	Checks and other debits	Ending balance
1,747,445.96	852.87	976.99	1,747,321.84

Deposits and Other Credits

Description	Items	Amount
Deposits	3	452.67
National Lockbox	0	.00
ACH Credits	12	400.20
Funds Transfers In	0	.00
Trade Services	0	.00
Investments	0	.00
Zero Balance Transfers	0	.00
Adjustments	0	.00
Other Credits	0	.00
Total	15	852.87

Checks and Other Debits

Description	Items	Amount
Checks	2	976.99
Returned Items	0	.00
ACH Debits	0	.00
Funds Transfers Out	0	.00
Trade Services	0	.00
Investments	0	.00
Zero Balance Transfers	0	.00
Adjustments	0	.00
Other Debits	0	.00
Total	2	976.99

Ledger Balance

Date	Ledger balance	Date	Ledger balance	Date	Ledger balance
07/31	1,747,445.96	08/10	1,746,818.99	08/20	1,747,272.43
08/02	1,746,470.96	08/11	1,746,878.17	08/24	1,747,282.09
08/03	1,746,493.47	08/17	1,746,878.69	08/30	1,747,280.10
08/04	1,746,493.83	08/18	1,747,070.25	08/31	1,747,321.84

Deposits and Other Credits

Deposits

Date posted	Amount	Transaction description	Reference number
3 transactions for a total of \$452.67			
08/10	233.58	Deposit	119115290
08/20	202.18	Deposit	016438874
08/31	16.91	Deposit	121988066

ACH Credits

Date posted	Amount	Transaction description	Reference number
12 transactions for a total of \$400.20			
08/03	15.00	ACH Credit Nwl-EFT Nationwide Life 102A625375	00010215907395953
08/03	7.51	ACH Credit Nwl-EFT Nationwide Life 917A106761	00010215907395957
08/04	.36	Corporate ACH ACH Item Metlife 900067582	00010216909469941
08/10	85.08	Corporate ACH Echeckpay Homesite Agency	00010221904613786

ACH Credits continued on next page

Corporate Business Account Statement

AMFIN INSURANCE AGENCY INC
3391 PEACHTREE RD NE STE 110

For the period 07/31/2010 to 08/31/2010
Account number: 42-2719-0724
Page 2 of 2

Deposits and Other Credits - continued

ACH Credits - continued

12 transactions for a total of \$400.20

Date posted	Amount	Transaction description	Reference number
08/10	6.50	ACH Credit Nwl-EFT Nationwide Life 917A107159	00010221907066963
08/11	59.18	ACH Credit Achpayment Glaic Hr089	00010221907073225
08/17	.52	ACH Credit Nwl-EFT Nationwide Life 917A107507	00010229906571510
08/18	191.56	ACH Credit Achpayment Glaic 0000078211	00010229906577617
08/24	6.41	ACH Credit Nwl-EFT Nationwide Life 917A107876	00010236905714037
08/24	3.25	ACH Credit Nwl-EFT Nationwide Life 102A648174	00010236905714049
08/31	15.00	ACH Credit Nwl-EFT Nationwide Life 102A654050	00010243905074530
08/31	9.83	ACH Credit Nwl-EFT Nationwide Life 917A108292	00010243905074528

Checks and Other Debits

Checks and Substitute Checks

2 transactions for a total of \$976.99

Date posted	Check number	Amount	Reference number	Date posted	Check number	Amount	Reference number
08/02	116	975.00	095140291	08/30	117	1.99	095404890

Check and Substitute Check Summary

* Gap in check sequence

Check number	Amount	Date paid	Reference number	Check number	Amount	Date paid	Reference number
116	975.00	08/02	095140291	117	1.99	08/30	095404890