# 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.:	09-21329
	: Chapter 11	
AmTrust Properties Inc. nka AmFin	Judge:	Morgenstern-Clarren
Properties Inc.	:	
Debtpr	X FS	
As debtor in possession, I affirm:		s
That I have reviewed the financial statement	ents attached hereto, consistin	g of:
x Operating Statement [1]	(Form 2)	
x Balance Sheet [1]	(Form 3)	
x Summary of Operations (		
x Monthly Cash Statement	(Form 5)	
x Statement of Compensati		
x Schedule of In-Force Insu		
and that they have been avenued in accordance	20c	
and that they have been prepared in accordance we practices, and fairly and accurately reflect the debit		
That the insurance, including workers' cor	mpensation and unemploymen	t insurance
as described in Section 4 of the Reporting Require		
	_X NO	io in check, and,
2 That all manhachtion to one and another its of	044144.64.0	and the same
3. That all postpetition taxes as described in		rating
Instructions and Reporting Requirements For Cha		
(If not, attach a written explanation) YES_	_X NO	
4. No professional fees (attorney, accountant	t, etc.) have been paid without	specific
court authorization.		
(If not, attach a written explanation) YES_	_X NO	
5. All United States Trustee Quarterly fees h	asua haan naid and ara current	
	_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 ir	nformation provided above and	in the attached documents
is true and correct.		
(4) The Debter has read a substantial off data assumed		11: M - 11 - O 1: - D 1
[1] - The Debtor has made substantial efforts to prepar (the "Report"). However, given the nature of the Debto	네는 그리얼하다 살아 얼마가 바루 사람들이다는 그리었다. 그리어 아프라이 집안 수 있었다. 하나 되었	, , , , , , , , , , , , , , , , , , , ,
information contained in the Report. Therefore, the De		하는 발생하다 그 이번에 많아 되었다면서 보는 이번 살아가면서 하는 그리고 한다면서 하는 그리고 있다면서 하는데 그리고 있다면 하는데 그리고 있다면 하는데
provided in the Report.	biol can give no assurance as to	the accuracy of the information
provided in the report.		
		× 10
si.	1<.00	I flow
Dated: 9-15-10	Responsible Office	cer of the Debtor in Possession
	De Disservición de Particion de California de Particiones.  Referencia de California d	
	C RO Title	- 404-835-8830 Phone
	Title	Phone

# OPERATING STATEMENT (P&L) Period Ending: 8/31/10

Case No: 09-21329

		Total
	Current Mpnth	Since Filing
Total Revenue/Sales	\$ -	\$ -
Cost of Sales	-	-
GROSS PROFIT		
EXPENSES:		
Officer Compensation	÷	프
Salary Expenses other Employees		<u> </u>
Employee Benefits & Pensions		2
Payroll Taxes		2
Other Taxes		E ANDRON S
Rent and Lease Expense	\$ <del>5</del> 0	38
Interest Expense	i <del>a</del> )	<del>-</del>
Insurance	<b></b>	=
Automobile and Truck Expense	:=	5
Utilities (gas, electric, phone)	-	<u> </u>
Depreciation	ñ <b>≓</b> :	5.
Travel and Entertainment	i <del>=</del> :	<del>-</del>
Repairs and Maintenance		-
Bank Service Charges	~	23
Supplies, Office Expense, etc.	<u>;=</u>	-
Other Exp.	i, <b>=</b> i	50
TOTAL EXPENSES		111
TOTAL EXPENSES:	-	
NET OPERATING PROFIT/(LOSS)	× 0=	(111)
Add: Non-Operating Income:		
Interest Income	s <del>=</del>	=
Other Income	X=	-0
Less: Non-Operating Expenses:		
Professional Fees	-	<b>=</b> 3
Interest Expense	-	( <u>44</u> )
US Trustee Fees		975
NET INCOME/(LOSS)	\$ -	\$ (1,086)
HET INCOME/(ECCO)	<u> </u>	* (.,,,,,,)

Dated: 9-15-10

Responsible Officer of the Debtor in Possession

## BALANCE SHEET Period Ending: 8/31/10

		09-21329	
	Current Month	11/30/2009 <u>At Filing</u>	
ASSETS:	33.06	10) a #2/(0#a)	
Cash	\$ 1,514	\$ 1,514	\$ 100
Inventory	_	-	:=
Accounts Receivables	=	<u> </u>	-
Insider Receivables	=	=	<u> </u>
Land and Buildings	-	-	<u>ਜ਼</u>
Furniture, Fixtures & Equip	-	4 000 500	4 600 506
Equity in Joint Venture	1,629,586	1,629,586	1,629,586 104,536
FIT Receivalbe	104,536	104,536	104,550
TOTAL ASSETS:	1,735,636	1,735,636	1,734,222
LIABILITIES:			
Postpetition Liabilities	=		-
Accounts Payable	-	-	***
Rent and Lease Payable	-	-	100
Wages and Salaries	-		-
Payable to Affiliate	1,000	1,000	-
Other:	×=	=	E
TOTAL Postpetition Liab.	1,000	1,000	-
Secured Liabilities:			
Subject to Postpetition			
Collateral or Financing Order	. <del></del>	-	
All Other Secured Liab.		_	~
TOTAL Secured Liab.	-		-
Prepetition Liabilities:			
Taxes & Other Priority Liab.			
Unsecured Liabilities	7,584,986	7,584,986	7,583,486
Payable to Affiliate Other	7,304,900	-	-
TOTAL Prepetition Liab.	7,584,986	7,584,986	7,583,486
			0
Equity:		400	400
Owners Capital:	100	100	100
Retained Earnings-Pre Pet.	(5,849,364)	(5,849,364)	(5,849,364)
Retained Earnings-Post Pet.	(1,086)	(1,086)	
TOTAL Equity:	(5,850,350)	(5,850,350)	(5,849,264)
TOTAL LIABILITIES			
AND EQUITY:	1,735,636	1,735,636	1,734,222
			8 <del></del>
Responsible Officer of the Debto	r in Possession		
responsible officer of the Debto	5000501011		FORM

FORM 3

#### SUMMARY OF OPERATIONS Period Ended: 8/31/10

Case No:	09-21329
Case No.	03-21323

### Schedule of Postpetition Taxes Payable

Income Taxes Withheld:	Beginning <u>Balance</u>	Accrued/ Withheld	Payments/ <u>Deposits</u>	Ending <u>Balanc</u>	900
Federal	\$ 2	\$ -	\$ <u> </u>	\$	-
State	-	-	Œ		-
Local	-		<u> </u>		-
FICA Withheld		3)	Ħ		=
Employers FICA	-	-	-		•
Unemployment Tax:					
Federal		-	-		-
State	-	=	<del>-</del>		-
Sales, Use & Excise Taxes		-	œ		-
Property Taxes		-	X=		-
Workers' Compensation	-	<del>-</del>	-		-
Other	*1	(~	:=		
TOTALS:	\$	\$	\$ -	\$	•

## AGING OF ACCOUNTS RECEIVABLE AND POSTPETITION ACCOUNTS PAYABLE

Age in Days Post Petition	0-30	30-60	Over 60				
Accounts Payable	NONE	<u>~</u>	<u>~</u>				
Accounts Receivable	NONE	· · · · · · · · · · · · · · · · · · ·	<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 formulation of a Plan of Reorganizat	(i) 1(E/A) (ii) (ii)	period materially aff	ecting operations and				

Dated: 9-15-10

Responsible Officer of the Debtor in Possession

## MONTHLY CASH STATEMENT Period Ending: 8/31/10

Ca	sh Activity Analysis (Cash Basis Only)	:				Case No	: 09-21329	-
			rating Old		erating Acct.	Tax <u>Acct.</u>	Cash Coll. <u>Acct.</u>	Petty Cash <u>Acct.</u>
A.	Beginning Balance	\$	-	\$	1,514			
В.	Receipts (Attach separate schedule)		-		~			
C.	Balance Available (A + B)		-		1,514			
D.	Less Disbursements (Attach separate schedule)				-			
E.	ENDING BALANCE (C - D)	\$	•	\$	1,514			
(PL	EASE ATTACH COPIES OF MOST REC	ENT RE	CONC	ILED E	ANK STATE	EMENTS FI	ROM EACH AC	COUNT)
	erating Account: 1. Depository Name & Location 2. Account Number	Nationa 140582		3ank -	Cleveland O	Н		
	erating Account:  1. Depository Name & Location  2. Account Number		ank - C 9-0708		d OH			
Other monies on hand (specify type and location) i.e., CD's, bonds, etc.):								
Date	Date: 9-17-10 Responsible Officer of the Debtor in Possession							
	Responsible Officer of the	ne Debi	tor in F	osse	ssion			

FORM 5

## MONTHLY STATEMENT OF INSIDER COMPENSATION/PAYMENTS Period Ending: 8/31/10

Case No: 09-21329

The following information is to be provided for each shareholder, officer, director, manager, insider, or owner that is employed by the debtor in possession. Attach additional pages if necessary.

Name:	None		<del></del> ,a		Capacity:		_Shareholde _Officer _Director _Insider
Detailed	Description of Duties:		is	***			-
Current 6	Compensation Paid:			Weekly	or	Monthly	
Current I	Benefits Paid:			Weekly		Monthly	=
	Health Insurance					•	-
	Life Insurance			-		-	_
	Retirement			7	•	<del>20</del>	=
	Company Vehicle						-
	Entertainment			***************************************			-
	Travel			-		-	
	Other Benefits			25			<u>.</u>
	Total Benefits					:	=
Current C	Other Payments Paid:			Weekly	or	Monthly	
	Rent Paid					( <del>)</del>	<b>-</b> 3
	Loans			(			-
	Other (Describe)			XX			_
	Other (Describe)					-	-
	Other (Describe)		3 <del>5.</del>				_,
	Total Other Payments						
CURREN	T TOTAL OF ALL PAYMENTS:			Weekly	or	Monthly	
Dated:	9-15-16	_	_	 Cold Cold		tor in Poss	ession

FORM 6

## SCHEDULE OF IN-FORCE INSURANCE

Period Ending: 8/31/10

	Case No:	09-21329
INSURANCE TYPE	CARRIER	EXPIRATION DATE
Business Insurance Policy	Sentinel Insurance Cpmpany	04/01/11
Package Policy (including Terrorism)	Midwestern Indemnity Ins. Cp.	04/01/11
General Liability	Peerless Indemnity Ins. Co.	04/01/11
Umbrella	Ohio Casualty Ins. Company	04/01/11
Workers Comp	Ohio Bureau of Workers' Comp	Ongoing
Datad: G. v.C.	Ronald & Hour	

## AmFin Properties Inc - Case No.: 09-21329 **Reconciliation Summary** PNC Account 42-2719-0708

	Aug 31, 10
Beginning Balance	1,839.43
Cleared Transactions Checks and Payments - 1 item	-325.00
<b>Total Cleared Transactions</b>	-325.00
Cleared Balance	1,514.43
Register Balance as of 08/31/2010	1,514.43
Ending Balance	1,514.43

Accrual Basis

# AmFin Properties Inc - Case No.: 09-21329 Schedule of Cash Receipts - PNC Account 42-2719-0708 August 2010

CASH AND CASH EQUIVALENTS  102127 · Cash In Bank, NCB - API	Type	Date	Num	Adj	Name	Amount
Total 102127 · Cash In Bank, NCB - API  Total CASH AND CASH EQUIVALENTS						
TOTAL						

Accrual Basis

# Schedule of Cash Disbursements - PNC Account 42-2719-0708 August 2010

	Туре	Date	Num	Adj	Name	Amount
CASH AND CASH EQUIVALENTS						
102127 · Cash In Bank, NCB - API						
Total 102127 · Cash In Bank, NCB - API						
Total CASH AND CASH EQUIVALENTS						
TOTAL						

## Free Business Checking

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

Primary Account Number: 42-2719-0708

Page 1 of 2

Number of enclosures: 0

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

For 24-hour banking sign on to PNC Bank Online Banking on pnc.com FREE Online Bill Pay

For customer service call 1-800-669-1518 Monday - Friday: 7 AM - 10 PM ET Saturday & Sunday: 8 AM - 5 PM ET

Para servicio en espanol, 1-800-669-1518

Moving? Please contact your local branch

Write to: Customer Service PO Box 609

Pittsburgh, PA 15230-9738

Visit us at pnc.com/mybusiness/

TDD terminal: 1-800-531-1648 For hearing impaired clients only

Cash Flow Options for Your Business - Another Benefit At PNC

#### Free Membership

As a PNC customer, you have free membership in the Allied Business Network (ABN), a business-to-business buying group of national vendors offering discounts of 5%-85% on products and services. Save in the areas where your business needs it most, including office supplies, travel, technology, promotional items, and business gifts. Start saving today, see the enclosed brochure or visit abnsave.com/pnc.html for more information and to enroll.

## Free Business Checking Summary

Account number: 42-2719-0708

Overdraft Protection Provided By: Contact PNC to establish Overdraft Protection

Amfin Properties Inc

#### **Balance Summary**

Beginning balance 1,839.43 Deposits and other additions

.00

Checks and other deductions

325.00

Ending balance 1,514.43

0

.00

Deposits and Other Additions

Description

Items

Amount

Checks and Other Deductions Description

Checks

Total

Items

1

1

Amount 325.00 325.00

PNCBANK

**Daily Balance** 

Date 07/31

Total

Ledger balance 1,839.43

Date 08/02 Ledger balance 1,514.43

**Activity Detail** 

## Free Business Checking

For 24-hour account information, sign-on to pnc.com/mybusiness/

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

Amfin Properties Inc

Primary Account Number: 42-2719-0708

Page 2 of 2

Free Business Checking Account Number: 42-2719-0708 - continued

### **Checks and Other Deductions**

Checks ar	nd Substitute	Checks
-----------	---------------	--------

 Date posted
 Check number
 Amount number
 Reference number

 08/02
 110004
 325.00
 095140284

### **Detail of Services Used During Current Period**

Note: The total charge for the following services will be posted to your account on 09/01/2010 and will appear on your next statement as a single line item entitled Service Charge Period Ending 08/31/2010.

\*\* Combined Transactions include ACH Credits, ACH Debits, Checks Paid, Deposited Item - Consolidated, Deposit Tickets Processed

Description	Volume	Amount	
Account Maintenance Charge		.00	Required Balance Met
Returning Check Images Monthly Charge	1	.00	Included in Account
Dual Statement Delivery	1	.00	Included in Account
Combined Transactions	1	.00	Included in Account
Checks Paid	1	.00	
Total For Services Used This Period		.00	
Total Service Charge		.00	