



**National & International Background Screening,
 Pre- Employment & Comprehensive Due Dilligence Reports**
 9980 South 300 West #200 Sandy, Utah
 801-903-2626

Investigative Report

Date Completed
 CLIENT: **SAMPLE REPORT**
 Case Number: **1234**

Client Reference: **SAMPLE REPORT**

CORPORATE IDENTIFYING INFORMATION

SUBJECT NAME:

SAMPLE REPORT LLC

CURRENT ADDRESS:

P.O. BOX XXXX

LEXINGTON, KENTUCKY XXXX

INVESTIGATIVE SUMMARY

<i>Category</i>	<i>Description</i>	<i>Area</i>	<i>Status</i>	<i>Report Page#</i>
*Subject Information	Record Found	National	VERIFIED	XX
*Name Variations	xxxxxxx	State xxxxxx	CLEAR	XX
*Business Filings	Attached	National	CLEAR	XX
*Bankruptcies	No Record	State Of xxxxxx	CLEAR	XX
*Liens & Judgments	No Record	National	CLEAR	XX
*Corporation Filings	No Record	National	CLEAR	XX
*Business Registration	No Record	National	CLEAR	XX
*UCC Filings For Business	No Record	National	CLEAR	XX
*Associated Businesses	No Record	National	CLEAR	XX
*Other Businesses At Address	No Record	National	CLEAR	XX
*Associated People	No Record	National	CLEAR	XX
*Individuals At Address	No Record	National	CLEAR	XX
*Assets At Address	No Record	National	CLEAR	XX
*Properties	No Record	National	VERIFIED	XX
*Previous Ownership	No Record	National	CURRENT	XX
*Internet Domain Names	No Record	National	CLEAR	XX
*Business Information From Dun & Bradstreet	No Record	National	CLEAR	XX
*Media Search	No Record	National	CLEAR	XX
*Experian Credit Report	Attached	National	CLEAR	

NOTE:

***All of the searches mentioned above can be performed without subjects authorization.**

COMPREHENSIVE BUSINESS PROFILE REPORT

Subject Information:

Company Name: **SAMPLE REPORT**

Address: **PO BOX XXXXX, LEXINGTON KY 40583-2916**

Phone:

FEIN:

Company Information:

Company Name: **SAMPLE REPORT**

Address: **PO BOX XXXXX, LEXINGTON KY 40583-2916**

Phone:

FEIN:

Name Variations:

[None Found]

Business Filings:

Bankruptcies:

[None Found]

Liens & Judgments:

[None Found]

Corporation Filings:

Company Name: **SAMPLE REPORT**

Charter Number: XXXXXXXX

Status: ACTIVE

Filing Date: XX/XX/XXXX

Incorporation State: KY

Terms:

Type: Domestic

Registered Agent: **SAMPLE REPORT**

Last Seen: XX/XX/XXXX

Business Registration:

Name: **SAMPLE REPORT**
Mailing Address: **PO BOX XXXX, LEXINGTON KY 40583-2916**
Filing Number: XXXXXXX
Filing Type: SOS Limited Liability Company
Filing Code: Domestic
State of Registration: KY
Status: Active

Name: **SAMPLE REPORT**
Mailing Address: **PO BOX XXXXXX, LEXINGTON KY 40583-2916**
Filing Number: XXXXXXX
Filing Type: SOS Limited Liability Company
Filing Code: Domestic
State of Registration: KY
Status: Active

UCC Filings for Business:
[None Found]

Associated Businesses:
[None Found]

Other Businesses at Address:

Name: **SAMPLE REPORT**
Name: **SAMPLE REPORT**
Name: **SAMPLE REPORT**
Name: **SAMPLE REPORT**
Name: **SAMPLE REPORT**

Associated People:

Business Contacts:

SAMPLE REPORT, SSN: **XXX-XX-XXXX**,
REGISTERED AGENT, Date Last Seen: Dec 09, 2005
X1XX E MAIN ST STE XXX, LEXINGTON KY 40507-1332

Individuals at Address:

SAMPLE REPORT - SSN: **XXX-XX-XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX**

Names Associated with Individual:

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

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SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **169-40-xxxx** DOB: **00/1953**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

Current Address: **X1XX E MAIN ST STE XXX, LEXINGTON KY 40507-1332**

Current Phone: **(XXX) XXX-XXXX**

Names Associated with Individual:

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

SAMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

Current Address: **X1XX E MAIN ST STE XXX, LEXINGTON KY 40507-1332**

Current Phone: **(XXX) XXX-XXXX**

Names Associated with Individual:

AMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

AMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

AMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

AMPLE REPORT - SSN: **XXX-XX-XXXX** DOB: **XX/XX/XXXX**

Assets at Address:

Properties:

Current Ownership:

[None Found]

Previous Ownership:

[None Found]

Internet Domain Names Registered to Business:

[None Found]

This portion of the report contains information from Dun & Bradstreet, Inc.
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Business Information from Dun & Bradstreet:

[None Found]

CONFIDENTIAL

SAMPLE REPORT

XXX W XXtH St # XXX
 New York, NY XXXXXX
 Phone: XXX-XXX-XXXX

Business Type: Corporation

Experian File Number: XXXXXXXX
 Experian File Established: January 2002
 Experian Years on File: 4 Years

Credit Summary

The objective of the Credit Ranking Score is to predict payment behavior. High Risk means that there is a significant probability of delinquent payment. Low Risk means that there is a good probability of on-time payment.

Credit Ranking Score: 8



* Businesses Scoring Worse:	8%
✓ Bankruptcies:	0
* Liens (see detail):	6
* Judgments Filed (see detail):	3
✓ Collections:	0

Key Score Factors:

- Number of recent judgments.
- Balances on derogatory public record accounts.
- Ratio of bad accounts to total accounts.
- Few, if any, current accounts.

Recommended Action: High Risk

Key Facts

Number of Employees: 2
 Years in Business: 4 Years

Key Personnel:
 Chief Oper: **SAMPLE REPORT**
 President: **SAMPLE REPORT**
 President: **SAMPLE REPORT**

Executive Summary

UCC Filings: 0

Date: XX/XX/XXXX
Plaintiff: Commissioner Of Labor State Of New
Filing Location: New York County Reg
Legal Type: Judgment
Legal Action: Filed
Document Number: XXXXXX
Liability Amount: \$594

Date: XX/XX/XXXX
Plaintiff: Commissioner Of Labor
Filing Location: New York County Reg
Legal Type: Judgment
Legal Action: Filed
Document Number: XXXXXXXXXX
Liability Amount: \$4,246

Date: XX/XX/XXXX
Plaintiff: **SAMPLE REPORT**
Filing Location: New York County Reg
Legal Type: Judgment
Legal Action: Satisfied
Additional Activity: 02/13/2003 Judgment Filed
Document Number: XXXXXXXXXX
Liability Amount: \$130,454

Tax Lien Filings

[Back to top](#)

Date: XX/XX/XXXX

Filing Location: New York County Reg
Legal Type: State Tax
Legal Action: Lien
Document Number: XXXXXXXX
Liability Amount: \$123,332
Description: Other Tax

Date: XX/XX/XXXX

Filing Location: New York County Reg
Legal Type: State Tax
Legal Action: Released
Document Number: XXXXXXXX
Liability Amount: \$4,246
Description: Other Tax

Date: XX/XX/XXXX

Filing Location: New York County Reg
Legal Type: State Tax
Legal Action: Released
Additional Activity: 05/29/2003 State Tax Lien
Document Number: XXXXXXXX
Liability Amount: \$7,870
Description: Other Tax

Date: XX/XX/XXXX

Filing Location: New York County Reg
Legal Type: State Tax
Legal Action: Lien
Document Number: XXXXXXXX
Liability Amount: \$77,470
Description: Other Tax

Date: XX/XX/XXXX
Filing Location: New York County Reg
Legal Type: State Tax
Legal Action: Lien
Document Number: XXXXXXXX
Liability Amount: \$178,771
Description: Other Tax
Date: XX/XX/XXXX

Filing Location: New York County Reg
Legal Type: State Tax
Legal Action: Lien
Document Number: XXXXXXXX
Liability Amount: \$87,084
Description: Other Tax

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BANKRUPTCIES

Date Filed:

10/17/2000

Chapter:

7

Disposition Date:

01/18/2001

Disposition:

Discharged

Filing Status:

CORPORATE

Case Number:

XXXXXX

Court Location:

FLORIDA MIDDLE - TAMPA

Debtor Name:

SAMPLE REPORT

Debtor SSN:

XX-XXXXXXX

Debtor Address:

SAMPLE REPORT, SEMINOLE FL 33776-3534

Assets available for unsecured creditors:

No

Debtor is self-represented:

No

Attorney:

SAMPLE REPORT,
PO BOX XXXXX, TAMPA FL 33672 -
(XXX) XXX-XXXX

Trustee:

SAMPLE REPORT,
SAMPLE REPORT -
(XXX) XXX-XXXX

Creditors Meeting Date:

11/15/2000

Creditors Meeting Location:

SAMPLE REPORT

FEDERAL CRIMINAL FILLINGS

NEGATIVE

FEDERAL CIVIL FILING

NEGATIVE

STATE CRIMINAL FILING

NEGATIVE

STATE CIVIL FILING

NEGATIVE

OSHA REPORTS

NEGATIVE

U.C.C. FILINGS

DELAWARE SECRETARY OF STATE,

Debtors: SAMPLE REPORT

Debtor Address:

Secured Parties: SAMPLE REPORT

Secured Party Address: SAMPLE REPORT (ASSIGNEE)

FILING TYPE: ASSIGNMENT

FILING DATE: 1/6/2004

FILING TIME: 2:23PM

FILING NUMBER: XXXXXX

ORIGINAL FILING NUMBER: XXXXXXXX

ORIGINAL FILING DATE: 9/24/2003

**FILING OFFICE: SECRETARY OF STATE/UCC DIVISION FEDERAL & DUKE OF YORK STS
DOVER, DE 19901**

TAX LIENS & JUDGMENTS

Type: **STATE TAX LIEN**

Court: **SAN FRANCISCO COUNTY COURT (RD), CA**

Case Number: **XXXXXXXXXX**

Amount: **\$14,533**

Date Filed: **03/15/2005**

Debtor Name: **SAMPLE REPORT**

Debtor SSN: **XXX-XX-xxxx**

Debtor Address: **SAMPLE REPORT**

Creditor: **STATE OF CALIFORNIA**

ARTICLES OF INCORPORATION

ATTACHED

CERTIFICATE OF DISSOLUTION

ATTACHED

MEDIA SEARCH

ATTACHED

*****END OF REPORT*****