JUDGMENT DEBTOR EXAMINATION QUESTIONNAIRE

CASE NAME/NUMBER: Louis Gino Bartucci v. Basri Emini, Case No. 37-2014-00013124-CL-EN

1. Full Name: Basri Gmini

Address: 701 W. Beech st

City: San Diego State: CA ZIP: 92101

Home Phone: NOW E Mobile/Cellular 312-550-3291

Social Security Number: [redacted] Drivers License Number and State: [redacted]

Birth Date: 9-19-1975 Birth Place: Macedonia

2. Spouse's Full Name: NOW

Address:

City: State: ZIP:

Home Phone: Mobile/Cellular

Social Security Number: Drivers License Number and State:

Birth Date: Birth Place:

3. Children's Names and Ages: Ø

4. Your Occupation: Restaurant

5. Employer: Tous hospitality LLC

Employer's Address: 7734 Girard Ave

Employer Telephone Number 858-456-6674

Employed Since: May 2013

EXHIBIT 1
WIT. Emini
DATE 9-19-14
KRAMM COURT REPORTING

Name, Address, and Telephone Number of Payroll Personnel Offices if different from Employer's Address:

Basri Gmini 858-456-6674

 Debtor's Initials

Paydays/Date: 7th & 22nd Gross Pay per Payday: [illegible]

Net Pay per Payday: [illegible]

If you have payroll deductions other than taxes or insurance benefits, list amounts, types, names and addresses of those receiving the funds:

6. Are you Self Employed: Yes

If so, list the complete name, address and telephone number for your business:

Nosh Delicatessen
7734 Grand Ave
LA Jolla, CA 92037

If so, describe the nature of your business: Deli

List all licenses/permits required for your business identifying your license numbers, issuance dates and expiration dates:

N/A

 Debtor's Initials [illegible] 1.2

7. Spouse's Occupation: NONE

Employer: _____

Employer's Address: _____

Employer Telephone Number _____

Employed Since: _____

Name, Address, and Telephone Number of Payroll Personnel Offices if different from Employer's Address:

_____

_____

_____

Paydays/Date: _____ Gross Pay per Payday: _____

Net Pay per Payday: _____

If you have payroll deductions other than taxes or insurance benefits, list amounts, types, names and addresses of those receiving the funds:

_____

_____

_____

_____

8. Is your spouse self-employed?: _____

If so, list the complete name, address and telephone number for your spouse's business:

_____

_____

_____

_____

_____

 Debtor's Initials _____ 1, 3

If so, describe the nature of your spouse's business:

List all licenses/permits required for your spouse's business identifying all license numbers, issuance dates and expiration dates:

9. Does any other family member furnish income?: NO

If so, list his or her name, relationship and amount of income given per month:

Fia Ballagh.

Emily Emily

10. Do you own or are you renting your residence address: Renting

11. If you own your residence address, furnish the following information:

Date purchased: _____ Purchase Price: _____

Name/Names listed on Grant Deed: _____

Balance owing on all trust deeds/mortgages:

1st-Total Balance: _____ Mo. Payment: _____

 Debtor's Initials _____ J.C

2nd-Total Balance:_____ Mo. Payment:_____

3rd-Total Balance:_____ Mo. Payment:_____

Names, Addresses and telephone numbers for holders of trust deeds/mortgages and loan numbers of each:

1st:_____

_____

_____

2nd:_____

_____

_____

3rd:_____

_____

_____

Current Market Value of Residence: _____

12. If renting, to whom do you pay your rent to?

Name: N/A

Address:_____

_____

Telephone number:_____ Rent Amount, Per Month: 2150

13. Do you own or have an interest in any other real estate, including condominiums, anywhere in the United States of America? NO

_____

If so, describe the extent of your interest?: _____

_____

_____

_____

 Debtor's Initials _____ J.S

If so, list the complete address/location for each property: _____

If so, list the market value for each property: _____

If so, list the name address and telephone number of each agent managing or controlling your interest in the property:

If so, list the amount of income you receive from the property: _____

If so, list the balance of any trust deeds/mortgages on the property:

1st-Total Balance: _____ Mo. Payment: _____

2nd-Total Balance: _____ Mo. Payment: _____

3rd-Total Balance: _____ Mo. Payment: _____

Names, Addresses and telephone numbers for holders of trust deeds/mortgages and loan numbers of each:

1st: _____

 Debtor's Initials _____ 1 of 6

2nd:

3rd:

14. Does your spouse own or have an interest in any other real estate, including condominiums anywhere in the United States of America? Don't have Spouse

If so, describe the extent of your spouse's interest?:

If so, list the complete address/location for each property:

If so, list the market value for each property:

If so, list the name address and telephone number of each agent managing or controlling your interest in the property:

 Debtor's Initials _____ 1.7

If so, list the amount of income your spouse receives from the property:

Don't have Spouse

If so, list the balance of any trust deeds/mortgages on the property:

1st-Total Balance:_____ Mo. Payment:_____

2nd-Total Balance:_____ Mo. Payment:_____

3rd-Total Balance:_____ Mo. Payment:_____

Names, Addresses and telephone numbers for holders of trust deeds/mortgages and loan numbers of each:

1st: No Mortgages

2nd:

3rd:

15. Do you have any accounts with banks, savings and loan associations and/or credit unions?:

NO

 Debtor's Initials (R) 1.8

If so, please provide the following information for each responsive bank, savings and loan association and/or credit union:

Bank, Savings and Loan and/or Credit Union Number :

Name and branch address of the bank, savings and loan and/or credit union:

Checking Account Number: _____

Balance in Checking Account: _____

Names on Checking Account: _____

Savings Account Number: _____

Balance in Savings Account: _____

Names on Savings Account: _____

IRA Account Number: _____

Balance in IRA Account: _____

Names on IRA Account: _____

 Debtor's Initials _____ 1.9

Safe Deposit Box Number: NONE

Names and Address of Person's With Access to Safe Deposit Box:

Do you have any additional accounts with banks, savings and loan associations and/or credit unions?:

NO

NOTE: If you have any additional accounts please provide the same information for those accounts on the lined paper at the end of the Questionnaire.

16. Does your spouse have any of the above type of accounts, other than the accounts set forth in response to Question No. 5?

Don't have Spouse

If so, please provide the following information for each account:

Name and branch address of spouse's first bank, savings and loan and/or credit union:

Spouse's Checking Account Number:

Balance in Spouse's Checking Account:

Names on Spouse's Checking Account:

 Debtor's Initials 1.10

Don't have spouse

Spouse's Savings Account Number: _____

Balance in Spouse's Savings Account: _____

Names on Spouse's Savings Account: _____

Spouse's IRA Account Number: _____

Balance in Spouse's IRA Account: _____

Names on Spouse's IRA Account: _____

Spouse's Safe Deposit Box Number: _____

Names and Address of Person's With Access to Spouse's Safe Deposit Box:

NOTE: If your spouse has any additional accounts please provide the same information for those accounts on the lined paper at the end of the Questionnaire.

17. Do you or your spouse have any interest in any profit sharing plans or retirement funds: NO

If so, list the names and addresses of the banks, trusts or other entities holding the funds: _____

 Debtor's Initials _____ 1.11

NO Spouse

If so, list the complete names for the beneficiaries of these accounts, including yourself:

If so, list the amounts being held for you or your spouse: _____

18. Do you or your spouse have any annuities due to either of you nor or in the future?:

NO

If so, list the names and addresses of firms paying the annuities, reference account numbers, amounts and dates due:

19. Are you or your spouse beneficiaries under any trusts or wills?:

NO

If so, list the names and addresses of the financial institutions, agents, executors and attorneys handling same:

 Debtor's Initials _____ 1.12

Don't Spend

20. Do you or your spouse owns stocks or bonds of any kind? NO

If so, list the names and number of shares of stock:

If so, list the names, types and amounts for each bond:

If so, please list the name, address and telephone number for you or your spouse's broker?

Don't have Spouse

21. Do you or your spouse own any mutual funds?: NO

If so, please list the name, type and amount for each:

If so, please list the name, address and telephone number for you or your spouse's broker?

22. Do you or your spouse have any life insurance policies?: NO

If so, list the names and addresses of the life insurance companies:

If so, list the name, address and telephone number of your insurance agent: N/A

If so, list the policy number and face amount for each policy:

If so, list the names, addresses and relation to you of each of the beneficiaries for each policy:

23. Do you or your spouse have any other investment/income producing type insurance policies, such as annuities, endowments, retirement benefits, pensions, etc., not already discussed? NOWR

Not Married

If so, please list the type, amount and identification number for each:

NONE

If so, list the name and address of each entity holding or managing each:

NONE

24. Please provide the following information for each motor vehicle belonging to you or your spouse:

MOTOR VEHICLE

Make: Jeep Model: SRT8

Year: 2007 License:

Mileage: 110,000 Estimated Value: [redacted] Don't know

Registered Owner's Name, Address and Telephone Number:

Rashi Gupta

312-850-3291

Name, Address and Telephone Number of Legal Owner/Lender: None

Car Loan Account Number: N&NE

Balance Owed on Vehicle: _____

MOTOR VEHICLE 2

Make: None Model: _____

Year: _____ License: _____

Mileage: _____ Estimated Value: _____

Registered Owner's Name, Address and Telephone Number: _____

Name, Address and Telephone Number of Legal Owner/Lender: _____

Car Loan Account Number: _____

Balance Owed on Vehicle: _____

MOTOR VEHICLE 3

Make: None Model: _____

Year: _____ License: _____

Mileage: _____ Estimated Value: _____

Registered Owner's Name, Address and Telephone Number: _____

 Debtor's Initials _____ 1.17

Name, Address and Telephone Number of Legal Owner/Lender: NONE

Car Loan Account Number: NONE

Balance Owed on Vehicle:

NOTE: If you or your spouse have any additional motor vehicles please provide the same information for those vehicles on the lined paper at the end of the Questionnaire.

25. Do you or your spouse own any other vehicles such as house trailers, utility trailers, motor homes/RV's, boats, house boats, airplanes, mopeds, motorcycles, ATV's, jet ski's, etc.

NO

If so, please provide detailed descriptions of each such vehicle, including complete registration and licensing information, exact location of each vehicle, and estimated value of each vehicle:

 Debtor's Initials _____ 1.18

26. With the exception of home furnishings and clothing, do you or your spouse own any other personal properties such as jewelry, antiques, stamp/coin collections, works of art, etc.

NO

If so, please provide complete descriptions of each item including the estimated value of each item:

27. Please provide the following information for all promissory notes, drafts, trust deeds, mortgages, etc., due payable to you or your spouse:

NUMBER 1

Face Amount: NONE

Current Balance Owed:

Who Payable to:

 Debtor's Initials

1.19

Names, Address and Telephone Numbers of Payors:_____

_____

_____

_____

_____

NUMBER 2

Face Amount: NONE

Current Balance Owed:_____

Who Payable to:_____

Names, Address and Telephone Numbers of Payors:_____

_____

_____

_____

NUMBER 3

Face Amount: NONE

Current Balance Owed:_____

Who Payable to:_____

Names, Address and Telephone Numbers of Payors:_____

_____

_____

_____

NOTE: If you or your spouse have any additional promissory notes, drafts, trust deeds, mortgages, etc., due payable to you or your spouse please provide the same information for those documents on the lined paper at the end of the Questionnaire.

28. Are you or your spouse acting as an attorney in fact (power of attorney), trustee, administrator or executor over any property other than your own property:

NO

_____

If so, please furnish complete details as to your position and function in that capacity and also provide a complete description and location of each property involved.

NO

29. Have you or your spouse sued anyone?: NO

If so, please provide the case title, case number, name and address of court, name and address of attorney of record, date case filed, amount sued for, and date you obtained judgment:

30. Please provide the name, address, telephone number and amounts owed of all persons or entities owing money to you or your spouse.

NONE

31. What is the total amount of you unsecured debt?: Not Available at this Point

Please list the names, address, telephone numbers of you unsecured creditors in addition to the amounts owed to each unsecured creditor:

 Debtor's Initials _____ 1.22

32. What is the total amount of you secured debt?: ND

Please list the names, address, telephone numbers of you secured creditors in addition to the amounts owed to each unsecured creditor:

33. Do you have any other judgments against you?: YES

List the names, addresses and telephone numbers of those holding judgments, and the amount of each judgment:

Citi Bank Card Discover

34. Have you ever filed for bankruptcy?: To my best Recollection

If so, furnish the date and place filed, the case number, what type of bankruptcy (i.e., 7, 11, 13), name and address of attorney and date of discharge:

35. Have you applied for credit during the past 12 months?: No

If so, list the names and addresses of the persons or entities you applied for credit with, when you applied, what amount you applied for and whether the application was approved?:

 Debtor's Initials _____ 1.29

36. List your major monthly expenses and how they are met:

Rent 2,150 Split w/ 3 Roommates split Equal

37. How do you intend to satisfy this judgment?: Payout / or OFFER of $15,000 Lump to Me By My Sister or Ownership of www.AmericanRoadboat.com

 Debtor's Initials _____ 1.25

38. What books and records showing your receipts and disbursements do you keep, where do you keep them?

NONE

39. Do you have an Accountant?: NO

If so, please identify your Accountant's name, address and telephone number:

40. Did you file federal or state tax returns in the last 5 years: Yes

Are you expecting any tax refund? If so, please give details: NO

 Debtor's Initials _____ 1.26

I declare under the penalty of perjury under the laws of the state of California, that the foregoing, including any attachments, is true and correct.

DATE: 9-19-2014

Debtor's Signature

Rashi Emiani

Debtor's Name Printed

 Debtor's Initials _____ 1.27