Livingston
Management Services

225 West 35th Street, 15th Floor New York, NY 10001
Phone: 646-214-0321
Email: info@livingstoncre.com

534 West 42nd Street Condominium

Board Package Requirements for Sale

- Notice of intention to sell, lease, or refinance condominium unit
- Purchase application
- Certificate of waiver of rights of first refusal
- Copy of sales contract
- Credit application authorization
- Completed W9

All completed packages must be returned with a copy of the signed contract to:

Livingston Management Services
Attn: Joel Krieger
225 West 35th Street, 15th Floor
New York, NY 10001

Please be sure to remit the proper amount on checks for the processing of this board package. Most applications take approximately 2-4 weeks to process from the date that all materials are received.

Schedule of Fees

- **$300** – Resale application fee – From owner payable to Livingston Management Services, LLC
- **$135** – Credit check fee (per each buyer 18+) payable by credit card on application

Cover Letter

November 6, 2019

The Deuce, 534 West 42nd Street, Apt #3

Manhattan, New York

Dear Owner,

Hope you are doing well, I have attached this cover letter to help you learn a bit about me

I have been leaving in a temporal secondary suite in 10 River Road Apt 7M, Roosevelt Island-New York for the past 6 months, but now I will like to move because I will like to have my own private place and need to be more central located to my destination to work and save time to commuter. While I have enjoyed my time at 10 River Road, Roosevelt Island-New York for I have wanted to live in the Midtown west side Manhattan.

I am particularly interested in your rental unit because the nearby amenities, proximity to public transportation, and relatively less commute to work. I have been employed at Last Rites Tattoo Theatre as a highly experience professional Tattoo Artist and current working full time. For the last past 6 months and consider my employment secure. I am quite and respectful of others privacy, and I have always had a good relations with my previous landlords. Although I enjoy socializing, I like my home to be a peaceful place.

I understand that entering into a tenancy, I will be taking on legal responsibilities. As your tenant, I am aware that I will need to:

- Pay full rent on time
- No unreasonable disturbs others'
- Care for your property and
- Otherwise follow the Residential Tenancy Act and the terms of my tenancy agreement.

Along with my cover letter, I have include my references, my credit report permission & my bank statements where it shows enough to cover my rent expenses in case of an emergency and with annual income of $220,800

Moving Date: 11/05/2019 or as soon as possible

I am looking for stable tenancy and hope you will consider my application. If you have any questions and concerns don't hesitate to contact me.

Sincerely,

Johrch Henry Anglas Padilla

Rental Application

534 West 42nd Street Condominium

NOTICE OF INTENTION TO SELL, LEASE, OR REFINANCE CONDOMINIUM UNIT

The Undersigned, being the owner of Unit No.: 3, at

534 West 42nd Street Condominium

hereby notifies the residential Board of Managers in care of Livingston Management Services, LLC, the Managing Agent, that the undersigned has received a bona fide offer to SELL ( ) LEASE (x) said Apartment from the below names prospective purchaser or lessee on the terms stated below, and that the undersigned intends to accept such offer.

NAME AND ADDRESS OF PROSPECTIVE PURCHASER OR LESSE:

If a prospective purchaser or lessee is a corporation, name the designated officer, Director, stockholder, or employee of the corporation who will occupy the apartment unit and for how long a term. When and if designated occupant vacates the unit, another application much be filed and references submitted before occupancy can be allowed to successor designated occupant. JOHRCH HENRY ANGLAS PADILLA

TERMS OF PROPOSED SALE OR LEASE.

Attached is a true copy of the contract of ~~sale~~ or lease setting forth all of the terms of agreement between the parties.

Purchase Price: $4,500 Proposed Closing date: 11/18/2019

Monthly Rental: $4,500 Lease Term: 12 MONTHS

Anticipated Occupancy Date: IMMEDIATE

Original Purchase Price (Upon acquisition by Owner): N/A

Date of Initial Acquisition by Owner: N/A

OWNERS NAME: Amit Khaneja

OWNERS SIGNATURE: 917 349 1489

OWNERS EMAIL ADDRESS: amitkhaneja@hotmail.com

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11/11/2019
Today's Date

Purchase Application
For the Sale of a Condominium

BASIC INFORMATION

Condominium Name: THE DEUCE
Number of Units: 7
Condominium Address: 534 W 42ND STREET, NEWU YORK,NY 10036
Unit #: 3
Purchase Price: $4,500
Is Source of Down Payment a Gift? ☐ or Loan? ☐
Proposed Closing Date: IMMEDIATE OR BERFORE 11/18/2019
Common Charges:
Requested Move In Date: IMMEDIATE OR BEFORE 11/18/2019
Telephone: 646-214-0333
Managing Agent: LIVINGSTON MANAGEMENT SERVICES,LLC
Email: info@livingstonmgmt.com
Address: 225 West 35th Street, 15th Floor New York, NY 10001

SELLER'S INFORMATION

Seller(s): Amit Khaneja
Present Address: 534 W. 42nd St. #3 NY, NY 10036
Home Telephone: N/A
Office Telephone:
Cell Telephone: N/A
Seller's Attorney: N/A
Firm: N/A
Firm Address: N/A
Email: N/A
Office Telephone:
Cell Telephone: N/A
Facsimile:

SELLER'S BROKER

Seller's Broker: Rueben Schatz
Email: rueben.schatz@elliman.com
Office Telephone: 212-891-2984
Cell Telephone: 212-726-6312
Facsimile: 212-645-4356

PURCHASER'S INFORMATION

Purchaser(s): JOHRCH HENRY ANGLAS PADILLA
Present Address: 10 RIVER ROAD, APT 7 M, NEW YORK,NY 10018
Home Telephone: 646-354-9736
Office Telephone: 212-529-0666
Cell Telephone: 646-354-9736
Email: anglashenry@hotmail.com
Facsimile:
Amount of Financing: 50
Deposit on Contract:
If purchaser is a corporate entity:
Name of Corporation: N/A
Address of Corporation:
Telephone: N/A

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PURCHASER'S INFORMATION Continued

N/A Purchaser's Attorney	N/A Firm	
N/A Firm Address	N/A Email	N/A Facsimile
N/A Office Telephone	N/A Cell Telephone	

Name(s) Condominium Units would be held in (and type of joint ownership) (e.g. tenants in common, joint tenants with rights of survivorship, or tenants by the entirety)

N/A

N/A Mortgage Lender	N/A Email	
N/A Attorney for Lender	N/A Cell Telephone	N/A Facsimile
N/A Office Telephone		

PURCHASER'S BROKER

ALEXANDER OROZCO Purchaser's Broker	aorozco@citihabitats.com Email	
212-957-4100 Office Telephone	917-478-9373 Cell Telephone	917-262-7498 Facsimile

PERSONAL INFORMATION REGARDING APPLICANT(S)

	Applicant	Co-Applicant
Name:	JOHRCH HENRY ANGLAS PADILLA	N/A
Residence Address:	10 RIVER ROAD, APT 7M NY,NY 10018	
Dates of Residence:	From: 06 / 23 / 2019 To: 11/ / 11 / 2019	From: / / To: / /
Prior Address: (If less than 5 years at present address)	ARGENTINA	
Dates of Residence:	From: / / To: / /	From: / / To: / /
Employment Status:	Full-time ☑ Part-time ☐ Unemployed ☐ Retired ☐ Student ☐	Full-time ☐ Part-time ☐ Unemployed ☐ Retired ☐ Student ☐
Are you self-employed?	Yes ☐ No ☑	Yes ☐ No ☐
Current Employer:	LAST RITE TATTOO THEATRE	
Employer Address:	325 W 38TH STREET, FRONT 1 NEW YORK, NY 10018	
Period of Employment:	From: 06 / 26 / 2019 To: 11 / 11 / 2019	From: / / To: / /
Years in Line of Work:	6MONTHS IN CONTRACT WITH 3YEARS CONTRACT	
Supervisor's Name:	PAULA BOOTH	
Business Telephone:	212-529-0666	
Prior Employer: (If less than 3 years in current job)	SAME JOB IN ARGENTINA	
Prior Employer Address:	ARGENTINA	
Period of Employment:	N/A	
Prior Supervisor's Name:	N/A	
Business Telephone:	N/A	
Income Estimate this year:	N/A	
Actual Income last year:	N/A	
Educational Background (Optional):	BACHELOR	

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ADDITIONAL INFORMATION REGARDING APPLICANT(S)

Name(s) of all persons who will reside in the unit
(NOTE: If applicant is a corporate entity, a new lease package must be completed and sent to the Board each time occupancy changes.)
JOHRCH HENRY ANGLAS PADILLA

Schools and years attended of occupants (if different from purchaser) (optional)
N/A

Names of anyone in the building known to applicants
N/A

Are any pets to be maintained in the unit? If yes, note number and kind. (NOTE: Please refer to building rules)
NO

Names of organizations to which applicants belongs (clubs, societies, board memberships, etc.) (optional)
NONE

Will occupancy be: Full-time ☑ Part Time ☐

If Part Time, what is the approximate number of days per month you will use the unit?

Do you plan to lease your unit? Yes ☐ No ☑ (NOTE: Please refer to building rules)

Do you plan to perform any alterations to the unit? Yes ☐ No ☑ (NOTE: Please refer to building Alteration Agreement)

If yes, please describe the plans:

Will there be any business or profession conducted in the unit? Yes ☐ No ☑ (NOTE: Please refer to building rules)

If yes, please describe the nature of your business:

If you do not plan to receive mail at the unit, please specify where monthly bills and correspondence should be sent:

Address of any additional residences owned or leased by applicant:

Is this your first time purchasing a condominium? Yes ☑ No ☐

If no, where else have you owned before:

Emergency Contact: CARLOS LANDA

646-709-0145	646-709-0145	carloslandaverde0385@gmail.com
Office Telephone	Cell Telephone	E-mail

APPLICANT'S HOUSING HISTORY

DARWIN RODRIGUEZ	ROOSELVET ISLAND
Current Landlord	Landlord's Address
718-916-5809	3100
Landlord Telephone Number	Current Rent
RELOCATING NEAR TO WORK	08/23/2019
Reason for Moving	Dates of Occupancy
ARGENTINA	
Prior Landlord *(If at present location less than 5 years)*	Prior Landlord's Address
	ARGENTINA
Prior Landlord Telephone Number	Prior Rent
Reason for Moving	Dates of Occupancy

BUSINESS AND PROFESSIONAL REFERENCES

	Applicant	Co-Applicant
1. Name:	PAULA BOOTH	N/A
Address:	325 WEST 38TH STREET,NEW YORK,NY 10018	
2. Name:	DARWIN RODRIGUEZ	
Address:	ROOSELVET ISLAND NEW YORK, NY	

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PERSONAL REFERENCES

	Applicant	Co-Applicant
1. Name:	JOHNN LOPEZ	N/A
Address:	350 WEST 42ND STREET,NY,NY 10019	
2. Name:	DANIEL ARTHURO MORENO	
Address:	23-93 32ND STREET ASTORIA, QUEENS	
3. Name:	CARLOS LANDA	
Address:	NAPLES, SF CA	
4. Name:		
Address:		

BANK AND CREDIT REFERENCES

	Applicant	Co-Applicant
1. Bank Name:	CHASE BANK	N/A
Address:	471 W 42ND STREET, NY,NY 10036	
Account #:	00000030823229	
Type:	Checking ☑ Savings ☐ Loan ☐	Checking ☐ Savings ☐ Loan ☐
2. Bank Name:	CHASE BANK	
Address:	471 W 42ND STREET, NY,NY 10036	
Account #:	0000029145811	
Type:	Checking ☐ Savings ☑ Loan ☐	Checking ☐ Savings ☐ Loan ☐
3. Stock Broker or CPA:	N/A	
Firm:	N/A	
Address:	N/A	
Phone:	N/A	
Fax:	N/A	
Email:		
Account #:	N/A	

DECLARATIONS

	Applicant	Co-Applicant
1. Are there any outstanding judgments against you?	Yes ☐ No ☑	Yes ☐ No ☐
2. Have you been declared bankrupt in the last 7 years?	Yes ☐ No ☑	Yes ☐ No ☐
3. Have you had a property foreclosed upon or given title or a deed in lieu thereof in the last 7 years?	Yes ☐ No ☑	Yes ☐ No ☐
4. In the last 5 years, have you been a party to any lawsuit?	Yes ☐ No ☑	Yes ☐ No ☐
5. Have you directly or indirectly been obligated on a loan that resulted in foreclosure or transfer of title in lieu of foreclosure or judgment?	Yes ☐ No ☑	Yes ☐ No ☐
6. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?	Yes ☐ No ☑	Yes ☐ No ☐
7. Is any part of the down payment borrowed or a gift?	Yes ☐ No ☑	Yes ☐ No ☐
8. Do you intend to occupy the unit as your primary residence?	Yes ☑ No ☐	Yes ☐ No ☐
9. Are you obligated to pay alimony or child support?	Yes ☐ No ☑	Yes ☐ No ☐
10. Do you or any member of your family have diplomatic status?	Yes ☐ No ☑	Yes ☐ No ☐
11. Has any business you have controlled been the subject of bankruptcy in the last 7 years?	Yes ☐ No ☑	Yes ☐ No ☐
12. Are you a co-maker or endorser on a note?	Yes ☐ No ☑	Yes ☐ No ☐
13. Have you ever been convicted of a felony or misdemeanor?	Yes ☐ No ☑	Yes ☐ No ☐

If yes, please describe: _____

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THE FOREGOING APPLICATION, INCLUDING ALL PERSONAL AND FINANCIAL INFORMATION, HAS BEEN CAREFULLY PREPARED, AND THE UNDERSIGNED HEREBY SOLEMNLY DECLARE(S) AND CERTIFIES THAT ALL THE INFORMATION IS TRUE AND CORRECT AND THAT THE FINANCIAL INFORMATION SUBMITTED IS A TRUE AND ACCURATE STATEMENT OF THE UNDERSIGNED AS OF THE DATE SET FORTH BY EACH SIGNATURE. THE UNDERSIGNED ALSO AGREE(S) THAT IN PROCESSING THIS APPLICATION, THE MANAGING AGENT NAMED HEREIN AND ITS EMPLOYEES AND AGENTS NEITHER BEAR NOR ASSUME ANY RESPONSIBILITY WHATSOEVER FOR THE VERIFICATION OR COMPLETENESS OF THE INFORMATION CONTAINED HEREIN. IN ADDITION, THE UNDERSIGNED HEREBY AUTHORIZE(S) THE MANAGING AGENT AND THE CONDOMINIUM ASSOCIATION TO SHARE SUCH PORTIONS OF THE APPLICATION AS THEY MAY REASONABLY BELIEVE NECESSARY TO FULFILL THE PURPOSES OF THIS APPLICATION WITH ANY OTHER PARTIES, AND FURTHER AGREE TO HOLD THE MANAGING AGENT, ITS EMPLOYEES AND AGENTS HARMLESS FROM ANY ERROR OR OMISSION IN THE TRANSFER OF THE INFORMATION OR THE DISTRIBUTION OF SUCH INFORMATION TO THIRD PARTIES.

Applicant: Date: _____ Date: 11/11/2019

Co-Applicant: _____ Date: _____

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Council of New York Cooperatives & Condominiums

Discrimination is prohibited in Board admissions procedures under the following laws:

The Federal Fair Housing Act
The Civil Rights Act
The New York State and New York City Human Rights Laws

The New York City Human Rights Law provides that it is unlawful to refuse to sell, rent, lease, approve the sale, rental or lease or otherwise deny a housing accommodation based on actual or perceived race, creed, color, national origin, gender (including gender identity), age, disability, sexual orientation, marital status, partnership status, lawful source of income, alienage or citizenship status or because children are, may be, or would be residing in the accommodation. Where a housing accommodation or an interest is sought or occupied exclusively for residential purposes, the provisions shall be construed to prohibit discrimination in the sale, rental, or leasing of such housing accommodation or interest on account of a person's occupation. Complaints may be filed within one year of an unlawful discriminatory act at the Law Enforcement Bureau of the City's Commission on Human Rights.

The New York State Human Rights Law provides that it is unlawful to refuse to sell, rent, lease or otherwise deny a housing accommodation on the basis of race, creed, color, national origin, sex, age, disability, sexual orientation, military status, marital status, or familial status. Complaints may be filed within one year of an unlawful discriminatory act to the New York State Division of Human Rights or within three years of an unlawful discriminatory act in State Court. Complaints may not be filed with both the Division and the Court.

The Federal Fair Housing Act prohibits discrimination in housing practices on the basis of race, color, religion, sex, handicap, familial status, or national origin. Individuals who believe they have been victims of an illegal housing practice may file a complaint within one year of the unlawful discriminatory act with the Department of Housing and Urban Development (HUD) or file their own lawsuit in federal or state court. The Department of Justice brings suit on behalf of individuals based on referrals from HUD.

The Civil Rights Act provides that all citizens of the United States shall have the same right to inherit, purchase, lease, sell, hold, and convey real and personal property. The law concerns the rights of all persons to make and enforce contracts, to sue, be parties, give evidence, and to the full and equal benefit of all laws and proceedings for the security of persons and property. Complaints may be filed with the Office for Civil Rights.

Financial Information

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REAL ESTATE BOARD OF NEW YORK

Financial Statement

Applicant: JOHRCH HENRY ANGLAS PADILLA
Address: 10 RIEVER RIOAD APT 7M
NEW YORK, NY 10013

Co-Applicant:
Address: 10 RIEVER RIOAD APT 7M

Monthly Sources of Income and Projected Housing Expenses

Income:	Applicant	Co-Applicant
Base monthly salary:	22,082.04	
Overtime (monthly):	5,520	
Bonuses (monthly):	N/A	
Commissions (monthly):	N/A	
Dividends/Interest:	N/A	
Net rental income (Net):	N/A	
Other income (Itemize):	N/A	
TOTAL:	27,602.04	

Expenses:	Applicant (after closing)	Co-Applicant (after closing)	Joint/Total (after closing)
Maintenance:	N/A		
Apt. Financing:	N/A		
Other Mortgages:	N/A		
Bank Loans:	N/A		
Auto Loans:	N/A		
Credit Card Debt:	N/A		
TOTAL:	0		

Assets & Liabilities

Assets:	Applicant	Co-Applicant
Cash/Money Market Funds (Sch A):	91,378.19	
Contract deposit:	N/A	
Stocks & bonds or Brokerage Accounts (Schedule B):	N/A	
Investment in own business:	N/A	
Accounts receivable:	N/A	
Real estate owned (Schedule C):	N/A	
Automobiles:	N/A	
Personal property & Furniture:	N/A	
Life insurance(cash value):	N/A	
Retirement funds/IRA:	N/A	
401k:	N/A	
KEOGH:	N/A	
Profit sharing/pension:	N/A	N/A
Other assets (Schedule D):	N/A	
TOTAL ASSETS:	91,378.19	N/A

Liabilities	Applicant (present)	Co-Applicant (present)
Notes payable to banks:	0	
Notes payable to relatives:	0	
Notes payable to others:	0	
Install accounts payable:	0	
Automobile:	0	
Other accounts payable:	0	
Mortgages payable:	0	
Unpaid real estate taxes:	0	
Unpaid income taxes:	0	
Chattel mortgages:	0	
Loans on life insurance:	0	
Credit card debt:	0	
Other debts - itemize:	0	
TOTAL LIABILITIES		
NET WORTH::	0	

Itemized Schedule of Assets & Liabilities

Schedule A – Cash (attach additional pages if necessary) – Total should match cash line above

Applicant or Co-Applicant	Financial Institution	Type of account	Account Balance
JOHRCH HENRY ANGLAS PADILLA	CHASE BANK	CHECKING	$76,846.63
JOHRCH HENRY ANGLAS PADILLA	CHASE BANK	SAVINGS	$14,531.56

Itemized Schedule of Assets & Liabilities (continued)

Schedule B – Stock, Bonds and Mutual Funds (attach additional pages if necessary) – Total Should match Stocks & Bonds Line Above

Amount of shares	Description	Marketable value	Non-marketable value
N/A			
N/A			
N/A			
N/A			

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Itemized Schedule of Assets & Liabilities (continued)

Schedule C – Real Estate (attach additional pages if necessary) – Total should match Real Estate line on previous page.

Applicant or Co-applicant	Property Address	Type of Property	Amount of Mortgage/liens	Mortgage Payment	Insurance main, tax & misc.
N/A					
N/A					
N/A					
N/A					

Itemized Schedule of Assets & Liabilities (continued)

Schedule D – Other Assets (attach additional pages if necessary)

Explanation: N/A

IF YOU ARE A PRINCIPAL OF OR ARE EMPLOYED BY A FAMILY BUSINESS, PLEASE COMEPLETE THIS SECTION:

	Applicant	Co-Applicant
Dividend or partnership income (present year)	N/A	
Dividend or partnership income (prior year)	N/A	
Dividend or partnership income (second prior year)	N/A	

The foregoing application has been carefully prepared, and the undersigned hereby solemnly declare(s) and certify(s) that all information contained herein is complete, true and correct. The information is submitted as being a true and accurate statement of the financial condition of the undersigned on the NOVEMBER 11/2019 day of 11, 20 109.

X _____ Applicant — NOVEMBER 11/2019 Date

X _____ Co-Applicant (if any) — NOVEMBER 11/2019 Date

Employee Name	P/P Begin	P/P End	Chk Date	Advice No	Emp Num	Location
HENRY ANGLAS PADILLA	10/21/2019	10/25/2019	10/25/2019	2409470565	182926	P156A

Base	Exp Rate	Ed Cert	Shift Rate	Fed Tax	State Tax	Per	Hol	PTO		Vacation		
115.00			1	Single/0	Single /0	13.5	22 5	Bal	OD	Bal	CO	FZ
					Sick 149.5	SS				75	0	

Earnings	Hours	Current ($)	YTD ($)
REGULAR PAY	40.00	4600.00	161800.00
OVER TIME	11.00	1265.00	10775.00
Gross Pay		5865.00	162575.00
Net Pay .		5405.51	132377.75

Deductions	Current ($)	YTD ($)
FEDERAL TAX	231.45	9789.45
SOCIAL SECURITY	81.25	3331.25
MEDICARE	34.12	1398.92
NY STATE TAX	94.25	3864.25
NEW YORK SDI EE	18.42	755.22
Pre-Tax Deductions	0.00	0.00
Tax Deductions	459.49	19139.09

LAST RITES TATTOO THEATRE
325 WEST 38TH STREET #1
NEW YORK, NY 10018

ADVICE NUMBER	2409470565
ADVICE DATE	10/25/2019
ADVICE AMOUNT	$5405.51

PAID FOR HENRY ANGLAS PADILLA
325 WEST 38TH STREET
NEW YORK, NY 10018

PAYROLL ACCOUNT
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Employee Name	P/P Begin	P/P End	Chk Date	Advice No	Emp Num	Location
HENRY ANGLAS PADILLA	10/14/2019	10/18/2019	10/18/2019	2409470565	182926	P156A

Base	Exp Rate	Ed Cert	Shift Rate	Fed Tax	State Tax	Per	Hol	PTO		Vacation		
115.00			1	Single/0	Single /0	13.5	22.5	Bal	OD	Bal	CO	FZ
						Sick 149.5	SS			75	0	

Earnings	Hours	Current ($)	YTD ($)
REGULAR PAY	40.00	4600.00	147200.00
OVER TIME	10.00	1150.00	9510.00
Gross Pay		5750.00	156710.00
Net Pay		5290.51	126972.24

Deductions	Current ($)	YTD ($)
FEDERAL TAX	231.45	9258.00
SOCIAL SECURITY	81.25	3250.00
MEDICARE	34.12	1364.80
NY STATE TAX	94.25	3770.00
NEW YORK SDI EE	18.42	736.80
Pre-Tax Deductions	0.00	0.00
Tax Deductions	459.49	18379.60

LAST RITES TATTOO THEATRE
325 WEST 38TH STREET #1
NEW YORK, NY 10018

ADVICE NUMBER	2409470565
ADVICE DATE	10/18/2019
ADVICE AMOUNT	$5290.51

PAID FOR HENRY ANGLAS PADILLA
325 WEST 38TH STREET
NEW YORK, NY 10018

PAYROLL ACCOUNT
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Employee Name	P/P Begin	P/P End	Chk Date	Advice No	Emp Num	Location
HENRY ANGLAS PADILLA	10/28/2019	11/01/2019	11/01/2019	2409470565	182926	P156A

Base	Exp Rate	Ed Cert	Shift Rate	Fed Tax	State Tax	Per	Hol	PTO		Vacation		
115.00			1	Single/0	Single /0	13.5	22.5	Bal	OD	Bal	CO	FZ
						Sick 149.5	SS			75	0	

Earnings	Hours	Current ($)	YTD ($)
REGULAR PAY	40.00	4600.00	156400.00
OVER TIME	12.00	1380.00	15375.00
Gross Pay		5980.00	168555.00
Net Pay		5520.51	137898.26

Deductions	Current ($)	YTD ($)
FEDERAL TAX	231.45	10020.90
SOCIAL SECURITY	81.25	3412.50
MEDICARE	34.12	1433.04
NY STATE TAX	94.25	3958.50
NEW YORK SDI EE	18.42	773.64
Pre-Tax Deductions	0.00	0.00
Tax Deductions	459.49	19598.58

LAST RITES TATTOO THEATRE
325 WEST 38TH STREET #1
NEW YORK, NY 10018

ADVICE NUMBER 2409470565
ADVICE DATE 11/01/2019
ADVICE AMOUNT $5520.51

PAID FOR HENRY ANGLAS PADILLA
325 WEST 38TH STREET
NEW YORK, NY 10018

PAYROLL ACCOUNT
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

September 01, 2019 through September 30, 2019

Primary Account: 000000808232

CUSTOMER SERVICE INFORMATION

Web site:	Chase.com
Service Center:	1-800-935-9935
Deaf and Hard of Hearing:	1-800-242-7383
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

00442661 OHI 802 219 58516 NNNNNNNNNNN 1 000000000 06 0000

HENRY ANGLAS PADILLA
325 WEST 38TH STREET #1
NEW YORK, NY 10018

CONSOLIDATED BALANCE SUMMARY

ASSETS

Checking & Savings	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Checking	0000008082329	$57,176.45	$76,846.63
Chase Plus Savings	0000029145811	14,531.56	14,531.56
Total		$71,708.01	$91,378.19
TOTAL ASSETS		$71,708.01	$91,378.19

CHASE PREMIER CHECKING

Account Number: 00000080823296

CHECKING SUMMARY

	AMOUNT
Beginning Balance	$57,176.45
Deposits and Additions	21,622.04
Checks Paid	0.00
ATM & Debit Card Withdrawals	-1951.86
Electronic Withdrawals	0.00
Ending Balance	$76,846.63
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	$0.37
Interest Paid Year-to-Date	$2.93

Your account ending in 1141 is linked to this account for overdraft protection.

Good news. Your Chase Premier Checking Monthly Service Fee was waived because you kept an average daily balance of $15,000 in qualifying linked deposits, investments and credit cards, mortgage and other loans during the statement period.

DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
09/06	Last Rites Tattoo Theatre PPD ID: 1135564934	5,520.51
09/07	ATM Check Deposit 471 W 42ND St New York NY Card 3476	120.00
09/08	Quickpay With Zelle Payment From Jose Buco Ctil8V5Aianw	1,000.00
09/09	Quickpay With Zelle Payment From Rostamizadeh, Judith Bac8Bcad0F22	2,499.00
09/10	Quickpay With Zelle Payment From Rostamizadeh, Judith Bac65B3Bfd40	1.00
09/11	Quickpay With Zelle Payment From Rostamizadeh, Judith Bac401A2977F	500.00
09/12	Quickpay With Zelle Payment From Rostamizadeh, Judith Bac5Da398A11	100.00
09/13	Last Rites Tattoo Theatre PPD ID: 1135564934	5,405.51
09/20	Last Rites Tattoo Theatre PPD ID: 1135564934	5,290.51
09/21	Quickpay With Zelle Payment From Jose Buco 8453028947	3.00
09/22	Gio Studio	2,801.50
09/23	Quickpay With Zelle Payment From Jose Buco 8487725829	53.00
09/24	Quickpay With Zelle Payment From Jose Buco 8487658251	2,821.00
09/25	Quickpay With Zelle Payment From Rostamizadeh, Judith Bacaa1C51303	500.00
09/26	Quickpay With Zelle Payment From Rostamizadeh, Judith Bac21C1A9E1B	2,500.00
09/27	Last Rites Tattoo Theatre PPD ID: 1135564934	5,405.51
09/30	Interest Payment	0.49
Total Deposits and Additions		$34,521.03

CHECKS PAID

CHECK NO.	DESCRIPTION	DATE PAID	AMOUNT
			0.0
Total Checks Paid			

If you see a description in the Checks Paid section, it means that we received only electronic information about the check, not the original or an image of the check. As a result, we're not able to return the check to you or show you an image.

^ An image of this check may be available for you to view on Chase.com.

ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
09/11	ATM Withdrawal 155 Water St New York NY Card 3476	200.00
09/16	ATM Withdrawal 155 Water St New York NY Card 3476	40.00
09/19	ATM Withdrawal 155 Water St New York NY Card 3476	40.00
09/20	ATM Withdrawal 615 8th Ave New York NY Card 3476	200.00
09/22	ATM Withdrawal 155 Water St New York NY Card 3476	60.00
Total ATM & Debit Card Withdrawals		$540.00

ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
09/01	Transfer to Citi Bank account# 0000721585	17,877.03
09/02	Quickpay With Zelle Payment To Julianne Jpm255251402	231.00
09/03	Nys Dtf Bill Pyt Tax Paymnt 000000046654430 Tel ID: E146013200	50.00
09/04	Nys Dtf Bill Pyt Tax Paymnt 000000046654429 Tel ID: E146013200	20.35
09/06	Chase Credit Crd Autopay PPD ID: 4760039224	52.00
09/05	Quickpay With Zelle Payment To Maria Rivera Jpm257247552	40.00
Total Electronic Withdrawals		$18,270.38

CHASE PLUS SAVINGS

HENRY ANGLAS PADILLA

Account Number: 000002914581

SAVINGS SUMMARY

	AMOUNT
Beginning Balance	$14,531.13
Deposits and Additions	0.43
Ending Balance	$14,531.56
Annual Percentage Yield Earned This Period	0.03%
Interest Paid This Period	$0.43
Interest Paid Year-to-Date	$3.48

The monthly service fee for this account was waived as an added feature of Chase Premier Checking account.

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		$14,531.13
08/08	Interest Payment	0.43	14,531.56
	Ending Balance		$14,531.56

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Checking account.

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CHASE

JPMorgan Chase Bank, N.A.
P O Box 182051
Columbus, OH 43218 - 2051

October 01, 2019 through October 31, 2019
Primary Account: 000000808232

CUSTOMER SERVICE INFORMATION

Web site:	Chase.com
Service Center:	1-800-935-9935
Deaf and Hard of Hearing:	1-800-242-7383
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

00142661 DRE 602 219 28318 NNNNNNNNNNN 1 000000000 06 0000

HENRY ANGLAS PADILLA
325 WEST 38TH STREET #1
NEW YORK, NY 10018

CONSOLIDATED BALANCE SUMMARY

ASSETS

Checking & Savings	ACCOUNT	BEGINNING BALANCE THIS PERIOD	ENDING BALANCE THIS PERIOD
Chase Premier Checking	0000008082329	$76,846.63	$129,123.92
Chase Plus Savings	0000029145811	14,531.56	14,531.56
Total		$80,988.01	$143,655.48
TOTAL ASSETS		$80,988.01	$143,655.48

CHASE PREMIER CHECKING

Account Number: 00000080823296

CHECKING SUMMARY

	AMOUNT
Beginning Balance	$66,456.45
Deposits and Additions	56,121.03
Checks Paid	0.00
ATM & Debit Card Withdrawals	-6,546.44
Electronic Withdrawals	0.00
Ending Balance	$129,123.92
Annual Percentage Yield Earned This Period	0.01%
Interest Paid This Period	$0.37
Interest Paid Year-to-Date	$2.93

Your account ending in 1141 is linked to this account for overdraft protection.

Good news. Your Chase Premier Checking Monthly Service Fee was waived because you kept an average daily balance of $15,000 in qualifying linked deposits, investments and credit cards, mortgage and other loans during the statement period.

DEPOSITS AND ADDITIONS

DATE	DESCRIPTION	AMOUNT
10/04	Last Rites Tattoo Theatre PPD ID: 1135564934	5,405.51
10/11	Last Rites Tattoo Theatre PPD ID: 1135564934	5,290.51
10/12	Quickpay With Zelle Payment From Jose Buco 8526983896	25.00
10/13	Quickpay With Zelle Payment From Jose Buco 8527841603	10.00
10/14	Venmo Cashout PPD ID: 5264681992	500.00
10/15	Apple Cash Transfer Frank Perez Web ID: 6192912998	601.00
10/16	Venmo Cashout PPD ID: 5264681992	201.00
10/17	Quickpay With Zelle Payment From Quality Care 8555289883	28.00
10/18	Last Rites Tattoo Theatre PPD ID: 1135564934	5,290.51
10/19	Glo Studio	1,232.00
10/20	Deposit 1886817131	120.00
10/21	Quickpay With Zelle Payment From Jose Buco 8572160340	28.00
10/22	Quickpay With Zelle Payment From Jose Buco 8573856200	20.00
10/23	Quickpay With Zelle Payment From Jose Buco 8577756264	8.00
10/25	Last Rites Tattoo Theatre PPD ID: 1135564934	5,405.51
10/26	Interest Payment	0.58
Total Deposits and Additions		$24,165.62

ATM & DEBIT CARD WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
10/19	ATM Withdrawal 350 42nd Street New York NY Card 5622	$40.00
10/26	Card Purchase Jpay Money Transfer 800-5745729 FL Card 5622	54.75
10/27	ATM Withdrawal 450 171 Street New York NY Card 5622	40.00
10/28	Non-Chase ATM Withdraw Plazoleta Isla Verde Carolina Card 5622	303.00
10/29	ATM Withdrawal 280 176 Street New York NY Card 5622	200.00
Total ATM & Debit Card Withdrawals		$637.75

ELECTRONIC WITHDRAWALS

DATE	DESCRIPTION	AMOUNT
10/09	Quickpay With Zelle Payment To Carmen Jpm258542402	$135.00
10/12	Payment To Chase Card Ending IN 3818	4,000.00
10/19	Quickpay With Zelle Payment To Buco Josr 8548442331	25.00
10/19	Quickpay With Zelle Payment To Lissie Jpm260984349	100.00
10/20	Quickpay With Zelle Payment To Alfrida Jpm265457292	40.00
10/21	Quickpay With Zelle Payment To Julianne Jpm265826667	231.00
10/22	Quickpay With Zelle Payment To Carmen Jpm266502261	206.00
10/23	Quickpay With Zelle Payment To Gwendolyn Jpm266714919	210.00
Total Electronic Withdrawals		$4,947.00

CHASE

October 01, 2019 through October 31, 2019
Primary Account: 000000808232

CHASE PLUS SAVINGS

HENRY ANGLAS PADILLA

Account Number: 000002914581

SAVINGS SUMMARY

	AMOUNT
Beginning Balance	$14,531.56
Deposits and Additions	2704.44
Ending Balance	$17,236.00
Annual Percentage Yield Earned This Period	0.03%
Interest Paid This Period	$0.50
Interest Paid Year-to-Date	$3.98

The monthly service fee for this account was waived as an added feature of Chase Premier Checking account.

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		$14,531.56
09/12	Deposit 1861505903	2704.44	17,236.00
09/10	Interest Payment	0.50	17,236.00
	Ending Balance		$17,236.50

You earned a higher interest rate on your Chase Plus Savings account during this statement period because you had a qualifying Chase Premier Checking account.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS: Call us at 1-866-564-2262 or write us at the address on the front of this statement (non-personal accounts contact Customer Service) immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.
For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number
- The dollar amount of the suspected error
- A description of the error or transfer you are unsure of, why you believe it is an error, or why you need more information.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC TRANSACTIONS: Contact the bank immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify the bank in writing no later than 30 days after the statement was made available to you. For more complete details, see the Account Rules and Regulations or other applicable account agreement that governs your account. Deposit products and services are offered by JPMorgan Chase Bank, N.A. Member FDIC

JPMorgan Chase Bank, N.A. Member FDIC

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Employment Letter

LAST RITES TATTOO THEATRE

325 WEST 38TH STREET
NEW YORK, NY 10018

October 31, 2019

Henry Anglas Padilla
325 West 38th Street #1
New York, NY 10018

To whom it may concern:

Re: Letter of Employment for Henry Anglas Padillo

This letter is to verify that Mr. Henry Anglas Padillo has been employed at Last Rites Tattoo Theatre since June 26, 2019 to present.

Mr. Henry Anglas Padillo current gross income salary is $220,800 a year as a Highly Experience Professional Tattoo Artist and currently working full-time Permanent with over-time.

If you require any additional information regarding Mr. Henry Anglas Padillo, please feel free to contact Business Administrator, Paula B. Ellis at 1-212-529-0666

Thank you.

Sincerely,

Paula Booth Ellis
Last Rites Tattoo Theatre – CEO/Owner

Credit Check
(on-site)

Credit Application

NOTICE: All adult applicants (18 years or older) must complete a separate application for rental.

APPLICANT INFORMATION

First Name	M.I.	Last Name	Suffix	Date of Birth	SSN
JOHRH	HENRRY	ANGLAS PADILLA		09/28/82	730-02-1027

Home Phone	Work Phone	Cell Phone	Email
( )	(212 529-06-66	(646 354-97-36	ANGLASHENRY@HOTMAI

CURRENT ADDRESS

Street Address	City	State	Zip
10 RIVERROAD APT 7M	NEW YORK	NY	10018

Landlord/Managing Agent Name	Landlord/Mgr Phone
DARWINRODRIGUEZ	(718, 916-5809

Monthly Rent	Date In	Date Out	Reason for Leaving
3100	06/23/19	11/06/2019	RELOCATING NEAR TO W

PREVIOUS ADDRESS (if less than 2 years at current)

Street Address	City	State	Zip
ARGENTINA			

Landlord/Managing Agent Name	Landlord/Mgr Phone
	( )

Monthly Rent	Date In	Date Out	Reason for Leaving

BANK INFORMATION

Checking Account Bank Name	Account Number	Phone Number
CHASE	0000008082329	1-800-935-9935
Savings Account Bank Name	Account Number	Phone Number
	00000145811	1-800-935-993
Other Account Bank Name	Account Number	Phone Number
BANK OF AMERICA	5524 3302 1455 8964	( )

EMPLOYMENT & INCOME INFORMATION

Occupation - Present	Employer/Company	Supervisor Name	Supervisor Phone	Annual Salary
HIGHLY TATTOC	LAST RITES TAT	PAULA BOOTH	212529-06-66	220,800
Occupation ☐ Add'l ☐ Previous	Employer/Company	Supervisor Name	Supervisor Phone	Annual Salary
TATTOO ART	ARGENTINA		( )	

Other Income Description	Annual Income

BUSINESS/PERSONAL REFERENCES

Name	Address	Phone	Relationship
PAULA BOOTH	325 W 38th FloorNY	212 529-0666	BOSS.
		( )	

EMERGENCY CONTACT

Name	Address	Phone	Relationship
Carlos LANDA	346 Naples SF CA 94112	(646-)09-0145	FRIEND.

PETS

Pets?	Description
☐ YES ☒ NO	N/A

I warrant that all statements above set forth are true. I hereby give my permission to communicate with my current and former landlord for the purpose of discussing any facts and circumstances of my current or former tenancy, as well as the other information listed above. I give my permission to communicate with my current employer(s) for the purpose of verifying the information listed above. I understand there are no limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, OFAC search, and landlord/tenant court record search will be done in conjunction with my application. I hereby give my consent to the Landlord to obtain my consumer credit report for the purposes of tenant screening through On-Site.com. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

(Signed/Applicant) Date 11/06/2019.

NEW YORK CITY TENANT FAIR CHANCE ACT

Pursuant to federal and state law NYC Admin. Code §20-807 et seq.:

1) If your application is denied or other adverse action is taken against you due to a screening report the landlord uses, the landlord must tell you so and how to contact the screening company to obtain a free copy of the report.
2) You may dispute inaccurate or incorrect information on the report directly with the screening company.
   Our screening company is: On-Site.com, 2485 Latham Street, Floor 3, Mountain View, CA 94040 | Phone (877) 222-0384 | Fax: (866) 774-0144 | www.on-site.com/consumer
3) Annually, you may order a free screening report from www.annualcreditreport.com (in addition to a free report from each national consumer reporting agency if adverse action was taken against you).

BILLING INFORMATION FOR APPLICATION FEE

CARD TYPE	CARD NUMBER	EXPIRATION	BILLING ZIP CODE
☑ VISA ☐ MASTERCARD ☐ AMEX	4117 7370 0179 8726	07/23	10018

I authorize On-Site.com to charge $135.00 per applicant to the above credit card. I agree to pay this charge according to the terms of my Cardholder Agreement. This fee is non-refundable and exclusive of any other fee. Payment does not bind the Landlord to any obligation to rent.

JOHRC ANGLAS PADILLA — 11/05/19

(Name on Card (Print)) *(Signature)* *Date*

BANK INFORMATION FOR APPLICATION FEE (IF NOT paying by credit card)

☐ Pay my application fee of $135.00 to On-Site.com using my bank account.

ROUTING NUMBER

ACCOUNT NUMBER

Screening Details

< Leasing / **Screening Details**

Johrh H. Anglas Padilla

7.2 / 10

Overall Recommendation: *APPROVE*

This application meets your requirements.

The Overall Recommendation was derived solely from your community's leasing criteria. On-Site makes no independent assessment of an applicant's qualifications.

Score for Johrh H. Anglas Padilla: 7.2 / 10 **What's This?**

Landlord has no income requirement	**Importance**	**Result**
Annual combined application income-to-rent ratio is at least 0.0	Not Considered	N/A
Gross annual net income (after rent and estimated debt) is at least $0.00	Not Considered	N/A
Maximum percentage of past due negative accounts is less than 25.0%	Very	
Unpaid collections (including past due accounts) do not exceed $200.00	Moderately	
May have been through a bankruptcy	Very	

Lease Notebook **What's This?**

Date	**Note**
11/8/2019 3:15 PM	Application fees for Johrh H. Anglas Padilla in the amount of $20.00 were paid by credit card.

Quick Summary **What's This?**

Total annual income (reported by Applicant)	$220,000.00

Quick Summary **What's This?**

Total annual income to rent ratio	48.89 (based on rent of $4,500.00)
Estimated monthly debt payments	$25.00 (0% of monthly income)
Total number of accounts	1
Accounts with no late payments	1 (0 unpaid past due)
Accounts paid 30-59 days past due	0 (0 unpaid past due)
Accounts paid 60-89 days past due	0 (0 unpaid past due)
Accounts paid more than 90 days past due	0 (0 unpaid past due)
Total outstanding balance	$486.00 ($0.00 past due)
Outstanding revolving debt	$486.00 (49% of limit) ($0.00 past due)
Outstanding loan balance	$0.00 ($0.00 past due)
Bankruptcies, foreclosures, and legal items	0
Collection total balance (includes past due)	$0.00

Identity	**From Applicant**	**From TransUnion**	**From Experian**
Name:	Johrh H. Anglas Padilla	JOHRCH ANGLAS JOHRCH HENRYANGLAS PADILLA	JOHRCH H. ANGLAS-PADILLA JOHRCH HENRYANGLAS PADILLA
Social Security Number:	730-02-****	730-02-****	730-02-****
Birth Date:	9/28/1982	9/28/1982	9/28/1982

Addresses	**From Applicant**	**From TransUnion**	**From Experian**
	10 River Road New York, NY 10044 - US	325 W 38TH 1 NEW YORK, NY 10018 (Applicant) **Reported 8/2019**	325 W 38TH ST. FRNT 1 NEW YORK, NY 10018-9552 (Applicant) **Reported 8/2019**

Employment	**From Applicant**	**From TransUnion**	**From Experian**
Johrh H. Anglas Padilla: (Applicant)	Total annual income: $220,000.00		

OFAC SDN Search **What's This?**

OFAC SDN Search **What's This?**

Requested For	Results	Returned
Johrh H. Anglas Padilla	*No records found*	11/8/2019

Risk Models **What's This?**

From TransUnion

Risk Model Name	Score	Score Factors
FICO (Empirica) (Applicant)	*Unavailable*	File not scored because subject does not have sufficient credit

Description
The FICO score is a widely used risk model that uses credit report data to predict the likelihood of default. It is used most often by banks and credit grantors. The FICO score range is between 300 and 850 (the higher the score, the less risky the consumer). In the most recent study, the median FICO score was 711.

From Experian

Risk Model Name	Score	Score Factors
FICO (Experian) (Applicant)	*Unavailable*	The Profile report does not contain any tradelines that have been open for at least six (6) months.

Description
The FICO score is a widely used risk model that uses credit report data to predict the likelihood of default. It is used most often by banks and credit grantors. The FICO score range is between 300 and 850 (the higher the score, the less risky the consumer). In the most recent study, the median FICO score was 711.

Credit Accounts **What's This?**

From TransUnion

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
BK OF AMER (Applicant)	8/2019	10/2019	0	0	0	$0.00	$486.00

Monthly Payment	High Credit	Type	Comments
	$990.00	REVOLVING	Rate/Status 01: Paid or paying as agreed

Payment History

9/
19

Credit Accounts **What's This?**

From Experian

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
BANK OF AMERICA (Applicant)	8/2019	10/2019	0	0	0	$0.00	$486.00

	Monthly Payment	High Credit	Type	Comments
BANK OF AMERICA PO BOX 982238, EL PASO, TX 79998 (800) 421-2110	$25.00	$990.00	REVOLVING	CREDIT LINE SECURED, REVOLVING THIS IS AN ACCOUNT IN GOOD STANDING Rate/Status 11: This is an account in good standing

Payment History

10/
19

Previous Credit Inquiries **What's This?**

From TransUnion

9/2019	AMERICAN EXP (Applicant)
8/2019	BK OF AMER (Applicant)
8/2019	VERIZON WIRE (Applicant)

From Experian

There are no previous credit inquiries on file with Experian

** This report was run on 11/8/2019 by Rueben Schatz (rueben.schatz@elliman.com).*

I.D.

JUL 17 2019

O-1
20Jun2021

Class 01
JUN 20 2021
PP EXPIRES

VISA

UNITED STATES OF AMERICA

Issuing Post Name
BUENOS AIRES

Control Number
20191626930003

Surname
ANGLAS PADILLA

Given Name
JOHRCH HENRY

Visa Type /Class
R 01

Passport Number
116022418

Sex
M

Birth Date
28SEP1982

Nationality
PERU

Entries
M

Issue Date
14JUN2019

Expiration Date
24APR2022

Annotation

P20028615

**

PN-LAST RITES TATTOO THEATRE LLC
P#-EAC1916052598 PED-24APR2022

VNUSAANGLAS<PADILLA<<JOHRCH<HENRY<<<<<<<<<<<<

1160224183PER8209289M220424801BNS1XBXS241163

W9

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
HENRY ANGLAS PADILLA

Business name, if different from above

Check appropriate box: ☑ Individual/ Sole proprietor ☐ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
325 WEST 38TH STREET FRONT #1

Requester's name and address (optional)

City, state, and ZIP code
NEW YORK, NEW YORK 10018

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
7 3 0 - 0 2 - 1 0 2 7

or

Employer identification number
- -

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Date ▶ 11/11/2019

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

BANK OF AMERICA

Cashier's Check

No. 1688509268

Notice to Purchaser - In the event that this check is lost, misplaced or stolen, a sworn statement and 90-day waiting period will be required prior to replacement. This check should be negotiated within 90 days.

Void After 90 Days

30-1/1140
NTX

Date 11/12/19 10:17:55 AM

550 SEVENTH AVE

0001 0094134 0042

Pay BANK OF AMERICA THREE ZERO ZERO 00 CTS CTS

$300.00

Three Hundred and 00/100 Dollars

To The Order Of LIVINGSTON MANAGEMENT SERVICES, LLC

Remitter (Purchased By): JOHRCH HENRY ANGLAS PADILLA

Bank of America, N.A.
SAN ANTONIO, TX

AUTHORIZED SIGNATURE

⑈1688509268⑈ ⑆114000019⑆ 001641004977⑈

THE ORIGINAL DOCUMENT HAS A WHITE REFLECTIVE WATERMARK ON THE BACK. HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENTS.

00-53-1364B 06-2019

534 West 42nd Street Condominium

CERTIFICATE OF TERMINATION

OF RIGHT OF FIRST REFUSAL

Date: _____

RE: _____

_____

Reference is made to that certain Contract of sale for Condominium Unit (the "Agreement"), dated _____between _____ ("Seller") and _____("Purchaser") with respect to Unit _____ ("Unit") at 534 West 42nd Street Condominium located at _____, New York, New York. The undersigned hereby certifies that the provisions of the By-Laws of The condominium with respect to the Agreement have been met and, as a result thereof, the Right of First Refusal with respect to the Agreement is terminated in accordance with, and subject to, the provisions in the By-Laws.

Nothing herein contained shall be construed as a waiver, modification or termination of any other rights of the Board of Managers of The Condominium under the Declaration of By-Laws of the Condominium.

Except as otherwise defined herein, all capitalized terms herein shall have the same meanings given to those terms in the Declaration of The Condominium.

IN WITNESS WHEREOF, the Board of Managers of The Condominium have had duly executed this Certificate as of_____, 20___.

BOARD OF MANAGERS

534 West 42nd Street Condominium

BY: _____