UNI	TED STATES BANKR						
	DISTRICT OF Nevada						
	Las Vegas						
In Re. Front Sight Management LLC	\$ \$ \$	Case No. <u>22-11824</u>					
Debtor(s)	° §	☐ Jointly Administered					
Monthly Operating Report		Chapter 11					
Reporting Period Ended: <u>12/02/2022</u>		Petition Date: 05/24/2022					
Months Pending: 6		Industry Classification: 7 7 7 9					
Reporting Method:	Accrual Basis (•)	Cash Basis 🔿					
Debtor's Full-Time Employees (current):		100					
Debtor's Full-Time Employees (as of date	of order for relief):	130					
Supporting Documentation (check all (For jointly administered debtors, any required	,	non-consolidated basis for each debtor)					
Statement of cash receipts and dist	bursements nary and detail of the assets, lia	bilities and equity (net worth) or deficit					

- Schedule of payments to professionals
- Schedule of payments to insiders
- All bank statements and bank reconciliations for the reporting period
- Description of the assets sold or transferred and the terms of the sale or transfer

/s/ Joseph Wesolowski

Signature of Responsible Party

01/30/2023

Date

Joseph Wesolowski

Printed Name of Responsible Party

1 Front Sight Rd, Pahrump, NV 89061 Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

UST Form 11-MOR (12/01/2021)

Case 22-11824-abl Doc 679 Entered 01/31/23 16:06:09 Page 2 of 34

Debtor's Name Front Sight Management LLC

Case No. 22-11824

DU	to strane from orgin management bbe		. 22 11021
Pa	rt 1: Cash Receipts and Disbursements	Current Month	Cumulative
a.	Cash balance beginning of month	\$636,914	
b.	Total receipts (net of transfers between accounts)	\$5,182	\$6,914,010
c.	Total disbursements (net of transfers between accounts)	\$4,903	\$6,401,788
d.	Cash balance end of month (a+b-c)	\$637,193	
e.	Disbursements made by third party for the benefit of the estate	\$0	\$0
f.	Total disbursements for quarterly fee calculation (c+e)	\$4,903	\$6,401,788
	rt 2: Asset and Liability Status of generally applicable to Individual Debtors. See Instructions.)	Current Month	
a.	Accounts receivable (total net of allowance)	\$0	
b.	Accounts receivable over 90 days outstanding (net of allowance)	\$0	
c.	Inventory (Book \bullet Market \bigcirc Other \bigcirc (attach explanation))	\$132,404	
d	Total current assets	\$767,189	
e.	Total assets	\$4,303,276	
f.	Postpetition payables (excluding taxes)	\$5,107,514	
g.	Postpetition payables past due (excluding taxes)	\$0	
h.	Postpetition taxes payable	\$0	
i.	Postpetition taxes past due	\$0	
j.	Total postpetition debt (f+h)	\$5,107,514	
k.	Prepetition secured debt	\$11,152,956	
1.	Prepetition priority debt	\$167,295	
m.	Prepetition unsecured debt	\$6,884,698	
n.	Total liabilities (debt) (j+k+l+m)	\$23,312,463	
0.	Ending equity/net worth (e-n)	\$-19,009,187	
Pa	rt 3: Assets Sold or Transferred	Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary	ф <u>о</u>	<u>ቀ</u> ሳ
b.	course of business Total payments to third parties incident to assets being sold/transferred	\$0	\$0
5.	outside the ordinary course of business	\$0	\$0
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$0	\$0
	rt 4: Income Statement (Statement of Operations) ot generally applicable to Individual Debtors. See Instructions.)	Current Month	Cumulative
a.	Gross income/sales (net of returns and allowances)	\$5,182	
		* 2	

a.	Gross income/sales (net of returns and anowances)	\$3,162			
b.	Cost of goods sold (inclusive of depreciation, if applicable)	\$0			
c.	Gross profit (a-b)	\$5,182			
d.	Selling expenses	\$0			
e.	General and administrative expenses	\$4,903			
f.	Other expenses	ses \$0			
g.	Depreciation and/or amortization (not included in 4b)	\$0			
h.	Interest	\$0			
i.	Taxes (local, state, and federal)	\$0			
j.	Reorganization items	\$0			
k.	Profit (loss)	\$279	\$-5,473,743		

UST Form 11-MOR (12/01/2021)

Case 22-11824-abl Doc 679 Entered 01/31/23 16:06:09 Page 3 of 34

Debtor's Name Front Sight Management LLC

			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
Debtor	r's professional fees & expenses (bank	ruptcy) Aggregate Total	\$888,845	\$1,820,993	\$888,845	\$1,820,993
Itemiz	ed Breakdown by Firm					
	Firm Name	Role	-			
i	Province	Financial Professional	\$479,095	\$945,169	\$479,095	\$945,169
ii	BG Law	Lead Counsel	\$409,750	\$875,824	\$409,750	\$875,824
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		•		Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
b.	Debtor	Debtor's professional fees & expenses (nonbankruptcy) Aggregate Total		\$10,000	\$35,000	\$10,000	\$25,000
	Itemiz	Itemized Breakdown by Firm					
		Firm Name	Role				
	i	Lucas Horsfall	Financial Professional	\$10,000	\$35,000	\$10,000	\$25,000
	ii						
	iii						

			Current Month	Cumulative	Wionth	Cumulative
Debte	or's professional fees & expens	ses (nonbankruptcy) Aggregate Total	\$10,000	\$35,000	\$10,000	\$25,000
Itemi	zed Breakdown by Firm					
	Firm Name	Role				
i	Lucas Horsfall	Financial Professional	\$10,000	\$35,000	\$10,000	\$25,000
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Debtor's Name Front Sight Management LLC

Γ		xcix					
		c					
c	. All professional fees and expenses (debtor & committees)		\$1,466,728	\$3,312,471	\$1,466,728	\$3,302,471	

Pa	art 6: Postpetition Taxes	Current M	onth	Cumulative
a.	Postpetition income taxes accrued (local, state, and federal)		\$0	\$0
b.	Postpetition income taxes paid (local, state, and federal)		\$0	\$0
c.	Postpetition employer payroll taxes accrued		\$63,367	\$441,790
d.	Postpetition employer payroll taxes paid		\$63,367	\$441,790
e.	Postpetition property taxes paid		\$0	\$27,782
f.	Postpetition other taxes accrued (local, state, and federal)		\$37,824	\$89,921
g.	Postpetition other taxes paid (local, state, and federal)		\$37,824	\$89,921
Pa	rt 7: Questionnaire - During this reporting period:			
a.	Were any payments made on prepetition debt? (if yes, see Instructions)	Yes 🔿 No (•	
b.	Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions)	Yes 🔿 No (•	
c.	Were any payments made to or on behalf of insiders?	Yes 🔿 No (Ō	
d.	Are you current on postpetition tax return filings?	Yes 💿 No (\supset	
e.	Are you current on postpetition estimated tax payments?	Yes 💿 No (\supset	
f.	Were all trust fund taxes remitted on a current basis?	Yes 💿 No (\supset	
g.	Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions)	Yes 💿 No (\supset	
h.	Were all payments made to or on behalf of professionals approved by the court?	Yes • No (○ N/A ()	
i.	Do you have: Worker's compensation insurance?	Yes 💿 No (\supset	
	If yes, are your premiums current?	Yes 💿 No () N/A () (if no, see Instructions)
	Casualty/property insurance?	Yes 💿 No (\supset	
	If yes, are your premiums current?	Yes 💿 No () N/A () (if no, see Instructions)
	General liability insurance?	Yes 💿 No (\supset	
	If yes, are your premiums current?	Yes 💿 No (○ N/A () (if no, see Instructions)
j.	Has a plan of reorganization been filed with the court?	Yes 💿 No (\supset	
k.	Has a disclosure statement been filed with the court?	Yes 💿 No (\supset	
1.	Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?	Yes 💿 No (\supset	

Case No. 22-11824

Pa	rt 8: Individual Chapter 11 Debtors (Only)	
a.	Gross income (receipts) from salary and wages	\$0
b.	Gross income (receipts) from self-employment	\$0
c.	Gross income from all other sources	\$0
d.	Total income in the reporting period (a+b+c)	\$0
e.	Payroll deductions	\$0
f.	Self-employment related expenses	\$0
g.	Living expenses	\$0
h.	All other expenses	\$0
i.	Total expenses in the reporting period (e+f+g+h)	\$0
j.	Difference between total income and total expenses (d-i)	\$0
k.	List the total amount of all postpetition debts that are past due	\$0
1.	Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)?	Yes 🔿 No 💿
m.	If yes, have you made all Domestic Support Obligation payments?	Yes 🔿 No 🔿 N/A 💿

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. § 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http:// www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.

Signature of Responsible Party

CFO

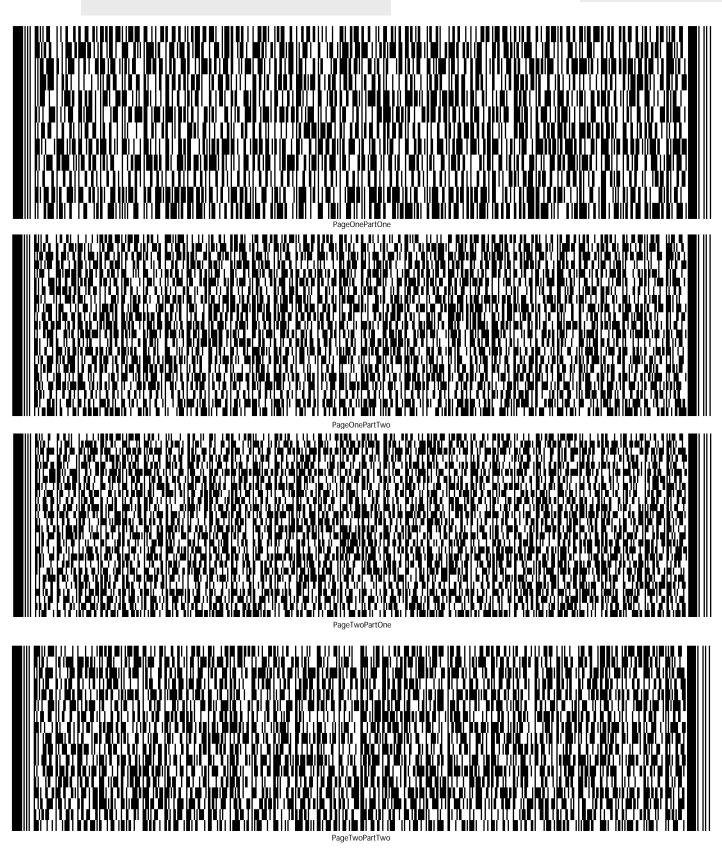
Title

Joseph Wesolowski

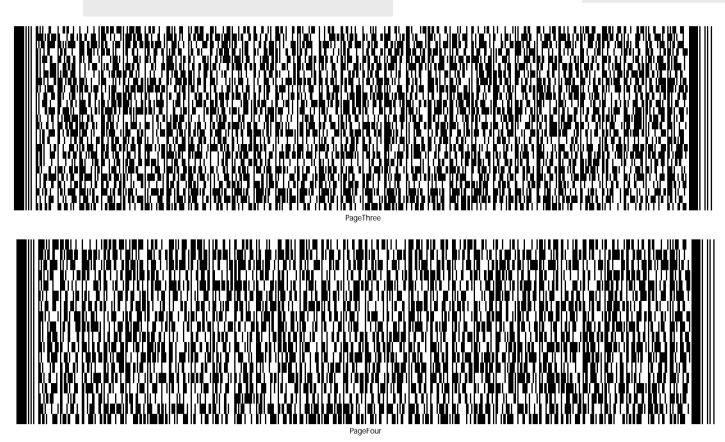
Printed Name of Responsible Party

01/30/2023

Date









A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

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FRONT SIGHT MANAGEMENT LLC DEBTOR IN POSSESSION CASE #22-11824-ABL UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA 110 WOODLAND AVE STE 1 **REND NV 89523**

PRIMARY ACCOUNT

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

www.bankoftexas.com

20 Images Provided Page 1 of 6

BANKRUPTCY	CHEC	(ING	ACCOUNT :	1070
	\$ + -	atement Period from 12-01-22 Starting Balance 1 Deposits 34 Checks & Withdrawals Service Fees Ending Balance	through 12-31-22 531,597.26 50,000.00 433,315.98 .00 148,281.28	

╋	DEPOSITS	
	Date	Amount
	12-30	







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A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

Change of Address - It is the responsibility of the account holder to notify us promptly of any change in mailing address to avoid delays in delivery. Please call the number listed on the front of your statement or visit a banking center to change your address.

Page 2

Balancing Your Account:

Before you start, please be sure to enter in your account register any interest earned, automatic transactions or bank charges including those in this statement.

A. Enter deposits not shown on this statement.		B. Enter all checks, withdrawals and bank charges not shown on this or any prior statement.		C. Follow instructions below to compare transactions recorded on your statemen with those in your account register.	
Date of Deposit	Amount	Outstanding Item	Amount		
				New Balance Shown on other side	
				Plus (+) Total A	
				Equals (=)	
				Minus (-) Total B	
Total A		Total B		Equals (=) Your current register balance	

Electronic Transfer Rights Summary

In Case of Errors or Questions About Your Electronic Transfers Please Follow These Instructions

If you need more information on a transfer on your statement or receipt, or if you think your statement or receipt is incorrect, you need to contact us no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Telephone us at the number listed on the front of your statement after the words "Direct Inquiries To" or write us at:

Bank of Texas N A Attn: Customer Service P.O. Box 29775 Dallas, TX 75229-0775

- Tell us your name and account number.

- Describe the error or the transfer you are unsure about, explain as clearly as you can why you believe there is an error or why you need more information.

- Tell us the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days for point-of-sale or foreign-initiated transactions) to investigate your complaint or ques ion. If we decide to do his, we will credit your account within 10 business days for the amount you think is in error, so you will have the money during the time it takes us to complete our investigation.



A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

FRONT SIGHT MANAGEMENT LLC DEBTOR IN POSSESSION CASE #22-11824-ABL UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA 110 WOODLAND AVE STE 1 **RENO NV 89523**

PRIMARY ACCOUNT 1070

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

www.bankoftexas.com

20 Images Provided Page 3 of 6



CHECKS

(* Indicates a break in check number sequence) (RTND Indicates a RETURNED CHECK)

Date	Number	Amount	Date	Number	Amount
12-14			12-06		
12-08			12-09		
12-21			12-09		
12-09			12-08		
12-07			12-08		



FRONT SIGHT MANAGEMENT LLC

UNITED STATES BANKRUPTCY COURT

DEBTOR IN POSSESSION CASE #22-11824-ABL

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

DISTRICT OF NEVADA 110 WOODLAND AVE STE 1

RENO NV 89523

PRIMARY ACCOUNT 1070

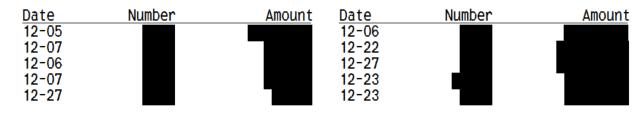
Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

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20 Images Provided Page 4 of 6

BANKRUPTCY CHECKING (cont.) CHECKS (* Indicates a break in check number sequence) (RTND Indicates a RETURNED CHECK)





DAILY ACCOUNT BALANCE

Date	Balance	Date	Balance	Date	Balance
11-30	531,597.26	12-09		12-21	
12-05		12-12		12-22	
12-06		12-14		12-23	
12-07		12-15		12-27	
12-08		12-16		12-30	

SERVICE FEE BALANCE INFORMATION

AVG LEDGER BALANCE	304,315.14	AVG COLLECTED BAL	304,315.14
MINIMUM LEDGER BAL	98,323.78		



BANK OF TEXAS Entered 01/31/23 16:06:09 PRIMAR 17 ACCOUNT 8097731070

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

Page 5 of 6

FRONT SIGHT MANAGEMENT LLC DEBTOR IN POSSESSION CASE #22-11824-ABL

BANKRIPTCY CHECKING -1070



1070

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

FRONT SIGHT MANAGEMENT LLC DEBTOR IN POSSESSION CASE #22-11824-ABL

Page 6 of 6



FRONT SIGHT MANAGEMENT LLC

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

PRIMARY ACCOUNT 1312

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

www.bankoftexas.com

	REND NV 89523	
		Page 1 of 3
	BANKRUPTCY CHECKING ACCOUNT:	1312
	Statement Period from 12-01-22 through 12-31-22	
	\$ Starting Balance73,479.64+1 Deposits1,997.00-6 Checks & Withdrawals52,320.23-Service Fees.00=Ending Balance23,156.41	
+	DEPOSITS Date 12-02 MERCHE-SOLUTIONS MERCH CHBK *****1000129061	Amount 1,997.00



DEBTOR IN POSSESSION CASE #22-11824-ABL UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA 110 WOODLAND AVE STE 1



Case 22-11824-abl Doc 679 Entered 01/31/23 16:06:09 Page 20 of 34

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

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Page 2

Balancing Your Account:

Before you start, please be sure to enter in your account register any interest earned, automatic transactions or bank charges including those in this statement.

A. Enter deposits not shown on this B. Enter all checks, withdrawals and C. Follow instructions below to compare statement. bank charges not shown on this or any transactions recorded on your statement prior statement. with those in your account register. **Date of Deposit Outstanding Item** Amount Amount New Balance Shown on other side Plus (+) Total A Equals (=) Minus (-) Total B Equals (=) Total B Total A Your current register balance

Electronic Transfer Rights Summary

In Case of Errors or Questions About Your Electronic Transfers Please Follow These Instructions

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Bank of Texas N A Attn: Customer Service P.O. Box 29775 Dallas, TX 75229-0775

- Tell us your name and account number.

- Describe the error or the transfer you are unsure about, explain as clearly as you can why you believe there is an error or why you need more information.

- Tell us the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days for point-of-sale or foreign-initiated transactions) to investigate your complaint or ques ion. If we decide to do his, we will credit your account within 10 business days for the amount you think is in error, so you will have the money during the time it takes us to complete our investigation.



FRONT SIGHT MANAGEMENT LLC

UNITED STATES BANKRUPTCY COURT

DEBTOR IN POSSESSION CASE #22-11824-ABL

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

DISTRICT OF NEVADA 110 WOODLAND AVE STE 1

RENO NV 89523

PRIMARY ACCOUNT 1312

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: Comm'l Client Svcs 866-407-4147

www.bankoftexas.com

Page 3 of 3

CHECKS

(* Indicates a break in check number sequence) (RTND Indicates a RETURNED CHECK)

*** No Checks ***



DAILY ACCOUNT BALANCE

Date	Balance	Date	Balance	Date	Balance
11-30	73,479.64	12-12		12-14	
12-02	75,476.64	12-13		12-30	
12-05					

SERVICE FEE BALANCE INFORMATION



A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

FRONT SIGHT MANAGEMENT LLC DEBTOR IN POSSESSION CASE #22-11824-ABL UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA 110 WOODLAND AVE STE 1 **REND NV 89523**

PRIMARY ACCOUNT 6255

Statement Period: 12-01-22 to 12-31-22

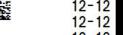
Direct Inquiries To: 24-Hour ExpressBank 800-346-5312

www.bankoftexas.com

Page 1 of 5

BANKRUPTCY	CHECKING	ACCOUNT :	6255
	Statement Period from \$ Starting Balance + 54 Deposits - 19 Checks & Withdr - Service Fees = Ending Balance	12-01-22 through 12-31-22 3,274.31 231,561.56 awals 161,755.20 .00 73,080.67	

┢	DEPOSITS			
	Date 12-01 M MERCHANT 12-01 M MERCHANT 12-02 M MERCHANT	CR CD DEP CR CD DEP CR CD DEP	*****0110003566 *****0110003566 *****0110003566	Amount 1,432.30 100.91 851.95
	12-02 M MERCHANT 12-05 12-05 12-05 12-05 12-06 12-06 12-06 12-07 12-08 12-09 12-09 12-09 12-12	CR CD DEP	**** 0110003566	800.00
	12-12 12-12 12-12 12-12			





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Page 2

Balancing Your Account:

Before you start, please be sure to enter in your account register any interest earned, automatic transactions or bank charges including those in this statement.

A. Enter deposits not shown on this B. Enter all checks, withdrawals and C. Follow instructions below to compare statement. bank charges not shown on this or any transactions recorded on your statement prior statement. with those in your account register. **Date of Deposit Outstanding Item** Amount Amount New Balance Shown on other side Plus (+) Total A Equals (=) Minus (-) Total B Equals (=) Total B Total A Your current register balance

Electronic Transfer Rights Summary

In Case of Errors or Questions About Your Electronic Transfers Please Follow These Instructions

If you need more information on a transfer on your statement or receipt, or if you think your statement or receipt is incorrect, you need to contact us no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Telephone us at the number listed on the front of your statement after the words "Direct Inquiries To" or write us at:

Bank of Texas N A Attn: Customer Service P.O. Box 29775 Dallas, TX 75229-0775

- Tell us your name and account number.

- Describe the error or the transfer you are unsure about, explain as clearly as you can why you believe there is an error or why you need more information.

- Tell us the dollar amount of the suspected error. We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days for point-of-sale or foreign-initiated transactions) to investigate your complaint or ques ion. If we decide to do his, we will credit your account within 10 business days for the amount you think is in error, so you will have the money during the time it takes us to complete our investigation.



FRONT SIGHT MANAGEMENT LLC

UNITED STATES BANKRUPTCY COURT

DEBTOR IN POSSESSION CASE #22-11824-ABL

A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

DISTRICT OF NEVADA 110 WOODLAND AVE STE 1

RENO NV 89523

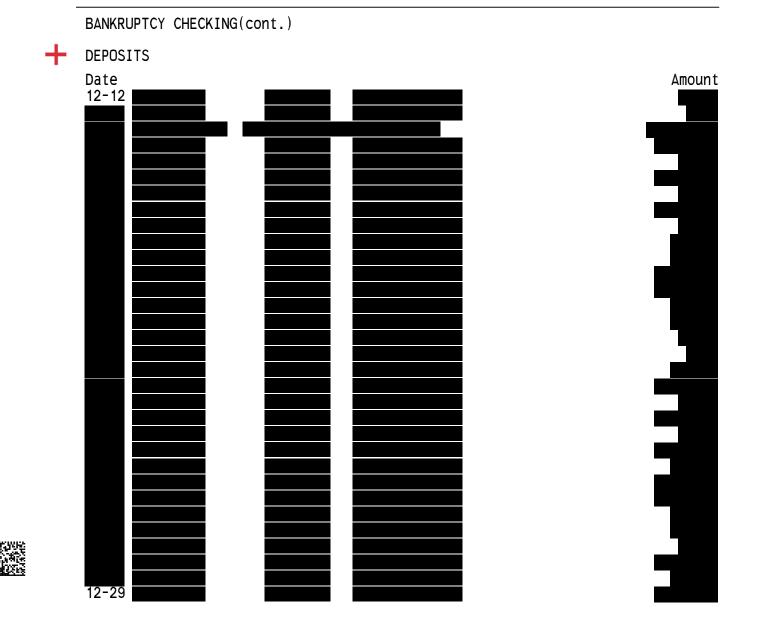
PRIMARY ACCOUNT 6255

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: 24-Hour ExpressBank 800-346-5312

www.bankoftexas.com

Page 3 of 5





A division of BOKF, NA P.O. Box 29775 Dallas, TX 75229-0775 Member FDIC

PRIMARY ACCOUNT 6255

Statement Period: 12-01-22 to 12-31-22

Direct Inquiries To: 24-Hour ExpressBank 800-346-5312

www.bankoftexas.com

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FRONT SIGHT MANAGEMENT LLC DEBTOR IN POSSESSION CASE #22-11824-ABL UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA 110 WOODLAND AVE STE 1 **RENO NV 89523**

BANKRUPTCY CHECKING(cont.) DEPOSITS Date Amount 12-29 12-30 12-30

WITHDRAWALS

+

Date 12-02 M MERCHANT 12-02 ADP PAYROLL FEES	MTHLY FEES ADP FEES	*****0110003566 *****6081351R07	Amount 4,677.97 224.90
12-05 12-09 12-12			
12-14 12-14 12-14			
12-14 12-14 12-14			
12-15 12-15			
12-16 12-16 12-16			
12-19 12-23 12-23			



FRONT SIGHT MANAGEMENT LLC

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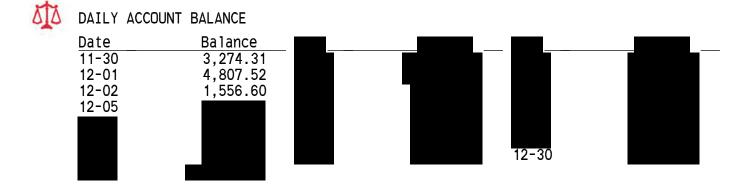
www.bankoftexas.com

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CHECKS

(* Indicates a break in check number sequence) (RTND Indicates a RETURNED CHECK)

*** No Checks ***



SERVICE FEE BALANCE INFORMATION

AVG LEDGER BALANCE	56,673.53	AVG COLLECTED BAL	56,673.53
MINIMUM LEDGER BAL	1,556.60		



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FRONT SIGHT MANAGEMENT LLC 110 WOODLAND AVE STE 1 RENO NV 89523-9224

Questions?

Available by phone Mon–Sat 7:00am–11:00pm Eastern Time, Sun 9:00am–10:00pm Eastern Time: We accept all relay calls, including 711 **1-800-CALL-WELLS** (1-800-225-5935)

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (825) P.O. Box 6995 Portland, OR 97228-6995

Your Business and Wells Fargo

Visit wellsfargo.com/digitalbusinessresources to explore tours, articles, infographics, and other resources on the topics of money movement, account management and monitoring, security and fraud prevention, and more.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking Online Statements Business Bill Pay Business Spending Report Overdraft Protection

Statement period activity summary	
Statement period activity summary	
Beginning balance on 12/29	\$0.00
Deposits/Credits	28,562.29
Withdrawals/Debits	- 0.00
Ending balance on 12/31	\$28,562.29

0988
GEMENTLLC
and conditions apply
e
N):

Overdraft Protection

account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.



Transaction history



The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 12/29/2022 - 12/31/2022	Standard monthly service fee \$10.00	You paid \$0.00
We waived the fee this fee period to allow you to meet the need to meet one of the requirements to avoid the month	requirements to avoid the monthly service fee. Your fee waiver i ly service fee.	s about to expire. You will
How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following account requirements • Average ledger balance	\$1,000.00	\$28,562.00 🗸
Minimum daily balance	\$500.00	\$28,562.29

 Minimum daily balance \$500.00 The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days.

Transactions occurring after the last business day of the month will be included in your next fee period. C1/C1

Account transaction fees summary

Service charge description	Units used	Units included	Excess units	Service charge per excess units (\$)	Total service charge (\$)
Cash Deposited (\$)	0	5,000	0	0.0030	0.00
Transactions	1	100	0	0.50	0.00
Total service charges					\$0.00

Total service charges



ATM Check Deposit Limit

Effective March 15, 2023, we are changing the following paragraph in the "Our right to decline deposits" subsection within the "Depositing Funds" section of the Deposit Account Agreement:

We may decline all or part of a deposit, including cash, for any reason. This could happen, for example, if a payee isn't a co-owner, authorized signer, or authorized representative on your account, we can't verify an endorsement, the check was issued from a credit account, the dollar amount of the deposit, the check looks suspicious, or it's a non-U.S. item. If we decline a deposit that you mailed to us, we may return it to you at your cost (including charging you for postage and handling to return foreign currency coin or paper), or retain any invalid checks or other documents included in the deposit without crediting your account, at our discretion.

The new paragraph is as follows:

We may decline all or part of a deposit, including cash, for any reason. This could happen, for example, if a payee isn't a co-owner, authorized signer, or authorized representative on your account, we can't verify an endorsement, the check was issued from a credit account, the dollar amount of the deposit, the check looks suspicious, or it's a non-U.S. item. If we decline a deposit that you mailed to us, we may return it to you at your cost (including charging you for postage and handling to return foreign currency coin or paper), or retain any invalid checks or other documents included in the deposit without crediting your account, at our discretion. There are limits on the total dollar amount of checks that can be deposited at Wells Fargo ATMs per transaction. We may decline check deposits that exceed \$1 million.

Effective January 31, 2023, in the section of your Deposit Account Agreement ("Agreement") titled "Available Balance, Posting Transactions, and Overdraft", under the subsection "How we process and post transactions to your account", the section titled "Step 2: we sort your transactions into categories" is deleted and replaced with the following:

Step 2: we sort your transactions into categories

- We credit deposits received before the cutoff time.

- We subtract withdrawals and payments we have previously authorized that we cannot return unpaid such as debit card purchases, ATM withdrawals, account transfers, Bill Pay transactions, and teller-cashed checks. Transactions are generally sorted by date and time the transaction was conducted or, for some transactions, the day we receive it for payment, or the time assigned by our system. If date and time are the same, we post from lowest to highest dollar amount.

- We pay your checks and preauthorized ACH payments, such as electronic payments you have authorized a company to withdraw using your account and routing number. Transactions are generally sorted by date and time received by the Bank, and if date and time are the same, we post from lowest to highest dollar amount. Merchant-issued payment card transactions (e.g., an ACH payment associated with a purchase you made using a store-issued debit card) post after all other transactions in this category.

Determining Date and Time

- Cutoff time is based on the location where the deposit or transfer was made.

- For debit card transactions, if we do not have date and time information, we use the day we receive it for payment from the merchant.

- For some transactions, such as Bill Pay or teller-cashed checks, a different time may be assigned by our systems.

NEW YORK CITY CUSTOMERS ONLY -- Pursuant to New York City regulations, we request that you contact us at 1-800-TO WELLS (1-800-869-3557) to share your language preference.

Tax Season Reminder: Wells Fargo delivers tax documents - either by mail or online depending on your delivery preference - no later than January 31 or by the IRS deadline of February 15 for brokerage accounts. Depending on the U.S. Postal delivery service, you should expect to receive your tax documents no later than the end of February. You can update your tax document delivery preferences by visiting Wells Fargo Online^{*}.

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The Internal Revenue Service (IRS) requires Wells Fargo to report information regarding the amount of interest, dividend or miscellaneous income earned as well as gross proceeds from sales by providing you with various IRS Forms 1099 based on the different types of transactions that occurred in your account during the calendar tax year (the IRS reportable threshold). For example, if you have interest or dividends in the amount of \$10 or more during that timeframe, you will receive a Form 1099-INT from Wells Fargo.

For more information, visit Wells Fargo Tax Center at https://www.wellsfargo.com/tax-center/.

Other Wells Fargo Benefits

Shopping online this Holiday Season? Avoid scams by watching for red flags like pressure to buy right away, rude or pushy language, or unusually specific ways to pay such as gift cards, crypto or payment apps. Learn more at www.wellsfargo.com/security.



Important Information You Should Know

■ To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts: Wells Fargo Bank, N.A. may furnish information about deposit accounts to consumer reporting agencies. You have the right to dispute the accuracy of information that we have furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

In case of errors or questions about other transactions (that are not electronic transfers):

Promptly review your account statement within 30 days after we made it available to you, and notify us of any errors.

■ If your account has a negative balance: Please note that an account overdraft that is not resolved 60 days from the date the account first became overdrawn will result in closure and charge off of your account. In this event, it is important that you make arrangements to redirect recurring deposits and payments to another account. The closure will be reported to Early Warning Services. We reserve the right to close and/or charge-off your account at an earlier date, as permitted by law. The laws of some states require us to inform you that this communication is an attempt to collect a debt and that any information obtained will be used for that purpose.

Account Balance Calculation Worksheet

- 1. Use the following worksheet to calculate your overall account balance.
- Go through your register and mark each check, withdrawal, ATM transaction, payment, deposit or other credit listed on your statement. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.
- 3. Use the chart to the right to list any deposits, transfers to your account, outstanding checks, ATM withdrawals, ATM payments or any other withdrawals (including any from previous months) which are listed in your register but not shown on your statement.

ENTER

A. The ending balance	
shown on your statement	\$
ADD	
B. Any deposits listed in your	\$
register or transfers into	\$
your account which are not	s
shown on your statement.	+ \$
***************************************	TOTAL \$
CALCULATE THE SUBTOTAL	
(Add Parts A and B)	
*******	TOTAL \$
SUBTRACT	
C. The total outstanding checks and	
withdrawals from the chart above	\$
CALCULATE THE ENDING BALANCE	
(Part A + Part B - Part C)	
This amount should be the same	
as the current balance shown in	
your check register	\$

Number	Items Outstanding	Amount
		-
	Total amou	

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