

IN THE UNITED STATES DISTRICT COURT
 FOR THE NORTHERN DISTRICT OF TEXAS
 DALLAS DIVISION

SECURITIES AND EXCHANGE	§	
COMMISSION,	§	
	§	
Plaintiff,	§	
	§	
v.	§	CASE NO. 3:09-cv-00298-N
	§	
STANFORD INTERNATIONAL BANK,	§	
LTD., STANFORD GROUP COMPANY,	§	
STANFORD CAPITAL MANAGEMENT,	§	
LLC, R. ALLEN STANFORD, JAMES M.	§	
DAVIS, and LAURA PENDERGEST-	§	
HOLT	§	
	§	
Defendants.	§	

**APPENDIX IN SUPPORT OF NON-PARTY REBECCA REEVES-STANFORD’S
 RESPONSE IN OPPOSITION TO RECEIVER’S MOTION FOR ORDER TO SHOW
 CAUSE WHY REBECCA REEVES-STANFORD
 SHOULD NOT BE HELD IN CONTEMPT**

The undersigned counsel for Non-Party Rebecca Reeves-Stanford respectfully submits this Appendix in Support of Rebecca Reeves-Stanford’s Response In Opposition To Receiver’s Motion For Order To Show Cause Why Rebecca Reeves-Stanford Should Not Be Held In Contempt. Included in this Appendix are the following:

<u>Exhibit</u>	<u>Description</u>	<u>Page Nos.</u>
“A” (Composite)	Documents evidencing Rebecca Reeves-Stanford’s sole ownership interest in her homestead, and payment of taxes and maintenance on her home	1-30
“B”	Affidavit of Rebecca Reeves-Stanford	31-32

Respectfully submitted,

By: s/ Jeronimo Valdez
R. JERONIMO VALDEZ
Texas State Bar No. 24042079
jvaldez@vwlegal.com

VALDEZ | WASHINGTON LLP
Highland Park Place
4514 Cole Avenue, Suite 600
Dallas, Texas 75205
(214) 361-7800 – Telephone
1 (469) 327-2629 – Facsimile

AND

Bradford M. Cohen
Appearing Pro Hac Vice
Florida Bar No. 118176
lawronin@aol.com

Vanessa L. Prieto
Appearing Pro Hac Vice
Florida Bar No. 124613
lawvlp@aol.com

BRADFORD COHEN LAW
1132 SE 3rd Avenue
Fort Lauderdale, Florida 33316
Telephone: 954-523-7774
Facsimile: 954-523-2656

ATTORNEYS FOR REBECCA REEVES-STANFORD

CERTIFICATE OF SERVICE

I certify that on September 1, 2009, I electronically filed the foregoing document with the clerk of court for the U.S. District Court, Northern District of Texas, using the Court's electronic case filing system. The electronic case filing system sent a "Notice of Electronic Filing" to all attorneys of record who have consented in writing to accept this Notice as service of this document by electronic means. I further certify a true and correct copy of the foregoing document was served, as indicated below, the following counsel:

Mr. John Priovolos, Esquire
Law Offices of John Priovolos, P.A.
2333 Brickell Avenue, Suite A-1
Miami, FL 33129

Via Certified Mail, RRR

Ms. Melida Viera, Esquire
111 NE 1st Street, Suite 902
Miami, FL 33132-2517

Via Certified Mail, RRR

s/ Jeronimo Valdez _____
R. JERONIMO VALDEZ

Miami-Dade County, Florida
 Case 3:09-cv-00298-N Document 753-2 Filed 09/01/2009 Page 4 of 35

2008 REAL ESTATE PROPERTY TAXES

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

260550

FOLIO NUMBER	MUNICIPALITY	MILL CODE	ASSESSED VALUE
24-5205-058-0190	KEY BISCAYNE	2400	1,759,360
<u>Mailing Address</u> REBECCA REEVES STANFORD 38 GRAND BAY ESTATES CIR KEY BISCAYNE FL 33149		<u>Property Address</u> 38 GRAND BAY ESTATES CIR	Exemptions: HOMESTEAD

AD VALOREM TAXES			
TAXING AUTHORITY	MILLAGE RATE PER	\$1,000 OF TAXABLE VALUE	TAXES LEVIED
Miami-Dade School Board			
School Board Operating	7.53300	1,734,360	13,064.93
School Board Debt Service	0.26400	1,734,360	457.87
State and Other			
Florida Inland Navigation Dist	0.03450	1,709,360	58.97
South Florida Water Mgmt District	0.53460	1,709,360	913.82
Everglades Construction Project	0.08940	1,709,360	152.82
Childrens Trust Authority	0.42120	1,709,360	719.98
Miami-Dade County			
County Wide Operating	4.83790	1,709,360	8,269.71
County Wide Debt Service	0.28500	1,709,360	487.17
Library District	0.38220	1,709,360	653.32
Municipal Governing Board			
Key Biscayne Operating	3.20000	1,709,360	5,469.95

NON-AD VALOREM ASSESSMENTS			
LEVYING AUTHORITY	RATE	FOOTAGE/UNITS	AMOUNT

Combined taxes and assessments **\$30,248.54**

Save Time. Pay Online. www.miamidade.gov

↑ RETAIN FOR YOUR RECORDS ↓

↓ DETACH HERE AND RETURN THIS PORTION WITH YOUR PAYMENT ↓

2008 REAL ESTATE PROPERTY TAXES
 24-5205-058-0190
 FOLIO NUMBER
 38 GRAND BAY ESTATES CIR
 PROPERTY ADDRESS
LEGAL DESCRIPTION
 GRAND KEY ESTATES
 PB 154-18 T-20112
 LOT 3 BLK 2
 LOT SIZE 8648 SQ FT



Make checks payable to:
Miami-Dade Tax Collector
 (in U.S. funds drawn on U.S. banks)

Please use envelope provided or
 mail to 140 W. Flagler Street
 Miami, FL 33130-1575

REBECCA REEVES STANFORD
 38 GRAND BAY ESTATES CIR
 KEY BISCAYNE FL 33149

PAY ONLY ONE AMOUNT	
Amount if paid by NOVEMBER 30, 2008	\$ 29,038.60
Amount if paid by DECEMBER 31, 2008	\$ 29,341.08
Amount if paid by JANUARY 31, 2009	\$ 29,643.57
Amount if paid by FEBRUARY 28, 2009	\$ 29,946.05
Amount if paid by MARCH 31, 2009	\$ 30,248.54

ad = check 31-09



80033 24520505801900 00 00000000 00000000 00350 7 1

[Using Our Site](#)
[Contact Us](#)
[Privacy Statement](#)

Thank you for using our online services

Please print this page for your records

Funds will be withdrawn immediately from your bank account. Your payment will post to your property tax account, however, it is not final until accepted by your financial institution. Returned electronic payments will be canceled, discounts may be lost and a service fee of not less than \$25 up to a maximum of \$250 will be assessed based on the amount of the canceled payment.

Folio Number: 2452050580190

Owner's Name: REBECCA REEVES STANFORD

Property Address: 38 GRAND BAY ESTATES CIR

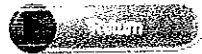
Payment Date Time: Mar-31-2009 12:31:31 PM

Authorization Number: AA

Confirmation Number: 1596734

Amount Paid: \$30248.54

Account Holder's Name: Rebecca L. Reeves-Stanford



[Home](#) | [Privacy Statement](#) | [Disclaimer](#) | [Using Our Site](#) | [About Us](#) | [Phone Directory](#)

© 2004 Miami-Dade County. All rights reserved.

2007 REAL ESTATE PROPERTY TAXES

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

262280

FOLIO NUMBER	MUNICIPALITY	MILL CODE	ASSESSED VALUE
24-5205-058-0190	KEY BISCAYNE	2400	1,708,117
<u>Mailing Address</u> REBECCA REEVES STANFORD 38 GRAND BAY ESTATES CIR KEY BISCAYNE FL 33149	<u>Property Address</u> 38 GRAND BAY ESTATES CIR	<u>Exemptions:</u>	Homestead 25,000

AD VALOREM TAXES			
TAXING AUTHORITY	MILLAGE RATE PER	\$1,000 OF TAXABLE VALUE	TAXES LEVIED
MIAMI-DADE SCHOOL BOARD			
School Board Operating	7.57000	1,683,117	12,741.20
School Board Debt Service	0.37800	1,683,117	636.22
STATE AND OTHER			
Florida Inland Navigation Dist	0.03450	1,683,117	58.07
South Florida Water Mgmt Distric	0.53460	1,683,117	899.79
Everglades Construction Project	0.08940	1,683,117	150.47
Childrens Trust Authority	0.42230	1,683,117	710.78
MIAMI-DADE COUNTY			
County Wide Operating	4.57960	1,683,117	7,708.00
County Wide Debt Service	0.28500	1,683,117	479.69
Library District	0.38420	1,683,117	646.65
MUNICIPAL GOVERNING BOARD			
Key Biscayne Operating	3.20000	1,683,117	5,385.97

NON-AD VALOREM ASSESSMENTS			
LEVYING AUTHORITY	RATE	FOOTAGE/UNITS	AMOUNT
NO NON-AD VALOREM TAXES			

Combined taxes and assessments **\$29,416.84**

Save Time. Pay Online. www.miamidade.gov

↑ RETAIN FOR YOUR RECORDS ↑

↓ DETACH HERE AND RETURN THIS PORTION WITH YOUR PAYMENT ↓

262280

2007 REAL ESTATE PROPERTY TAXES

24-5205-058-0190

FOLIO NUMBER

LEGAL DESCRIPTION

GRAND KEY ESTATES
PB 154-18 T-20112
LOT 3 BLK 2
LOT SIZE 8648 SQ FT



2452050580190

38 GRAND BAY ESTATES CIR

PROPERTY ADDRESS

REBECCA REEVES STANFORD
38 GRAND BAY ESTATES CIR
KEY BISCAYNE FL 33149

Make checks payable to:
Miami-Dade Tax Collector
(in U.S. funds drawn on U.S. banks)

Please use envelope provided or
mail to 140 W. Flagler Street
Miami, FL 33130-1575

*pd - E-check
3-29-08*

PAY ONLY ONE AMOUNT

Amount if paid by **NOVEMBER 30, 2007**

\$ 28,240.17

Amount if paid by **DECEMBER 31, 2007**

\$ 28,534.33

Amount if paid by **JANUARY 31, 2008**

\$ 28,828.50

Amount if paid by **FEBRUARY 29, 2008**

\$ 29,122.67

Amount if paid by **MARCH 31, 2008**

\$ 29,416.84

70033 24520505801900 0002941684 00000000 00000000 00000000 00350 2

Printed on 03/29/2008 08:45 PM

Real Estate Tax Information

Thank you for using our online services

Please print this page for your records

Funds will be withdrawn immediately from your bank account. Your payment will post to your property tax account, however, it is not final until accepted by your financial institution. Returned electronic payments will be canceled, discounts may be lost and a service fee of not less than \$25 up to a maximum of \$250 will be assessed based on the amount of the canceled payment.

Check Payment Information

Folio Number: 2452050580190

Owner's Name: REBECCA REEVES STANFORD

Property Address: 38 GRAND BAY ESTATES CIR

Payment Date Time: Mar-29-2008 08:44:23 PM

Authorization Number: AA

Confirmation Number: 1045762

Amount Paid: \$29416.84

Account Holder's Name: Beki Stanford



Home | My Account | My Payments | My Bills | My History | My Profile | My Settings

© 2004 Miami-Dade County. All rights reserved.

2006 REAL ESTATE PROPERTY TAXES

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

244138

FOLIO NUMBER	MUNICIPALITY	MILL CODE	ASSESSED VALUE
24-5205-058-0190	KEY BISCAIYNE	2400	1,666,456
Mailing Address REBECCA REEVES STANFORD 38 GRAND BAY ESTATES CIR KEY BISCAIYNE FL 33149		Property Address 38 GRAND BAY ESTATES CIR Exemptions: Homestead 25,000	

AD VALOREM TAXES			
TAXING AUTHORITY	MILLAGE RATE PER	\$1,000 OF TAXABLE VALUE	TAXES DUE
School Board	7.69100	1,641,456	12,624.44
School Board Debt Service	0.41400	1,641,456	679.56
Florida Inland Navigation Dist	0.03850	1,641,456	63.20
South Florida Water Mgmt District	0.59700	1,641,456	979.95
Everglades Construction Project	0.10000	1,641,456	164.15
Childrens Trust Authority	0.42230	1,641,456	693.19
County Wide Operating	5.61500	1,641,456	9,216.78
County Wide Debt Service	0.28500	1,641,456	467.81
Library District	0.48600	1,641,456	797.75
Key Biscayne Operating	3.45000	1,641,456	5,663.02

NON-AD VALOREM ASSESSMENTS			
LEVYING AUTHORITY	RATE	FOOTAGE/UNITS	AMOUNT
NO NON-AD VALOREM ASSESSMENTS			

*pd. 3-26-07
ck. #2448*

Combined taxes and assessments **\$31,349.85**

Save Time. Pay Online. www.miamidade.gov

If paid by November 30, 2006 **\$30,095.86**
 If paid by December 31, 2006 **\$30,409.35**
 If paid by January 31, 2007 **\$30,722.85**
 If paid by February 28, 2007 **\$31,036.35**
 If paid by March 31, 2007 **\$31,349.85**

↑ RETAIN FOR YOUR RECORDS ↑

DEB STANFORD 0040 80 SPANCO WAY ESTATES C/PL KEY WEST, FL 34914-1000	2448
DATE: 3-26-07	AMOUNT: \$31,349.85
TO: Miami-Dade Tax Collector	
FROM: This is one thousand three hundred forty nine and 85/100	
BANK OF AMERICA	214208 1004 394 019
ACN DE VOUCHER	
REF: 813100992083933	Deke Stanford
0063000047005486393831*2448	0003134985

Ref. No.: 813100992083933

Amount: 31,349.85

Miami-Dade County, Florida

2005 REAL ESTATE PROPERTY TAXES

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

SEE REVERSE SIDE FOR IMPORTANT INFORMATION

231126

FOLIO NUMBER	MUNICIPALITY	MILL CODE	ASSESSED VALUE
24-5205-058-0190	KEY BISCAIYNE	2400	1,184,228
Mailing Address REBECCA REEVES STANFORD 38 GRAND BAY ESTATES CIR KEY BISCAIYNE FL 33149		Property Address 38 GRAND BAY ESTATES CIR Exemptions: Homestead 25,000	

AD VALOREM TAXES			
TAXING AUTHORITY	MILLAGE RATE PER	\$1,000 OF TAXABLE VALUE	TAXES LEVIED
School Board	7.94700	1,159,228	9,212.38
School Board Debt Service	0.49100	1,159,228	569.18
Florida Inland Navigation Dist	0.03850	1,159,228	44.63
South Florida Water Mgmt District	0.59700	1,159,228	692.06
Everglades Construction Project	0.10000	1,159,228	115.92
Childrens Trust Authority	0.42880	1,159,228	497.08
County Wide Operating	5.83500	1,159,228	6,764.10
County Wide Debt Service	0.28500	1,159,228	330.38
Library District	0.48600	1,159,228	563.38
Key Biscayne Operating	3.60600	1,159,228	4,180.18
NON-AD VALOREM ASSESSMENTS			
LEVYING AUTHORITY	RATE	FOOTAGE/UNITS	AMOUNT

Combined taxes and assessments **\$22,969.29**

SAVE TIME. PAY ONLINE. www.miamidade.gov

E-checking is now available

If paid by November 30, 2005 **\$22,050.52**
 If paid by December 31, 2005 **\$22,280.21**
 If paid by January 31, 2006 **\$22,509.90**
 If paid by February 28, 2006 **\$22,739.60**
 If paid by March 31, 2006 **\$22,969.29**

↑ RETAIN FOR YOUR RECORDS ↓

↓ DETACH HERE AND RETURN THIS PORTION WITH YOUR PAYMENT ↓

2005 REAL ESTATE PROPERTY TAXES

24-5205-058-0190
 FOLIO NUMBER

38 GRAND BAY ESTATES CIR
 PROPERTY ADDRESS



LEGAL DESCRIPTION

GRAND KEY ESTATES
 PB 154-18 T-20112
 LOT 3 BLK 2
 LOT SIZE 8648 SQ FT

pd. electronic check 3/28

Make checks payable to:
Miami-Dade Tax Collector
 (in U.S. funds drawn on U.S. banks)

Please use envelope provided or
 mail to 140 W. Flagler Street, 12th Floor
 Miami, FL 33130-1575

REBECCA REEVES STANFORD
 38 GRAND BAY ESTATES CIR
 KEY BISCAIYNE FL 33149

PAY ONLY ONE AMOUNT

Amount if paid by **NOVEMBER 30, 2005**
\$ 22,050.52

Amount if paid by **DECEMBER 31, 2005**
\$ 22,280.21

Amount if paid by **JANUARY 31, 2006**
\$ 22,509.90

Amount if paid by **FEBRUARY 28, 2006**
\$ 22,739.60

Amount if paid by **MARCH 31, 2006**
\$ 22,969.29

22,509.90



Insurance provided by member companies of American International Group, Inc

Billing Statement

November 21, 2008

Client

Rebecca Stanford
38 Grand Bay Estates Circle
Key Biscayne, FL 33149

Broker

Marsh USA, Inc. - Miami
Private Client Services
7251 W. Lake Mead Blvd. #401
Las Vegas, NV 89128

305-341-5000

Broker #: 0050163

Questions?

If you have questions about this bill, please contact us:

- by phone at 866-856-6855 between 8:00 am and 4:30 pm CST Monday to Friday
- by fax at 866-743-1107
- by email at billing.pcg@aig.com

Payment Options

Please see *Payment Options* on the back of the payment stub.

Summary of Your Account:

0004138444101

Account Balance

Total Premium including state assessments, credits, and fees \$20,234.51

Payments & Adjustments as of November 21, 2008 -\$13,035.22

Account Balance Remaining \$7,199.29

Minimum Amount Due by December 21, 2008 \$3,264.29

Including state assessments, credits, and fees

See the next page for details

A Note Regarding Past Due Payments

If you owe outstanding payments, you will receive a Legal Notice of Cancellation for non payment of past due amounts. Please adhere to the due date indicated on the cancellation notice.

Please detach here

Page 1 of 4



Payment Stub

Rebecca Stanford
38 Grand Bay Estates Circle
Key Biscayne, FL 33149

pd 12-20-08 F-check

AIG PRIVATE CLIENT GROUP
P.O. BOX 35423
NEWARK, NJ 07193-5423

Term No: 1 Invoice No: 3 Pcbill (12/06)
Client Copy 11/20/2008
Name Code: Stan

Account Number: 0004138444101
Client: Rebecca Stanford
Billing Statement Date: November 21, 2008
Account Balance Remaining: \$7,199.29
Due by December 21, 2008 \$3,264.29

Minimum Amount Due: \$3,264.29

Amount Enclosed

\$3,264.29

400G0122000413844400E016302808



Payment Confirmation - Term 1

This payment may not be reflected on your account for three to five business days.

If you have received a cancellation notice, payment on cancelled policies does not guarantee coverage will be reinstated.

Please keep a record of your Confirmation Number, or print this page for your records.

Confirmation Number: AIGPCG000031800

Your Payment Detail

Payment Amount: **\$3,264.29**
Scheduled Payment Date: **Dec-23-2008**
Amount Due: **\$3,264.29**
Payment Due Date: **Dec-21-2008**
Account: **0004138444101**
Name Code: **Stan**
Term / Invoice: **1 3**
Past Due Amt, Due Immediately: **\$.00**
Current Amount Due: **\$3,264.29**
Account Balance Remaining: **\$7,199.29**

Your Account Detail

Account Nickname: **beki**
Routing Transit Number: **063000047**
Account Number: **XXXXXXXXXXXX3831**
Account Type: **Checking**
Account Category: **Consumer**

E-mail Address: **bekistan919@aol.com**



Rebecca Stanford
 Account Number: 0004138444101
 Billing Statement Date: August 22, 2008

Details of Your Account

Homeowners policy 0001526638, effective August 4, 2008 *
American Home Assurance Co.

Locations Insured: 1
 1. 38 Grand Bay Estates Circle, Key Biscayne, FL, 33149

A Annual premium	\$13,047.00
B Policy change(s):	
NO PREMIUM CHANGES THIS PERIOD	\$0.00
<hr/>	
C Revised annual premium (A + B)	\$13,047.00
D State Assessments and Fees:	\$504.74
E Payments received to date	\$0.00
F Adjustments applied to date	\$0.00
<hr/>	
Balance Remaining (C + D + E + F)	\$13,551.74
Minimum Amount Due (Past and Current Amount)	\$5,723.54

Personal Excess policy 0002292924, effective August 4, 2008 *
American International Ins Co.

Coverages for:

1. 1 location, 2 vehicles	2. UM/UIM motorists
3. Employment Practice Liability	

A Annual premium	\$1,928.00
B Policy change(s):	
NO PREMIUM CHANGES THIS PERIOD	\$0.00
<hr/>	
C Revised annual premium (A + B)	\$1,928.00
D State Assessments and Fees:	\$37.32
E Payments received to date	\$0.00
F Adjustments applied to date	\$0.00
<hr/>	
Balance Remaining (C + D + E + F)	\$1,965.32
Minimum Amount Due (Past and Current Amount)	\$808.52

Flood policy 0003217168, effective August 4, 2008 *
American Home Assurance Co.

Locations Insured:
 1. 38 Grand Bay Estates Circle, 33149

A Annual premium	\$5,669.00
B Policy change(s):	
NO PREMIUM CHANGES THIS PERIOD	\$0.00
<hr/>	
C Revised annual premium (A + B)	\$5,669.00
D State Assessments and Fees:	\$57.00
E Payments received to date	\$0.00
F Adjustments applied to date	\$0.00
<hr/>	
Balance Remaining (C + D + E + F)	\$5,726.00
Minimum Amount Due (Past and Current Amount)	\$2,324.60

* Please refer to your policy for actual coverage information. Not all of the items covered in your policy are listed above. Premiums for policy changes shown above are consistent with the length of time coverage applies. Whereas, your policy declaration page reflects annual premiums.

000601220004138444005016302945



Payment Confirmation - Term 1

This payment may not be reflected on your account for three to five business days.

If you have received a cancellation notice, payment on cancelled policies does not guarantee coverage will be reinstated.

Please keep a record of your Confirmation Number, or print this page for your records.

Confirmation Number: AIGPCG000024743

Your Payment Detail

Payment Amount: **\$8,856.66**
Scheduled Payment Date: **Sep-22-2008**
Amount Due: **\$8,856.66**
Payment Due Date: **Sep-21-2008**
Account: **0004138444101**
Name Code: **Stan**
Term / Invoice: **1 1**
Past Due Amt, Due Immediately: **\$.00**
Current Amount Due: **\$8,856.66**
Account Balance Remaining: **\$21,243.06**

Your Account Detail

Account Nickname: **beki**
Routing Transit Number: **063000047**
Account Number: **XXXXXXXXXXXX3831**
Account Type: **Checking**
Account Category: **Consumer**

E-mail Address: **bekistan919@aol.com**



SELLER'S DISCLOSURE STATEMENT

1. Seller(s) Name(s): Rebecca Reeves-Stanford
 Property Address: 38 Grand Bay Estates Circ. Key Biscayne Fl 33149
 Is each individual named above a U.S. Citizen or resident alien? Yes No
 Approximate Age of Property: 8 years Date Purchased: Jul. 27th 2005

2. NOTICE TO SELLER

Each Seller is obligated to disclose to a buyer all known facts that materially and adversely affect the value of the property being sold and that are not readily observable. This disclosure statement is designed to assist Seller in complying with disclosure requirements and to assist Buyer in evaluating the property being considered. The listing real estate broker, the selling real estate broker and their respective agents will also rely upon this information when they evaluate, market, and present Seller's to prospective buyers.

3. NOTICE TO BUYER

This is a disclosure of Seller's knowledge of the condition of the property as of the date signed by Seller and is not a substitute for any inspections or warranties that Buyer may wish to obtain. It is not a warranty of any kind by Seller or a warranty or representation by the listing broker, the selling broker, or other agents.

4. OCCUPANCY

Does Seller currently occupy this property? Yes No If not, how long has it been since Seller occupied the property?

5. LAND SOILS, DRAINAGE AND BOUNDARIES

- (a) Is there any fill or expansive soil on the property? Yes No Unknown
 - (b) Do you know of any sliding, settling, earth movement, upheaval or earth stability problems that have occurred on the property or in the immediate neighborhood? Yes No
 - (c) Is the property located in a flood zone or wetlands area? Yes No Unknown
 - (d) Do you know of any past or present drainage or flood problems affecting the property or adjacent properties?
 Yes No
 - (e) Do you know of any encroachments, boundary line disputes, or easements affecting the property? Yes No
- If any of your answers in this section are "Yes," explain in detail: _____

6. ROOF

- (a) Age: 8 yrs. years.
 - (b) Has the roof ever leaked during your ownership? Yes No
 - (c) Has the roof been replaced or repaired during your ownership? Yes No
 - (d) Do you know of any problems with the roof or rain gutters? Yes No
- If any of your answers in this section are "Yes," explain in detail: _____

7. TERMITES, DRY ROT, PESTS

- (a) Do you have any knowledge of termites, dry rot, or pests on or affecting the property? Yes No
 - (b) Do you have any knowledge of any damage to the property caused by termites, dry rot, or pests? Yes No
 - (c) Is your property currently under warranty or other coverage by a licensed pest control company? Yes No
 - (d) Do you know of any termite/pest control reports or treatments for the property in the past five years? Yes No
- If any of your answers to this section are "Yes," explain in detail: _____

8. STRUCTURAL ITEMS

- (a) Are you aware of any past or present movement, shifting, deterioration, or other problems with walls or foundations?
 Yes No
- (b) Are you aware of any past or present cracks or flaws in the walls or foundations? Yes No
- (c) Are you aware of any past or present water leakage in the house? Yes No
- (d) Are you aware of any past or present problems with driveways, walkways, patios, or retaining wall on the property? Yes No

Buyer's Initials _____

Seller's Initials RS

Buyer's Initials _____

Seller's Initials _____

(e) Have there been any repairs or other attempts to control the cause or effect of any problem described above? Yes No
If any of your answers in this section are "Yes," explain in detail. When describing repairs or control efforts, describe the location, extent, date, and Name of the person who did the repair or control effort: N/A

9. ADDITIONS/REMODELS

(a) Have you made any additions, structural changes, or other alterations to the property? Yes No
If "Yes," did you obtain all necessary permits and approvals and was all work in compliance with building codes? Yes No
If your answer is "No," please explain: _____
(b) Did any former owners of the property make any additions, structural changes, or other alterations to the property? Yes No Unknown
If "Yes," was all work done with all necessary permits and approvals in compliance with building codes? Yes No Unknown
If your answer is "No," explain: _____

10. PERMITS

(a) Are you aware of any open permits regarding your property? Yes No
If "Yes," you should call Dade County Bldg & Zoning at (305) 375-2475 or Team Metro at (305) 234-1510 to get them "Closed" and/or finalized in Order to avoid delays at or prior to closing.

11. PLUMBING-RELATED ITEMS

(a) What is your drinking water source: Public Private System Well on Property
(b) If your drinking water is from a well, when was your water last checked for safety and what was the result of the test? _____
(c) Do you have a water softener? Yes No Leased Owned
(d) What is the type of sewage system? Public Sewer Private Sewer Septic Tank Cesspool
(e) Is there a sewage pump? Yes No
(f) When was the septic tank or cesspool last serviced? N/A
(g) Do you know of any leaks, backups, or other problems relating to any of the plumbing, water, and sewage-related items? Yes No
If your answer is "Yes," explain in detail: _____

12. HEATING AND AIR CONDITIONING

(a) Air Conditioning Central Central Gas Window 3 (#) Units Included in Sale
(b) Heating Electric Fuel Oil Natural Gas Other: _____
(c) Water Heating Electric Gas Solar
Are you aware of any problems regarding these items? Yes No
If "Yes," explain in detail: _____

13. ELECTRICAL SYSTEM

Are you aware of any problems or conditions that affect the value or desirability of the electrical system? Yes No
If "Yes," explain in detail: _____

14. OTHER EQUIPMENT AND APPLIANCES BEING SOLD

Mark the items included in the sale of your property:
 Electric Garage Door Opener Number of Transmitters _____ Security Alarm System (Owned Leased)
 Smoke Detectors How Many? _____ Lawn Sprinklers Automatic Timer
 Pool Heater Spa/Hot Tub Pool/Spa Equipment (list): _____
 Refrigerator Stove Microwave Oven Washer Dryer Dishwasher Trash Compactor
 Intercom Ceiling Fans Other: _____
Are any of these in need of repair or replacement? Yes No
If "Yes," then explain in detail: _____

Buyer's Initials _____

Seller's Initials [Signature]

Buyer's Initials _____

Seller's Initials _____



15. NEIGHBORHOOD

Are you aware of any condition or proposed change in your neighborhood that could adversely affect the value or desirability of the property, Such as noise or other nuisance, threat of condemnation or street changes? Yes No
If "Yes," explain in detail: _____

16. TOXIC SUBSTANCES

(a) Are you aware of any underground tanks or toxic substances present on the property (structure or soil) such as asbestos, PCBs, accumulated Radon, lead paint, or others? Yes No
(b) Has the property been tested for radon or any other toxic substances? Yes No
If "Yes," explain in detail: _____

17. CONDOMINIUMS AND OTHER HOMEOWNERS ASSOCIATIONS

(a) Is the property part of a condominium or other common ownership or is it subject to covenants, conditions, and restrictions (CC & R's) of a Homeowner's association? Yes No (if your answer is "no," you may ignore the remainder of this section).
(b) Is there any defect, damage, or problem with any common elements or common areas which could affect their value or desirability? Yes No Unknown
(c) Is there any condition or claim which may result in an increase in assessments or fees? Yes No Unknown
If your answer to (b) or (c) is "Yes," explain in detail: _____

18. OTHER MATTERS

(a) Is there any existing or threatened legal action affecting the property? Yes No
(b) Do you know of any violations of local, state, or federal laws or regulations relating to the property? Yes No
(c) Is there anything else that you feel you should disclose to a prospective buyer because it may materially and adversely affect the value or Or desirability of the property, e.g., zoning violations, non-conforming units, setback violations, zoning changes, road changes, etc.? Yes No
If any of your answers in this section are "Yes," explain in detail: _____

The undersigned **Seller** represents that the information set forth in the foregoing disclosure statement is accurate and complete. **Seller** does not intend this disclosure statement to be a warranty or guarantee of any kind. **Seller** hereby authorizes _____ to provide this information to prospective buyers of the property and to real estate brokers and sales people. **Seller** understands and agrees that **Seller** will notify _____ in writing immediately if any information set forth in this disclosure statement becomes inaccurate or incorrect in any way through the passage of time.

PROPERTY ADDRESS: 38 Grand Bay Estates Circ. Key Biscayne FL 33149

Seller: Rebecca Reeves Stanford Date: 3-16-09 Seller: _____ Date: _____
Rebecca Reeves-Stanford

RECEIPT AND ACKNOWLEDGEMENT OF BUYER

SINCE THESE ARE THE FACTS THAT HAVE BEEN PRESENTED TO RE/MAX ADVANCE REALTY BY THE SELLERS, THE BROKERS & AGENTS THERE HAVE NOT PERSONALLY VERIFIED THEM AND CANNOT VOUCH FOR THEIR ACCURACY. MY BROKER/AGENT ADVISED ME, THE BUYER, TO PERSONALLY VERIFY ALL FACTS ABOUT THIS PROPERTY THAT ARE IMPORTANT TO ME, & STRONGLY ADVISED ME TO HAVE THE PROPERTY EXAMINED BY PROFESSIONAL INSPECTORS. I FURTHER ACKNOWLEDGE THAT NEITHER ANY BROKER NOT AGENT INVOLVED IN THIS TRANSACTION IS AN EXPERT AT DETECTING OR REPAIRING PHYSICAL DEFECTS IN THE PROPERTY.

I UNDERSTAND THAT UNLESS STATED OTHERWISE IN MY CONTRACT WITH SELLER, THE PROPERTY IS BEING SOLD IN ITS PRESENT CONDITION ONLY, WITHOUT WARRANTIES OR GUARANTEES OF ANY KIND BY SELLER OR ANY BROKER OR AGENT. I STATE THAT NO REPRESENTATIONS CONCERNING THE CONDITION OF THE PROPERTY ARE BEING RELIED UPON BY ME EXCEPT AS DISCLOSED ABOVE OR STATED WITHIN THE SALES CONTRACT.

Buyer: _____ Date: _____ Seller: Rebecca Reeves Stanford Date: 3-16-09

THIS IS A LEGALLY BINDING DOCUMENT. IF NOT UNDERSTOOD, CONSULT AN ATTORNEY.





Mold Addendum to Seller's Real Property Disclosure Statement
FLORIDA ASSOCIATION OF REALTORS®

The following amends the Seller's Real Property Disclosure Statement signed by Rebecca Reeves-Stanford
(seller) on _____ (date) for property located at 38 Grand Bay Estates Circ. Key Biscayne FL 33149

The following representations are made by the Seller(s) and are not the representations of any real estate licensees.

1. MOISTURE/WATER INTRUSION INCIDENTS/MOLD

Are You Aware:

- a. of any instances where moisture/water/condensation/humidity intruded into the structures located on the property as the result of rain, flood, plumbing leak, appliance leak, roof, window or wall leak or any other type of leak or event? Yes No If yes, explain:

- b. of any damage to the structures located on the property including the growth of the mold that resulted from any type of moisture/water/condensation/humidity intrusion or leak? Yes No If yes, explain:

- c. of any clean up, repairs, or remediation of the property including clean up of mold because of moisture or water intrusion/condensation/humidity? Yes No

- d. of any other problems resulting from moisture/water intrusion/condensation/humidity? Yes No If yes, explain:

ACKNOWLEDGEMENT OF SELLER

The undersigned Seller represents that the information set forth in the above disclosure statement is accurate and complete to the best of the Seller's knowledge on the date signed below. Seller does not intend for this disclosure statement to be a warranty or guarantee of any kind. Seller hereby authorizes disclosure of the information contained in this disclosure statement to prospective Buyers of the property. Seller understands and agrees that Seller will notify the Buyer in writing within five business days after Seller becomes aware that any information set forth in this disclosure statement has become inaccurate or incorrect in any way during the term of the pending purchase by the buyer.

Seller: Rebecca Reeves-Stanford / Rebecca Reeves-Stanford Date: 3-16-09
SIGNATURE PRINT

Seller: _____ / _____ Date: _____
SIGNATURE PRINT

RECEIPT AND ACKNOWLEDGEMENT OF BUYER

Seller is using this form to disclose Seller's knowledge of the condition of the real property and improvements located on the property as of the date signed by the Seller. This disclosure form is not a warranty of any kind. The information contained in the disclosure is limited to information to which the seller has knowledge. It is not intended to be a substitute for any inspections or professional advice the Buyer may wish to obtain. An independent professional inspection is encouraged and may be helpful to verify the condition of the property and to determine the cost of repairs, if any. Buyer understands these representations are not made by any real estate licensee.

Buyer hereby acknowledges having received a copy of this disclosure statement.

Buyer: _____ / _____ Date: _____
SIGNATURE PRINT

Buyer: _____ / _____ Date: _____
SIGNATURE PRINT



*Central ac
vac
going*

No 1404

MOON ELECTRONICS, INC.

7440 SW 50th Terrace, Suite 110
Miami, FL 33155

www.moonelectronics.com

*e-Home
736-49-4360*

ORDER NO:		PHONE:		DATE:	
		561-239-2774		5-26-06	
NAME: <i>Becky Sanford</i>					
ADDRESS: <i>38 Man May State Cir 33149 Key Biscayne, Fla 33149</i>					
SOLD BY	CASH	C.C.D.	CHARGE	ON ACCT.	PAID OUT
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
QUANTITY	DESCRIPTION			PRICE	AMOUNT
<i>1</i>	<i>service call to check</i>				
	<i>Mod 2100 vacuum system</i>				<i>100.00</i>
<i>1</i>	<i>New PC Board</i>				<i>105.00</i>
<i>1</i>	<i>Cleaning Filter</i>				<i>25.00</i>
<i>1</i>	<i>Miscellaneous work</i>				<i>NC.</i>
	<i>Sub</i>				<i>230.00</i>
RECEIVED BY: <i>Becky Sanford</i>				TAX	<i>16.10</i>
				TOTAL	<i>246.10</i>

All Claims and returned goods
MUST be accompanied by this bill.

305 262 0849

Thank You

Product #15471
Amsterdam Printing & Litho Corp.
Amsterdam, N.Y. 12010

PANAMERICAN ROOFING
4570 SW 39 ST
HOLLYWOOD FL 33023

INVOICE SUMITED TO:	Invoice#09-0030	Date: 05 /11 /09
Name: Beky Stanford.	Job Name: Beky Stanford	
Ph: (305) 365-7290.	Address: 38 Grand Bay State Circle	
Fax: (305) 365-0437.	City: key Biscayne.	
	Estate: Florida.	Zip Code:33149

Invoice:

1. Replace aprox 10 roof tile.
2. Remove derbies from the property relate with a job.
3. One year limited of warranty.

Five Hundred Dollars Exacts.
 With payment to be made as follows:
 50% of deposit
 \$250
 Balance upon completion of the work.
 \$250

Respectfully Submitted by: Carlos H Rivera.

Pay in full.

05-11-09
Signature

Carlos H Rivera
Date

Keylite

ELECTRIC SERVICE, Inc.

DATE 8/16 2006

P.O. BOX #711, KEY BISCAWAYNE, FL 33149

TELEPHONE 305-361-3481

WORKMAN Steve

TELEPHONE 361-6341

Name Becky Stanford

Bill to same

Job at 38 Grand Bay

At _____

Nature of Work _____

City _____ Zip _____

Time	From	To	Hours	MATERIAL USED	Amount
Mon.					
Tues.				8/16 Remove family room fan + box	
Wed.				(box needs to be replaced)	
Thurs.				+ supported to slab	
Fri.					
Sat.				check hi.t over rock top	
Sun.				(Need to replace socket)	
Total Hours					
Invoice - left - mailed				swap fans upstairs + change down rods	
				check landscape lighting	
				went to return with fuses timers (3) + bulbs	
				3- butt splice @ 1.00	3.00
				check availability of "hunter"	
				for screws	
				PAID # 2275	

Notice: A charge of 1½ % interest will be added per month after 10 days of billing date. In the event it becomes necessary to place this contract in the hands of an attorney in order to effectuate collection of the moneys due hereunder, the Buyer agrees to be responsible for all costs of collection, including reasonable attorney's fees.

I find the time and material charged above satisfactory and agree to pay for same on presentation of bill.

DUE UPON COMPLETION Signed [Signature]

Material		3.00
Service	3 hours	195.00
Sub Total		
Tax		19.00
TOTAL		198.00

(305) 233-2353 Beeper 544-0345 Steve
 (305) 361-3906 Beeper 352-3245 Willie

**SERVICE ORDER
 INVOICE**

0101805 (1)

BILL TO _____

THIS WORK IS TO BE
 C.O.D. CHARGE NO CHARGE

MAKE RHEEM 4 TON | MAKE 2ND FLOOR
 MODEL 4 TON | MODEL _____
 SERIAL NUMBER 5 TON | SERIAL NUMBER 1ST FLOOR 200

NAME DEVE STANFORD
 ADDRESS 8 GRAND BAY CIRCLE DATE 10/18/05
 CITY KB FL 33149 PROMISED _____
 PHONE 305 361 6341 CALL BEFORE A.M. P.M.
 TECHNICIAN OSCAR AUTHORIZED BY _____
 WORK TO BE PERFORMED _____

ENVIRONMENTAL CHECK LIST			WORK PERFORMED	
WORK PERFORMED	QTY.	TYPE/DISPOSITION	CONDENSING UNIT	COND/SATE DRAINS
<input type="checkbox"/> RECOVERED			LEVELLED	CLEANED MAIN DRAIN <input checked="" type="checkbox"/>
<input type="checkbox"/> RECYCLED			CLEANED COIL	REPAIRED MAIN DRAIN
<input type="checkbox"/> RECLAIMED			CHECKED CHARGE	CLEANED PAN DRAIN <input checked="" type="checkbox"/>
<input type="checkbox"/> RETURNED			REPAIRED LEAK IN COIL	REPAIRED PAN DRAIN
<input type="checkbox"/> DISPOSAL			REPAIRED LEAK IN COPPER	FURN. OR FAN COIL
<input type="checkbox"/> DISMANTLED			# REF.	REPLACED BELT
<input type="checkbox"/> CHANGED OUT/REPLACED		TOTAL \$	CHECKED MOTOR	ADJUSTED BELT

QTY.	MATERIALS & SERVICES	UNIT PRICE	AMOUNT	DESCRIPTION OF WORK PERFORMED
3	REFRIGERANT R-22 LBS. CO2		25 -	FOUND UNIT ON SECOND FLOOR ICE UP.
			45 -	LOW ON FREON, FILTER DIRTY. CHARGE UNIT. CHECK PRESSURES ON ALL 3 UNITS. CLEAN FILTERS ON ALL 3 UNITS.
	FILTERS x x			
	FILTERS x x			
	BELTS			
TOTAL MATERIALS			70 -	

REPLACED BELT	ADJUSTED BELT
REPLACED PULLEY	REPLACED PULLEY
ADJUSTED PULLEY	CLEANED BLOWER
REPLACED CONTACTOR	REPLACED BEARINGS
REPL. START CAPACITOR	OILED MOTOR
REPL. START CAPACITOR	OILED BEARINGS
REPLACED RUN CAPACITOR	CLEANED HEAT EXCH.
CLEANED OR ADJ. CONTACTOR	REPLACED HEAT EXCH.
REPAIRED WIRING	CLEANED OR ADJ. PILOT
REPLACED FUSE	REPLACED THERMOCOUPLE
REPLACED COMPRESSOR	REPAIRED VALVE
EVAPORATOR COIL	REPLACED VALVE
REPLACED EXP. VALVE	CLEANED BURNERS
ADJUSTED EXP. VALVE	DUCT
REPLACED CAP. TUBE	REPAIRED
CLEANED CAP. TUBE	ADJUSTED
REPAIRED COIL LEAK	THERMOSTAT
REPAIRED COPPER CONN.	REPLACED
CLEANED COIL	ADJUSTED
LEVELLED COIL	
ELECT. HTR.	CLG TOWER
REPLACED LINK	CLEANED
REPLACED KLIX	
REPAIRED WIRE	PUMP(S)
REPLACED CONT	GREASED
	REPAIRED
FILTERS	<input type="checkbox"/> CLEANED <input type="checkbox"/> REPLACED

HRS.	LABOR	RATE	AMOUNT
2	OSCAR		40 -
TOTAL LABOR			40 -

RECOMMENDATIONS

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.

REGULAR WARRANTY
 SERVICE CONTRACT

TERMS _____

I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnished until final payment is made. If payment is not made as agreed, seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.

CUSTOMER SIGNATURE _____ DATE _____

TOTAL SUMMARY	
TOTAL MATERIALS	210 ⁰⁰
TOTAL LABOR	
TRAVEL CHARGE	14 ⁷⁰
TAX	
TOTAL	224 ⁷⁰

Thank You

(305) 233-2353 Beeper 544-0345 Steve
 (305) 361-3906 Beeper 352-3245 Willie

HVAC SERVICE ORDER

INVOICE

00110306(1)

BILL TO

THIS WORK IS TO BE
 C.O.D. CHARGE NO CHARGE

MAKE **RHEEM** MAKE
 MODEL **5TON** MODEL
 SERIAL NUMBER SERIAL NUMBER

BECKY STANFORD
38 GRAND BAY ESTATES DATE **Nov/3/06**
12B FL 33149 PROMISED

TECHNICIAN **OSCAR** CALL BEFORE A.M. P.M.
 AUTHORIZED BY

ENVIRONMENTAL CHECK LIST			WORK PERFORMED	
WORK PERFORMED	QTY.	TYPE/DISPOSITION	CONDENSING UNIT	COND'S/ATE DRAINS
<input type="checkbox"/> RECOVERED			LEVELED	CLEANED MAIN DRAIN
<input type="checkbox"/> RECYCLED			CLEANED COIL	REPAIRED MAIN DRAIN
<input type="checkbox"/> RECLAIMED			CHECKED CHARGE	CLEANED PAN DRAIN
<input type="checkbox"/> RETURNED			REPAIRED LEAK IN COIL	REPAIRED PAN DRAIN
<input type="checkbox"/> DISPOSAL			REPAIRED LEAK IN COPPER	FURN. OR FAN COIL

QTY.	MATERIALS & SERVICES	UNIT PRICE	AMOUNT
	REFRIGERANT R- LBS.		
	FILTERS x x		
	FILTERS x x		
	BELTS		

DESCRIPTION OF WORK PERFORMED		TOTAL \$
<p>PULLED + CLEANED EVAPORATOR COIL + BLOWER + OIL MOTOR. VACUUM UNIT CHECKED FREON, BLEW DRAIN. PRESSURES GOOD. THE DRAIN PAN HAD A CRACK FROM WEAR + TEAR. WE NEEDED TO KEEP AN EYE ON UNIT</p>		
RECOMMENDATIONS		
<p>IF FOR SOME REASON WOULD START LEAKING</p>		

HRS.	LABOR	RATE	AMOUNT
	OSCAR STEVE		

TOTAL MATERIALS		AMOUNT
TOTAL LABOR		AMOUNT

TERMS

I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnished until final payment is made. If payment is not made as agreed, seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.

CUSTOMER SIGNATURE _____ DATE _____

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.

REGULAR WARRANTY
 SERVICE CONTRACT

Thank You

TOTAL SUMMARY	
TOTAL MATERIALS	575 ⁰⁰
TOTAL LABOR	275 ⁰⁰
TRAVEL CHARGE	40 ²⁵
TAX	
TOTAL	\$615²⁵

(305) 233-2353 Beeper 544-0345 Steve
 (305) 361-3906 Beeper 352-3245 Willie

HVAC
SERVICE ORDER
INVOICE

BILL TO

THIS WORK IS TO BE
 P.O.D. CHARGE NO CHARGE

MAKE WHIRLPOOL MAKE _____
 MODEL _____ MODEL _____
 SERIAL NUMBER _____ SERIAL NUMBER _____

NAME BECKY STANFORD
 STREET 38 GRAND BAY
 CITY KB FL 33149
 PHONE (305) 361 6341
 PROMISED 09/26/06

ENVIRONMENTAL CHECK LIST			WORK PERFORMED	
WORK PERFORMED	QTY.	TYPE/DISPOSITION	CONDENSING UNIT	COND'S/DATE DRAINS
<input type="checkbox"/> RECOVERED			LEVELED	CLEANED MAIN DRAIN
<input type="checkbox"/> RECYCLED			CLEANED COIL	REPAIRED MAIN DRAIN
<input type="checkbox"/> RECLAIMED			CHECKED CHARGE	CLEANED PAN DRAIN
<input type="checkbox"/> RETURNED			REPAIRED LEAK IN COIL	REPAIRED PAN DRAIN
<input type="checkbox"/> DISPOSAL			REPAIRED LEAK IN COPPER	FURN. OR FAN COIL
<input type="checkbox"/> DISMANTLED			# REF.	REPLACED BELT
<input type="checkbox"/> CHANGED OUT/REPLACED		TOTAL \$	CHECKED MOTOR	ADJUSTED BELT
			CHANGED MOTOR	REPLACED PULLEY
			REPLACED BELT	ADJUSTED PULLEY
			ADJUSTED BELT	CLEANED BLOWER
			REPLACED CONTACTOR	REPLACED BEARINGS
			REPL. START RELAY	OILED MOTOR
			REPL. START CAPACITOR	OILED BEARINGS
			REPLACED RUN CAPACITOR	CLEANED HEAT EXCH.
			CLEANED OR ADJ. CONTACTOR	REPLACED HEAT EXCH.
			REPAIRED WIRING	CLEANED OR ADJ. PILOT
			REPLACED FUSE	REPLACED THERMOCOUPLE
			REPLACED COMPRESSOR	REPAIRED VALVE
			EVAPORATOR COIL	REPLACED VALVE
			REPLACED EXP. VALVE	CLEANED BURNERS
			ADJUSTED EXP. VALVE	DUCT
			REPLACED CAP. TUBE	REPAIRED
			CLEANED CAP. TUBE	ADJUSTED
			REPAIRED COIL LEAK	THERMOSTAT
			REPAIRED COPPER CONN	REPLACED
			CLEANED COIL	ADJUSTED
			LEVELED COIL	
			ELECT. HTR.	CLG TOWER
			REPLACED LINK	CLEANED
			REPLACED KLIX.	
			REPAIRED WIRE	PUMP(S)
			REPLACED CONT.	GREASED
				REPAIRED
			FILTERS	<input type="checkbox"/> CLEANED <input type="checkbox"/> REPLACED

TECHNICIAN _____
 CALL BEFORE A.M. P.M.
 AUTHORIZED BY _____

WORK TO BE PERFORMED _____

QTY.	MATERIALS & SERVICES	UNIT PRICE	AMOUNT	DESCRIPTION OF WORK PERFORMED
1	NEW DIGITAL T-STAT - 1 YEAR WARRANTY			REPLACED BROKEN THERMOSTAT. BLEW DRAIN. UNIT COOLING GOOD.
	REFRIGERANT R- _____ LBS.			
	FILTERS			
	FILTERS			
	BELTS			
	TOTAL MATERIALS			

HRS.	LABOR	RATE	AMOUNT	RECOMMENDATIONS
1	OSCAR			
	TOTAL LABOR			

MATERIALS & LABOR MAY BE CONTINUED ON OTHER SIDE

TERMS _____
 I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnished until final payment is made. If payment is not made as agreed, seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.
 CUSTOMER SIGNATURE _____ DATE _____

LIMITED WARRANTY: All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.
 REGULAR WARRANTY
 SERVICE CONTRACT
 Thank You

TOTAL SUMMARY	
TOTAL MATERIALS	150 -
TOTAL LABOR	
TRAVEL CHARGE	0
TAX	22
TOTAL	150 -



JOB INVOICE

1-18 2006

P.O. BOX 711

BISCAYNE, FL 33149

TELEPHONE 305-361-3481

WORKMAN

PAUL

TELEPHONE 561-234-277

Name _____ Bill to _____

Job at 35 GRAND BAY ESTATE CIRCLE At _____

Nature of Work: GARAGE DOOR OPENER City _____ Zip _____

Time	From	To	Hours	MATERIAL USED	Amount
Mon.					
Tues.					
Wed.	200	300	1		
Thurs.					
Fri					
Sat.					
Sun.					
Total Hours			1	<u>RESET CODES ON GARAGE DOOR OPENER AND KEYPAD</u>	
Invoice - left - mailed					

PAUL 1 HR

65 -

BCK# 2075

NOTICE: A charge of 1 1/2 % Interest will be added per month after 10 days of billing date. In the event it becomes necessary to place this contract in the hands of an attorney in order to effectuate collection of the moneys due hereunder, the Buyer agrees to be responsible for all costs of collection, including reasonable attorney's fees.

I find the time and material charged above satisfactory and agree to pay for same on presentation of bill.

DUE UPON COMPLETION Signed

[Signature]

Material	
Service	65 -
Sub Total	
Tax	
TOTAL	65 -

PANAMERICAN ROOFING

4570 SW 39 ST
 HOLLYWOOD FLORIDA, 33023
 PH : (305) 796-0703

PROPOSAL SUMITED TO:	Proposal# 05-1019	Date:11/11/05
Name: Sra. Belkis Stafford.	Job Name: Belkis Stafford.	
Home: (305) 365-9783 361-6341	Address: 38 Gran Bay Circle.	
Cell: (561) 239- 2774	City: Key Biscayne.	
	Estate: Florida.	Zip Code:33149

We hereby specifications and estimates for:
 Proposal:

1. Wash house included window and drive way.....\$ 400.
2. Pressure cleaning complete the roof.....~~\$1000.~~ 850.00
3. ~~Curter four palm.....\$ 300.~~
4. Fix gutter north size.....\$ 250.
5. Replace 10 ft gutter corner.....\$ 350.
6. Replace two broken tiles.....\$ 200.

Total \$ ~~3,000.~~ 2050
 deposit paid 1,000.00

We hereby propose to furnish labor and materials, complete in accordance with the above specifications, for the sum of:

Tree Thousand Dollars Exacts. ~~(3,000.)~~ 2050

With payment to be made as follows:
 50% of deposit.

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices.

Any alteration or deviation from above specifications involving extra costs, will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control.

\$1,050
 due
 upon
 completion.

Respectfully submitted by: Carlos H. Rivera.

Acceptance of proposal

The above prices, specifications and conditions are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Beki Stafford
 Signature

12-07-05
 Date

pd.
 450.00
 1-18-06
 PIF

See you on Wed. 12/7/05 Jan. 4

Ft. Lauderdale
954-524-0111

Miami
305-599-0990

West Palm
561-820-2440

Naples
239-598-1047

SUNCOAST PEST CONTROL

7218 Central Avenue
St. Petersburg, FL 33707
(727) 327-3202

Corporate Headquarters
www.suncoastpestcontrol.com

**Pest Control
Service Agreement**

Clearwater
727-725-4995

Cape Coral
239-542-6161

Fort Myers
239-768-6050

Tampa
813-908-1700

CUSTOMER <i>Deputy STANFORD</i>		SERVICE LOCATION <i>Same</i>	
STREET <i>37 Grand Bay Est</i>			
CITY, STATE and ZIP <i>Key Biscayne FL 33149</i>		PERSON TO BE CONTACTED	SERVICE PHONE <i>Jane</i>
PHONE <i>305-361-6341</i>	TYPE OF PROPERTY TO BE SERVICED <i>SF</i>		
DATE SERVICE BEGINS	EXPIRATION DATE	RENEWAL <input type="checkbox"/>	SERVICE TO BE PERFORMED <input type="checkbox"/> MONTHLY <input type="checkbox"/> QUARTERLY <input checked="" type="checkbox"/> OTHER <i>DAILY</i>

PESTS TO BE CONTROLLED:
*GENERAL HOUSE HOLD PEST
ONCE A YEAR PEST SERVICE*

SPECIAL INSTRUCTIONS:

TERMS AND CONDITIONS:
EXCLUDE TERMITE, ROOSTERS

SERVICE GUARANTEE: We agree to apply chemicals to control above-named pests in accordance with terms and conditions of this Service Agreement. All labor and materials will be furnished to provide the most efficient pest control and maximum safety required by federal, state and city regulations.

SERVICE RENEWAL: This agreement shall be for an initial period of one year, and will renew itself annually unless either party cancels this agreement by giving thirty days written notice before any expiration date.

ANNUAL AGREEMENT CHARGE \$ 35.00
INITIAL SERVICE CHARGE \$ _____
MONTHLY/QUARTERLY PAYMENTS \$ _____
\$ _____

BY COMPANY *[Signature]* DATE 10-2-09
(AUTHORIZED SIGNATURE)
FOR CUSTOMER *[Signature]* DATE 25
(AUTHORIZED SIGNATURE)

ELECTRONIC ALARMS, INC

JOB INVOICE

31834



12319 SW 133rd Court
Miami, FL 33186
Dade: 305-235-7440
Toll Free: 1-800-355-7440

Customer Order No.	Date
Order taken By	Date Promised

07/10/05
A.M.
P.M.

Bill to: *Becky Stanford.* Phone: *(305) 361-6344*
 Address: *30 Grand Bay Circle ESTATE* Technician: *Frank*
 City: *Key Biscayne, FL 33149.* Helper:
 Job Name and Location: Day Work
 Contract
 Extra

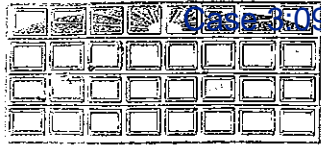
Description of work

Quantity	Description of Material Used	Price	Amount
	- Check of Telephone System.		
	- Fixing cable		
	- Reprogramming Phone System		
	- Install call ID.		450.00
	- Check of Alarm System.		
	Job Time: 11 hrs.		935.00.
	85 x hr.		
	paid check # 1998		

By acceptance of this invoicing the Buyer agrees to pay reasonable attorneys' fees in the event this account is turned over to an attorney for collection, including appellate proceedings and court costs. A late payment charge of 1 1/2 % per month (18% annually) will be charged on all invoices 30 days past due. I hereby acknowledge the satisfactory completion of the above described work.

SERVICE CALL	
SUB TOTAL	
SALES TAX	
TOTAL	1385.00.

Signature: *Becky Stanford* Date Completed: *10.6.05*



305-885-8088
 FAX: 305-885-1102

2165 N.W. 93 ST. / MIAMI, FL 33166
 SPECIALIST IN GARAGE DOORS AND AUTOMATIC OPENERS

EMERGENCY SERVICE

www.allamericandoor.com

WORK ORDER

ESTIMATOR P.C. NO.	ORDER TAKEN BY	INVOICE DATE	COMPLETED BY	INVOICE NO.
			TEKDD/D	

BILL TO:	JOB:
NAME	NAME
ADDRESS	ADDRESS
CITY STATE ZIP CODE	CITY STATE ZIP CODE
PERSON IN CHARGE	PERSON IN CHARGE
BUS. PHONE HOME PHONE	BUS. PHONE HOME PHONE

NO. DOORS	SERIES	WIDE	HIGH	TRACKS	NO. PANELS	DOOR	SPRING	RAMB	LIFT	MOTOR	FINISH
1	X7										
LIFT CLUSTER											
E/F/OS/D											
E/2005											

DESCRIPTION	AMOUNT
1 1/2" COIL SPRING (EXTENSION)	\$85.00
1 1/2" COIL SPRING (EXTENSION)	\$95.00
LABOR	
INSTALLATION <input type="checkbox"/>	
SERVICE <input type="checkbox"/>	
SUBTOTAL	
TAX	
TOTAL	
DEPOSIT	
BALANCE	\$185.00

I have read and agree to the terms and conditions of this contract. The seller retains to the above described until the purchase price therefor. IN THE EVENT THE SERVICES OF AN ATTORNEY ARE REQUIRED TO COLLECT PAYMENT OF THE PURCHASE PRICE, THE PURCHASER AGREES TO PAY INTEREST AT THE HIGHEST LEGAL RATE, PLUS REASONABLE ATTORNEY'S FEES FOR THOSE SERVICES RENDERED TO THE SELLER IN THE COLLECTION OF THE ABOVE SUM. The purchaser has read the above obligations as part of the condition of the purchase. Note this proposal may be withdrawn by us if not accepted within _____ days. ALL AMERICAN GARAGE DOORS INC. will not perform or be responsible for any connections or reinstatement of alarm equipment or any electrical work when installing a garage door or garage door opener.

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outline above.

Date of Acceptance: _____ Signature _____

INVOICE

Island Plumbing Co.

P.O. BOX 490984
 Key Biscayne, FL 33149
 Phone: (305) 361-2929
 Fax: (305) 361-9189
 CFC-044147

DATE JAN. 17 20 05
 WORKMAN Memo.
 TELEPHONE 361-6341
 FAX _____
 CELLPHONE _____

B
I
L
L
T
O
Mrs Stanford, Beki

J
O
B
S
I
T
E
GRAND Bay
38 GRAND BAY C
KEY BISCAYNE, FL 33149

Hours	JOB DESCRIPTION	Amount
Mon.	*MASTER BATHROOM.	
Tues.	- Ricket leaks from diverter.	
Wed.	- Everything else its ok at the moment	
Thurs.	- Shower may need regrouting on its base.	
Fri.	*GUEST BATHROOM. 1	
Sat.	- Ricket leaks from diverter.	
Sun.	- Caulking its needed behind faucet. "Back splash"	
Total	- Everything else its ok at this time.	
	*GUEST BATHROOM. 2:	
	- Tub draining slow.	
	- Caulking its needed on back splash.	
	*GUEST BATHROOM. 3	
	- Tub draining slow	
	- Caulking its needed on back splash.	
	*GUEST BATHROOM. 4 1st Floor.	
	- Caulking its needed on back splash.	
	* Everything else its ok at this time.	
	Estimate on work # 350	
	Total w/ck # 1753.	

Authorization to Perform Work: Customer authorizes and permits Island Plumbing Co. to perform plumbing and all ancillary work and supply all plumbing and ancillary materials to perform and complete the work described herein. Customer agrees to timely pay for said work and materials and that Customer has received, agrees to, and shall be bound by the Terms and Conditions contained on the front and back side of this Agreement. Customer further acknowledges that Island Plumbing Co. has commenced its work at the time set forth below. Additional travel charges may apply as set forth herein.

Acknowledgement of Completed Work: Customer acknowledges receipt of the work and materials described herein, their thorough inspection of the work and materials, and their complete satisfaction with same. Customer further agrees to timely pay for said work and materials and be bound by the Terms and Conditions contained on the front and back side of this Agreement. Customer shall pay all reasonable attorney's fees and costs, incurred by Island Plumbing Co. in collecting any outstanding amount due under this Agreement, or enforcing its rights hereunder, with or without suit.

Time In: _____ AM/PM Time Out: _____ AM/PM
 Sign: _____ Sign: _____
 Print: _____ Print: _____

Material	
Equipment	
Permit Fee's	
Service Plumber	68.00
Service Helpers	
Sub TOTAL	
Adjustment	30
TOTAL	68.00

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF TEXAS
DALLAS DIVISION

SECURITIES AND EXCHANGE COMMISSION

Plaintiff,

v.

STANFORD INTERNATIONAL BANK, LTD.,
STANFORD GROUP COMPANY,
STANFORD CAPITAL MANAGEMENT, LLC,
R. ALLEN STANFORD, JAMES M. DAVIS, and
LAURA PENDERGEST-HOLT,

Defendants.

§
§
§
§
§ CASE NO.: 3-09-CV-0298-N
§
§
§
§
§
§
§
§
§
§

NON-PARTY, REBECCA REEVES-STANFORD'S, AFFIDAVIT IN SUPPORT OF HER
ANSWER BRIEF IN RESPONSE TO THE RECEIVER, RALPH S. JANVEY'S,
MOTION FOR ORDER TO SHOW CAUSE WHY REBECCA REEVES-STANFORD
SHOULD NOT BE HELD IN CONTEMPT, OR IN THE ALTERNATIVE, MOTION TO
MODIFY "RECEIVERSHIP ORDERS"

STATE OF FLORIDA)
COUNTY OF BROWARD)

The undersigned Affiant being duly sworn before me, the undersigned authority, a Notary Public for the County and State hereinafter set forth, deposes and says:

1. My name is Rebecca Reeves-Stanford. I am over 21 years of age. I am competent to make this Affidavit and I have personal knowledge of the facts set forth below, and, such facts are true and correct.
2. I am a non-party in this matter and, upon being served with the Subpoena at issue, I consulted legal counsel, namely, John Priovolos, to provide representation to me in this matter.
3. I have two children fathered by R. Allen Stanford, namely, Rebecca Alexandra Stanford, age 17, and Robert Allen Stanford, Jr., age 16. I have raised my children all their lives, by providing care, sustenance, clothing, domestic duties, etc. On or about March of 2002, I purchased a home, in my name solely and, thereafter, I transferred my homestead exemption from my old home to this new home in August of 2005 (the property at issue in this case).



4. I did not and have not received any monetary gifts towards the purchase of that home without adequate consideration from R. Allen Stanford. I have not had any type of relationship with R. Allen Stanford, other then co-parenting the children since 2000. In terms of co-parenting, other then receiving support for the children, there was no other type of assistance. I have always provided for the care, welfare and emotional support of my children.

5. I always maintained the home paying for any and all taxes, maintenance, upkeep and day-to-day expenses of owning a home. I physically took care of the home without any assistance from R. Allen Stanford. R. Allen Stanford had no interest whatsoever in the home, nor did he ever claim an interest in the home.

6. The home was never in any other name but mine from the date of purchase. It was never even requested, suggested or opined that the home would be in any other name aside from my own.

7. At no time have the monies derived from the home, which to date are still protected by the Florida Constitution as Homestead Property, ever been "disbursed" or liquidated. The funds the receiver attributes to R. Allen Stanford are still in the same or substantially the same condition as when the home sold.

8. The Home was for sale prior to me being served with any subpoena, as I could not provide for the care and support of R. Allen Stanford's and my children. It was listed on or about March 16th, 2009 with Remax and Associates. There was no other reason to sell my home, but to provide for my children and their well being, as it was explained to me that due to the Constitutional Homestead Law, the home could not be taken from me.

9. I never felt or knew that I was violating a restraining order. I did not have knowledge that a restraining order specifically pertaining to me, was in effect, or that it would prevent me from selling my home.

FURTHER AFFIANT SAYETH NAUGHT:

Rebecca Reeves-Stanford
REBECCA REEVES-STANFORD

SWORN TO AND SUBSCRIBED before me this 27th day of August, 2009, appeared REBECCA REEVES-STANFORD, who is personally known to me and did take an oath.

[Signature]
Notary Public

