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FILED _____ LODGED _____
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 FEB 22 2010
 CLERK U.S. DISTRICT COURT
 WESTERN DISTRICT OF WASHINGTON AT TACOMA
 BY _____ DEPUTY

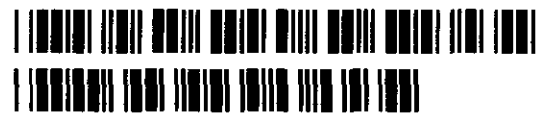
10 UNITED STATES DISTRICT COURT
 11 WESTERN DISTRICT OF WASHINGTON

12 ADVOCARE INTERNATIONAL, L.P., a)
 13 Texas limited partnership,) NO. 10MC-5001RBL
 14)
 15 Plaintiff/Judgment Creditor,) ~~PROPOSED~~
 16 vs.) ORDER FOR SUPPLEMENTAL
 17) PROCEEDINGS
 18 RICHARD PAUL SCHECKENBACH, et)
 19 al.,)
 20)
 21 Defendants/Judgment Debtors.)

22 Good cause appearing, now, therefore, it is hereby

23 ORDERED, that RICHARD PAUL SCHECKENBACH appear at Schwabe
 24 Williamson & Wyatt, 1420 5th Ave., Ste. 3010, Seattle, WA 98101, to be sworn in by the
 25 Court Reporter on the 1st day of March 2010, at 10:00 a.m., to attend the deposition,
 26 before a member of the firm of Naegeli Reporting, Court Reporters and Notaries Public,
 27 and if not completed that day, the taking of the same will be continued thereafter from
 28 day to day and from time to time until fully taken, regarding any property they may have
 29 or knowledge thereof as set forth herein and attached as Exhibit A, and to bring a
 30 complete set of documents/records which support each area of inquiry set forth therein.

31 It is further:



10-MC-05001-ORD

ORDER FOR SUPPLEMENTAL PROCEEDINGS: 1

1 ORDERED, that CAROL GILLETTE appear at Schwabe Williamson & Wyatt,
2 1420 5th Ave., Ste. 3010, Seattle, WA 98101, to be sworn in by the Court Reporter on
3 the 2nd day of March 2010, at 10:00 a.m., to attend the deposition, before a member of
4 the firm of Naegeli Reporting, Court Reporters and Notaries Public, and if not completed
5 that day, the taking of the same will be continued thereafter from day to day and from
6 time to time until fully taken, regarding any property they may have or knowledge
7 thereof, as set forth herein and attached as Exhibit A, and to bring a complete set of
8 documents/records which support each area of inquiry set forth therein. It is further:

9
10 ORDERED, RICHARD PAUL SCHECKENBACH and CAROL GILLETTE
11 shall be deposed separately and each shall be excluded from the deposition of the other.
12 It is further

13 **ORDERED, RICHARD PAUL SCHECKENBACH and CAROL GILLETTE**
14 **are required to produce to the office of counsel for Plaintiff/Judgment Creditor on**
15 **or before February 22, 2010, the following records:**
16

17 1. All tax returns for the past ten (10) years for RICHARD PAUL
18 SCHECKENBACH and CAROL GILLETTE, including all schedules and amendments.

19
20 2. All financial statements prepared during the past ten (10) years for
21 RICHARD PAUL SCHECKENBACH and CAROL GILLETTE.

22 3. All records and information for the past ten (10) years concerning and/or
23 relating to all bank accounts, line(s) of credit, safe deposit boxes, loans and gifts
24 (including bank statements) which RICHARD PAUL SCHECKENBACH and CAROL
25 GILLETTE own, have access to, and/or maintain an ownership interest in, **including**
26 **without limitation all accounts with First Tech Credit Union.**

27
28 4. All vehicle and boat registrations and/or certificates of title concerning
29 vehicles and boats which RICHARD PAUL SCHECKENBACH and CAROL
30 GILLETTE own, have, or claim an interest.
31

1 5. All documents concerning any real property owned by RICHARD PAUL
2 SCHECKENBACH and CAROL GILLETTE or debt which RICHARD PAUL
3 SCHECKENBACH and CAROL GILLETTE maintain any interest.
4

5 6. All documents, records, agreements, correspondence, etc. in any way
6 related to any business(es) owned or operated by RICHARD PAUL SCHECKENBACH
7 and CAROL GILLETTE in which RICHARD PAUL SCHECKENBACH and CAROL
8 GILLETTE maintain any interest including without limitation, HerbAsia Corporation,
9 Ascential Bioscience, LLC, Ravensky, LLC East-West Botanicals, LLC, Ilcervello
10 Properties, LLC, and R-Squared Nutrition, Inc.

11 7. All business records and corporate documents concerning Richard Paul
12 Scheckenbach; Carol Gillette; HerbAsia Corporation, Ascential Bioscience, LLC,
13 Ravensky, LLC East-West Botanicals, LLC, Ilcervello Properties, LLC, and R-Squared
14 Nutrition, Inc., including, but not limited to, the following:
15

- 16 a. Articles of Incorporation/Certificates of Formation;
- 17 b. Bylaws;
- 18 c. Operating Agreements;
- 19 d. Meeting Minutes for the past 10 years; and
- 20 e. All other documents and corporate records for past 10 years.

21 8. All records and documents in any way related to any gift and/or loan to Tai
22 Brown and/or Kelly Bottolfson-Brown directly or indirectly from Richard Paul
23 Scheckenbach; Carol Gillette; HerbAsia Corporation, Ascential Bioscience, LLC,
24 Ravensky, LLC East-West Botanicals, LLC, Ilcervello Properties, LLC, and R-Squared
25 Nutrition, Inc.
26
27
28
29
30
31

SUPPLEMENTAL PROCEEDING QUESTIONNAIRE

Debtor: Richard Paul Scheckenbach

aka: _____

DOB: _____ SS#: _____

DL#: _____

Debtor:

aka: _____

DOB: _____ SS#: _____

DL#: _____

Have you entered into separate or community property agreements with your spouse?

Date: _____

County, if filed: _____

Have you or your spouse declared bankruptcy within the last 7 years:

Court: _____

Chapter: _____

Date Filed: _____

Resolution: _____

REAL PROPERTY

Residence address: _____

Buying? _____

Mortgage: _____

Deed of Trust: _____

Land Sale Contract: _____

Other encumbrances: _____

Liens: _____

Judgments: _____

Tax appraisal: _____

Other appraisals: _____

Amount owed: _____

Purchase price: _____

Rent from other residents in the house: _____

Other real property (including vacant lots): _____

Buying? _____

Mortgage: _____

Deed of Trust: _____

Land Sale Contract: _____

Other encumbrances: _____

Liens: _____

Judgments: _____

Tax appraisal: _____

Other appraisals: _____

Amount owed: _____

Purchase price: _____

Rents received and from whom: _____

Declaration of Homestead

County: _____

Date: _____

Abandoned: _____

Are you selling property to anyone now? _____

EMPLOYMENT

Self-employed:

Name and address of business: _____

Tax ID#: _____

How paid: _____

When paid: _____

Amount: _____

Names and addresses of customers: _____

Employed:

Name and address of employer: _____

Salary or hourly amounts: _____

When paid: _____

Spouse

Self-employed:

Name and address of business: _____

Tax ID#: _____

How paid: _____

When paid: _____

Amount: _____

Names and addresses of customers: _____

Employed:

Name and address of employer: _____

Salary or hourly amounts: _____

When paid: _____

BANK ACCOUNTS

Personal

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____
CD:	_____	_____	\$ _____

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____

Corporate, Partnership, Joint Venture, or Massachusetts Trust

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____

BENEFICIARY OF TRUST

Type of trust: _____ Spendthrift? _____

Name and address of trustee: _____

Payments per month: _____

Trust terminates: _____

VEHICLES

Automobiles, trucks, motorcycles, RVs, boats, airplanes

Make and model: _____	Make and model: _____
Year: _____	Year: _____
Condition: _____	Condition: _____
License plate: _____	License plate: _____
VIN: _____	VIN: _____
Amount owed: _____	Amount owed: _____
To whom: _____	To whom: _____
Make and model: _____	Make and model: _____
Year: _____	Year: _____
Condition: _____	Condition: _____
License plate: _____	License plate: _____
VIN: _____	VIN: _____
Amount owed: _____	Amount owed: _____

To whom: _____

To whom: _____

Heavy machinery

Make and model: _____

Make and model: _____

Year: _____

Year: _____

Condition: _____

Condition: _____

License plate: _____

License plate: _____

VIN: _____

VIN: _____

Amount owed: _____

Amount owed: _____

To whom: _____

To whom: _____

INTEREST IN BUSINESS

Sole proprietorship: _____

Partnership: _____

General: _____

Name and address of other partner(s): _____

Limited: _____

Name and address of general partner(s): _____

Corporation:

Closely held: _____

SubS: _____

Value of Stock: _____

Percentage owned: _____

Joint Venture: _____

Massachusetts Trust: _____

Equipment: _____

Tools: _____

Inventory: _____

Jewelry: _____

Computer: _____

Collections

Coins: _____

Stamps: _____

Antiques: _____

Baseball cards: _____

Football cards: _____

Rare books: _____

Artwork (other than prints): _____

Dolls: _____

Guns: _____

Livestock or other animals: _____

Accounts Receivable:

IOUs: _____

Promissory Notes: _____

Lawsuits and/or judgments: _____

Other claims: _____

Life Insurance:

Term: _____

Whole: _____

Cash surrender value: _____

Do you have a safe deposit box?

Contents: _____

Location and number: _____

Retirement and pension plans: _____

What other income of any nature are you receiving? _____

To whom do you owe money?

Judgment or claim: _____

Judgment or claim: _____

Creditor: _____

Creditor: _____

Amount: _____

Amount: _____

Secured: _____

Secured: _____

Judgment or claim: _____

Judgment of claim: _____

Creditor: _____

Creditor: _____

Amount: _____

Amount: _____

Secured: _____

Secured: _____

Do you have any real or personal property held in another person's name? _____

Miscellaneous:

SUPPLEMENTAL PROCEEDING QUESTIONNAIRE

Debtor: Carol Gillette

aka: _____

DOB: _____ SS#: _____

DL#: _____

Debtor:

aka: _____

DOB: _____ SS#: _____

DL#: _____

Have you entered into separate or community property agreements with your spouse?

Date: _____

County, if filed: _____

Have you or your spouse declared bankruptcy within the last 7 years:

Court: _____

Chapter: _____

Date Filed: _____

Resolution: _____

REAL PROPERTY

Residence address: _____

Buying? _____

Mortgage: _____

Deed of Trust: _____

Land Sale Contract: _____

Other encumbrances: _____

Liens: _____

Judgments: _____

Tax appraisal: _____

Other appraisals: _____

Amount owed: _____

Purchase price: _____

Rent from other residents in the house: _____

Other real property (including vacant lots): _____

Buying? _____

Mortgage: _____

Deed of Trust: _____

Land Sale Contract: _____

Other encumbrances: _____

Liens: _____

Judgments: _____

Tax appraisal: _____

Other appraisals: _____

Amount owed: _____

Purchase price: _____

Rents received and from whom: _____

Declaration of Homestead

County: _____

Date: _____

Abandoned: _____

Are you selling property to anyone now? _____

EMPLOYMENT

Self-employed:

Name and address of business: _____

Tax ID#: _____

How paid: _____

When paid: _____

Amount: _____

Names and addresses of customers: _____

Employed:

Name and address of employer: _____

Salary or hourly amounts: _____

When paid: _____

Spouse

Self-employed:

Name and address of business: _____

Tax ID#: _____

How paid: _____

When paid: _____

Amount: _____

Names and addresses of customers: _____

Employed:

Name and address of employer: _____

Salary or hourly amounts: _____

When paid: _____

BANK ACCOUNTS

Personal

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
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IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____
CD:	_____	_____	\$ _____

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____

Corporate, Partnership, Joint Venture, or Massachusetts Trust

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____

	<u>Institution and Branch</u>	<u>Account Number</u>	<u>Amount</u>
Checking:	_____	_____	\$ _____
Savings:	_____	_____	\$ _____
IRA:	_____	_____	\$ _____
Keogh:	_____	_____	\$ _____

BENEFICIARY OF TRUST

Type of trust: _____ Spendthrift? _____

Name and address of trustee: _____

Payments per month: _____

Trust terminates: _____

VEHICLES

Automobiles, trucks, motorcycles, RVs, boats, airplanes

Make and model: _____	Make and model: _____
Year: _____	Year: _____
Condition: _____	Condition: _____
License plate: _____	License plate: _____
VIN: _____	VIN: _____
Amount owed: _____	Amount owed: _____
To whom: _____	To whom: _____
Make and model: _____	Make and model: _____
Year: _____	Year: _____
Condition: _____	Condition: _____
License plate: _____	License plate: _____
VIN: _____	VIN: _____
Amount owed: _____	Amount owed: _____

To whom: _____

To whom: _____

Heavy machinery

Make and model: _____

Make and model: _____

Year: _____

Year: _____

Condition: _____

Condition: _____

License plate: _____

License plate: _____

VIN: _____

VIN: _____

Amount owed: _____

Amount owed: _____

To whom: _____

To whom: _____

INTEREST IN BUSINESS

Sole proprietorship: _____

Partnership: _____

General: _____

Name and address of other partner(s): _____

Limited: _____

Name and address of general partner(s): _____

Corporation:

Closely held: _____

SubS: _____

Value of Stock: _____

Percentage owned: _____

Joint Venture: _____

Massachusetts Trust: _____

Equipment: _____

Tools: _____

Inventory: _____

Jewelry: _____

Computer: _____

Collections

Coins: _____

Stamps: _____

Antiques: _____

Baseball cards: _____

Football cards: _____

Rare books: _____

Artwork (other than prints): _____

Dolls: _____

Guns: _____

Livestock or other animals: _____

Accounts Receivable:

IOUs: _____

Promissory Notes: _____

Lawsuits and/or judgments: _____

Other claims: _____

Life Insurance:

Term: _____

Whole: _____

Cash surrender value: _____

Do you have a safe deposit box?

Contents: _____

Location and number: _____

Retirement and pension plans: _____

What other income of any nature are you receiving? _____

To whom do you owe money?

Judgment or claim: _____

Judgment or claim: _____

Creditor: _____

Creditor: _____

Amount: _____

Amount: _____

Secured: _____

Secured: _____

Judgment or claim: _____

Judgment of claim: _____

Creditor: _____

Creditor: _____

Amount: _____

Amount: _____

Secured: _____

Secured: _____

Do you have any real or personal property held in another person's name? _____

Miscellaneous:

