

CASE NAME:  
**FIBERTOWER NETWORK SERVICES CORP.**

CASE NUMBER:  
**12-44027-DML-11**

UNITED STATES BANKRUPTCY COURT

NORTHERN AND EASTERN DISTRICTS

DALLAS AND TYLER DIVISIONS

FOR POST CONFIRMATION USE

QUARTERLY OPERATING REPORT

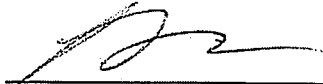
AND

QUARTERLY BANK RECONCILEMENT

In accordance with Title 28, Section 1746, of the United States Code, I declare under penalty of perjury that I have examined the attached Post Confirmation Quarterly Operating Report, and the Post Confirmation Quarterly Bank Reconciliation and, to the best of my knowledge, these documents are true, correct and complete. Declaration of the preparer (other than responsible party), is based on all information of which preparer has any knowledge.

RESPONSIBLE PARTY:

Original Signature of Responsible Party



Printed Name of Responsible Party

Peter Kravitz

Title

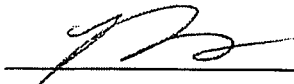
Litigation Trustee

Date

10/13/14

PREPARER:

Original Signature of Preparer



Printed Name of Preparer

Peter Kravitz

Title

Litigation Trustee

Date

10/13/14

POST CONFIRMATION  
 QUARTERLY OPERATING REPORT

CASE NAME:  
**FIBERTOWER NETWORK SERVICES CORP**

CASE NUMBER:  
**12-44027-DML-11**

QUARTER ENDING:

1 BEGINNING OF QUARTER CASH BALANCE:

\$50,000.00

CASH RECEIPTS:

CASH RECEIPTS DURING CURRENT QUARTER:

- (a). Cash receipts from business operations
- (b). Cash receipts from loan proceeds
- (c). Cash receipts from contributed capital
- (d). Cash receipts from tax refunds
- (e). Cash receipts from other sources

+  
 +  
 +  
 +  
 +

2 TOTAL CASH RECEIPTS

= \$50,000.00

CASH DISBURSEMENTS:

(A). PAYMENTS MADE UNDER THE PLAN:

- (1). Administrative
- (2). Secured Creditors
- (3). Priority Creditors
- (4). Unsecured Creditors
- (5). Additional Plan Payments

+  
 +  
 +  
 +  
 +

(B). OTHER PAYMENTS MADE THIS QUARTER:

- (1). General Business
- (2). Other Disbursements

+  
 +

3 TOTAL DISBURSEMENTS THIS QUARTER

\$0.00

4 CASH BALANCE END OF QUARTER

= \$50,000.00

POST CONFIRMATION  
 QUARTERLY BANK RECONCILEMENT

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The reorganized debtor must complete the reconciliation below for each bank account, including all general, payroll and tax accounts, as well as all savings and investment accounts, money market accounts, certificates of deposits, governmental obligations, etc. Accounts with restricted funds should be identified by placing an asterisk next to the account number. Attach additional sheets for each bank reconciliation if necessary.

QUARTER ENDING:

Bank Reconciliations	Account #1	Account #2	Account #3	Account #4	TOTAL
A. Bank:	Banc of Cal				
B. Account Number					
C. Purpose (Type)	Checking				
1 Balance Per Bank Statement	\$50,000.00				\$50,000.00
2 Add: Total Deposits Not Credited	\$0.00				+ \$0.00
3 Subtract: Outstanding Checks	\$0.00				\$0.00
4 Other Reconciling Items	\$0.00				\$0.00
5 Month End Balance Per Books	\$50,000.00				= \$50,000.00
6 Number of Last Check Written	n/a				
7 Cash: Currency on Hand					+ \$0.00
8 Total Cash - End Of Month	\$50,000.00				= \$50,000.00

CASH IN:

INVESTMENT ACCOUNTS

Bank, Account Name & Number	Date of Purchase	Type of Instrument	Value
9			+
10			+
11			+
12			+
13 Total Cash Investments			= \$0.00
14 TOTAL CASH	LINE 8 - PLUS LINE 13 = LINE 14 ****		\$50,000.00

\*\*\*\* Must tie to Line 4, Quarterly Operating Report

QUESTIONNAIRE		
	YES*	NO
1. Have any assets been sold or transferred outside the normal course of business, or outside the Plan of Reorganization during this reporting period?		X
2. Are any post-confirmation sales or payroll taxes past due?		X
3. Are any amounts owed to post-confirmation creditors/vendors over 90 days delinquent?		X
4. Is the Debtor current on all post-confirmation plan payments?	X	

\*If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

INSURANCE INFORMATION		
	YES	NO*
1. Are real and personal property, vehicle/auto, general liability, fire, theft, worker's compensation, and other necessary insurance coverages in effect?	N/A	
2. Are all premium payments current?	N/A	

\*If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE			
TYPE of POLICY and CARRIER	Period of Coverage	Payment Amount and Frequency	Delinquency Amount

DESCRIBE PERTINENT DEVELOPMENTS, EVENTS, AND MATTERS DURING THIS REPORTING PERIOD:

Estimated Date of Filing the Application for Final Decree: 2015

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief.

This 14th day of October 20 14.

  
Debtor's Signature