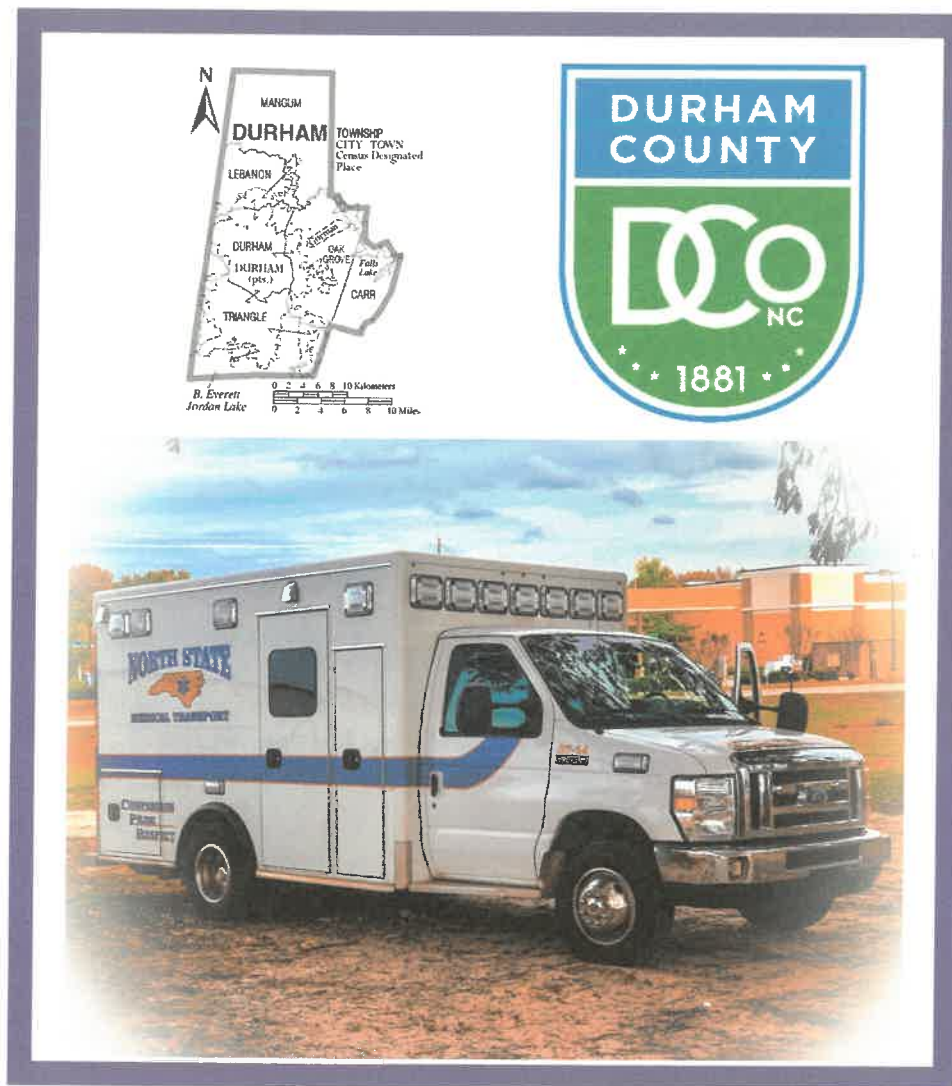


Durham County



Non-Emergent Ambulance Franchise Application North State Medical Transport

Section 1: Name & Address of Applicant

North State Investment Group d/b/a North State Medical Transport

1240 Corporation Parkway, Raleigh, NC 27610

Section 2: List of Ambulances

Unit	Year	Make	Model	VIN	NCOEMS PERMIT #	Level of Service
416	2016	Ford	E-350	1FDWE3FS0GDC27578	NC000583	ALS/BLS
319	2019	Ford	E-350	1FDWE3FS0JDC23229	NC004763	ALS/BLS
516	2016	Ford	E-350	1FDWE3FS2GDC27582	NC000584	ALS/BLS
713	2013	Ford	E-350	1FDWE3FS9DDA74890	NC001692	ALS/BLS
718	2018	Ford	E-350	1FDXE4FS5JDC28291	NC004136	ALS/BLS
916	2016	Chevrolet	C3500	1GB3GRCG1G1229656	NC001613	ALS/BLS
816	2016	Chevrolet	C3500	1GB3RCG2G1230508	NC001612	BLS
715	2015	Ford	E-350	1FDWE3FS5FDA29187	NC004620	BLS
1117	2017	Ford	Transit T-250	1FDYR2CMOHKA84769	NC003758	BLS
719	2019	Ford	Transit T-250	1FDYR2CCM2KKA63087	NC004580	BLS
218	2018	Ford	Transit T-250	1FDYR2CM3HKB16078	NC003822	BLS
517	2017	Ford	Transit T-250	1FDYR2CM5HKA57311	NC003192	BLS
417	2017	Ford	Transit T-250	1FDYR2CM5HKA62962	NC004567	BLS
818	2018	Ford	Transit T-250	1FDYR2CM7JKA57977	NC004137	BLS
619	2019	Ford	Transit T-250	1FDYR2CM8KKA63093	NC004581	BLS
613	2013	Mercedes	Sprinter 2500	WD3PE7CC0D5771527	NC003206	BLS
1214	2014	Mercedes	Sprinter 3500	WDAPF3CCF9591440	NC003759	BLS
217	2017	Mercedes	Sprinter 3500	WDAPF3DC1F96907034	NC002904	BLS
814	2014	Mercedes	Sprinter 3500	WDAPF3DC8E9562916	NC002400	BLS
1019	2019	Ford	E-350	1FDWE3FS4KDC41430	Pending Inspection	BLS/ALS

Section 3: Ability to provide non-emergency ambulance services in Durham County on a 24-hour day, 7 days per week basis

North State Medical Transport (NSMT) offers both Basic Life Support (BLS) and Advanced Life Support (ALS) level of non-emergency transports in the counties that we are franchised in. We are equipped and ready to assist Durham County and all healthcare facilities within the county, with services including BLS and ALS transports.

Our BLS units are capable of handling hospital discharges from both the inpatient floors, as well as the Emergency Department, to various rehab facilities of residential locations that a patient requires transportation to. On top of this, NSMT routinely handles BLS level transports for medical appointments, transports to and from skilled nursing facilities, as well as transports associated with hospice services.

In addition to our BLS units, NSMT maintains several 24 hour ALS level units staffed with an EMT-Paramedic and EMT-Basic. Our ALS level units are capable of treating patients that require breathing assistance with a ventilator, IV medications, hemodynamic monitoring and cardiac telemetry monitoring. These units typically transfer patients between hospitals for patients requiring higher level of care, as well transports to long term care facilities. North State operates up to four 24 hour units staffed at an ALS level, with up to 15 BLS units and 2 ALS peak units staffed throughout the day to meet the transport needs of our franchised counties.

Section 4: Net worth of Applicant

When subtracting North State Medical Transport's total assets and total liabilities, North State Medical Transport estimates the net worth is approximately \$1.2 million. For more detailed information please refer to Section 9 for detailed financial audits.

Section 5: List of unsatisfied judgments of record against the Applicant

To this date, North State Medical Transport has no record of unsatisfied judgments.

Section 6: List of all liens, mortgages or other encumbrances on ambulances to be used by the Applicant



Date: 11/18/19

HomeTrust Bank
4140 ParkLake Ave, Ste 610
Raleigh, NC 27612

To: Carlie Coward
 Director of Marketing & Development
 North State Medical Transport

Below is a list of all vehicle debt held at HomeTrust Bank to include date originated, originated balance, outstanding balance on the notes as of 6/30/19 and collateral info. All loans have been paid as agreed.

NSMT Inc								
HTB Note Last 4 #	Orig Date	Original Balance	Balance as of 6/30/19	Collateral				
3373	12/15/2014	\$ 76,000	PAID OFF 7/20/18	2015 MB Ambulance				
3852	01/21/2015	\$ 73,000	\$ 9,340	2015 MB Ambulance				
4702	03/18/2015	\$ -	PAID OFF 3/18/17	2011 Ford Flex and Ford Transit				
4710	03/18/2015	\$ 46,000	PAID OFF 5/23/19	2016 Acura MDX				
7341	07/16/2015	\$ 49,611	\$ 16,872	2015 Ford E-350				
8273	11/02/2015	\$ 58,452	\$ 21,964	2015 MB Ambulance				
9545	01/26/2016	\$ 54,631	PAID OFF 8/24/18	2013 Freightliner Sprinter				
9552	01/26/2016	\$ 94,598	PAID OFF 6/13/19	2014 MB Ambulance, 2014 Chevy Ambulance, 2014 Ford Ambulance				
519	03/31/2016	\$ 69,434	\$ 13,654	2016 Ford E350 Ambulance				
527	03/31/2016	\$ 69,434	\$ 15,409	2016 Ford E350 Ambulance				
3117	08/30/2016	\$ 70,500	\$ 23,269	2016 Chevy Ambulance				
3273	09/08/2016	\$ 73,800	\$ 22,652	2016 Chevy Ambulance				
4529	11/30/2016	\$ 68,350	PAID OFF 11/20/18	2016 Chevy Ambulance				
4958	02/23/2017	\$ 68,350	\$ 26,276	2015 MB Ambulance				
138	07/12/2017	\$ 55,000	\$ 29,898	2017 Ford Ambulance				
146	07/12/2017	\$ 65,000	\$ 35,335	2017 Ford Ambulance				
2597	10/05/2017	\$ 30,000	\$ 20,682	2018 Volkswagen				
3736	01/05/2018	\$ 64,884	\$ 43,253	2017 Ford Transit				
5194	03/14/2018	\$ 63,709	\$ 45,107	2017 Ford Transit				
9022	08/03/2018	\$ 110,434	\$ 93,908	2018 Ford Ambulance				
9469	08/28/2018	\$ 55,319	\$ 50,425	2018 Ford II Ambulance				
3677	03/18/2019	\$ 95,520	\$ 91,278	2018 Ford E-350				
5615	05/28/2019	\$ 43,217	\$ 42,576	2019 Acura RDS				
5631	06/17/2019	\$ 64,474	\$ 64,474	2019 Ford Transit				
5649	06/17/2019	\$ 64,474	\$ 64,474	2019 Ford Transit				
9518	10/31/2019	\$ 89,176		2019 Ford E350 Medix				

If you have any questions or need further assistance, please contact me at 919-334-5683.

Regards,

HomeTrust Bank

Justin Dunn

Justin Dunn
 Senior Vice President
 919-334-5683

Section 7: Criminal court records

(TYPE OR PRINT IN BLACK INK)

STATE OF NORTH CAROLINA

FRANKLIN

County

In The General Court Of Justice
Before The Clerk

IN THE MATTER OF

Name(s) By Which Individual To Be Searched May Be Known
STUART DOUGLAS COWARD IV

CRIMINAL RECORD SEARCH

G.S. 7A-109, -308(a)(17), -343(3)

☐ For DMV Hearing

REQUEST FOR CERTIFIED CRIMINAL RECORD SEARCH

I request that the Clerk of Superior Court conduct a search of the official records in the courts of the county named above and certify the results of that search for the name(s) listed above. In making this request I understand and acknowledge that:

1. **THE CLERK WILL SEARCH THE RECORDS FOR ONLY THE COUNTY NAMED ABOVE. THIS IS NOT A STATEWIDE RECORD SEARCH.**

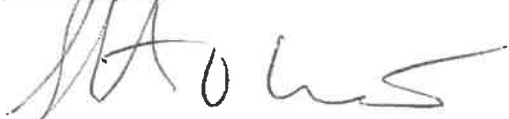
NOTE TO REQUESTOR: No court official in North Carolina can provide a certified, statewide record search. For searches on your own record, you can obtain a fingerprint-based statewide search from the State Bureau of Investigation.

2. I am requesting a search of (check all that apply) ☒ criminal records. ☒ infraction records.
NOTE TO REQUESTOR: Infractions in North Carolina are non-criminal violations of the law. A finding of responsibility for an infraction is not a conviction of a crime. A search for a defendant's complete record requires a search for both, because many categories of offenses like motor vehicle offenses include both criminal offenses and infractions. But if you are interested only in records of criminal offenses, a search for infractions is not necessary. Note that electronic infraction records are purged five (5) years after final disposition.
3. Juvenile records will not be provided in the results of a criminal record search. Juvenile records in North Carolina are confidential, so the Clerk cannot disclose whether or not any person has such a record.
4. The name(s) listed above are all the names by which, to my knowledge, the individual for whom I am requesting this search may be known.
5. The Clerk will search for records under all those names, but only for records under those names.
6. Court records are indexed by name only and not by any other identifying characteristics.
7. The fact that no criminal record is found under the name(s) listed above does not mean that the individual does not have a record in this county. The individual may have a record under another name, or records may exist that are not subject to disclosure, such as records sealed by the court or warrants for arrest that are not yet returned to the Clerk's office.
8. The fact that a criminal record is found under one or more of those names does not mean that the record is a record for the individual for whom I am requesting this search; the record may be that of another individual with the same or a similar name.
9. I am solely responsible for any interpretation and use I make of the results of this search and I understand the Clerk is not responsible for my interpretation or use of the results.

Name And Address Of Requestor (Including City, State and Zip Code)

STUART DOUGLAS COWARD, IV
8729 NC HWY 39 S
ZEBULON, NC 27597

Signature Of Requestor



CERTIFICATION

NOTE TO CLERK: If request is for a DMV Hearing, search both criminal and infraction records, regardless of the options selected in No. 2, above. This is to certify that I have searched the indices to (check all that apply) ☒ criminal records ☒ infractions in this office from

1980 to the present and

☐ I have found that no record was indexed by the name(s) given above.

☒ I have found the following excerpt(s) from the public records indexed by the name(s) given above as appears in the attached 1 page(s).

☒ This search is limited as follows: FRANKLIN COUNTY ONLY

Some automated system information code definitions are included on the back of this form to help you understand the record(s) that may be attached to this form.

Not Valid Without The
Clerk Of Superior Court's Raised Seal
On Each Page

Date Of Search

08/26/2019

Signature

☐ Deputy CSC ☒ Assistant CSC ☐ Clerk Of Superior Court

NOTE: "Any person who without lawful authority intentionally ... alters or changes any ... official case record is guilty of a Class H felony."
G.S. 14-221.2.

(Over)

340 FRANKLIN ATTENTION - USE PF3 FOR ARCHIVES
082619 CRIMINAL CHECK- PENDING--DISPOSED--MOTOR V.--CONVICTED
CRITERIA- NAME: COWARD,STUART? R=RACE: S=SEX: DOB:

COWARD,STUART,DOUGLAS,IV RT 5,BOX 410 S=M R=W DOB=07051952 81CR 000259
OF:011181 (T) IMPROPER PASSING WAIVED 011581 CR
FINE/COSTS\$ 37.00 REST\$.00 SENT: - TYPE: PROB:NONE PAID

|OF:OFFENSE DATE|DOB=BIRTH| (M) MISD| (F) FELONY| (T) TRAFFIC| PF3-ARCHIVE *ARC*



(TYPE OR PRINT IN BLACK INK)

STATE OF NORTH CAROLINA

BEAUFORT County

In The General Court Of Justice
Before The Clerk

IN THE MATTER OF

Name(s) By Which Individual To Be Searched May Be Known
RICHARD GLENN HARDIN

CRIMINAL RECORD SEARCH

G.S. 7A-109, -308(a)(17), -343(3)

☐ For DMV Hearing

REQUEST FOR CERTIFIED CRIMINAL RECORD SEARCH

I request that the Clerk of Superior Court conduct a search of the official records in the courts of the county named above and certify the results of that search for the name(s) listed above. In making this request I understand and acknowledge that:

1. **THE CLERK WILL SEARCH THE RECORDS FOR ONLY THE COUNTY NAMED ABOVE. THIS IS NOT A STATEWIDE RECORD SEARCH.**
NOTE TO REQUESTOR: No court official in North Carolina can provide a certified, statewide record search. For searches on your own record, you can obtain a fingerprint-based statewide search from the State Bureau of Investigation.
2. I am requesting a search of (check all that apply) ☒ criminal records. ☒ infraction records.
NOTE TO REQUESTOR: Infractions in North Carolina are non-criminal violations of the law. A finding of responsibility for an infraction is not a conviction of a crime. A search for a defendant's complete record requires a search for both, because many categories of offenses like motor vehicle offenses include both criminal offenses and infractions. But if you are interested only in records of criminal offenses, a search for infractions is not necessary. Note that electronic infraction records are purged five (5) years after final disposition.
3. Juvenile records will not be provided in the results of a criminal record search. Juvenile records in North Carolina are confidential, so the Clerk cannot disclose whether or not any person has such a record.
4. The name(s) listed above are all the names by which, to my knowledge, the individual for whom I am requesting this search may be known.
5. The Clerk will search for records under all those names, but only for records under those names.
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8. The fact that a criminal record is found under one or more of those names does not mean that the record is a record for the individual for whom I am requesting this search; the record may be that of another individual with the same or a similar name.
9. I am solely responsible for any interpretation and use I make of the results of this search and I understand the Clerk is not responsible for my interpretation or use of the results.

Name And Address Of Requestor (Including City, State and Zip Code)
RICHARD GLENN HARDIN

Signature Of Requestor



CERTIFICATION

NOTE TO CLERK: If request is for a DMV Hearing, search both criminal and infraction records, regardless of the options selected in No. 2, above. This is to certify that I have searched the indices to (check all that apply) ☒ criminal records ☒ infractions in this office from

MAY 1987 to the present and

- ☒ I have found that no record was indexed by the name(s) given above.
☐ I have found the following excerpt(s) from the public records indexed by the name(s) given above as appears in the attached _____ page(s).

☒ This search is limited as follows: BEAUFORT COUNTY ONLY

Some automated system information code definitions are included on the back of this form to help you understand the record(s) that may be attached to this form.

Not Valid Without The
Clerk Of Superior Court's Raised Seal
On Each Page

Date Of Search

08/22/2019

Signature

☒ Deputy CSC ☐ Assistant CSC ☐ Clerk Of Superior Court

NOTE: "Any person who without lawful authority intentionally ... alters or changes any ... official case record is guilty of a Class H felony."
G.S. 14-221.2.

(Over)

(TYPE OR PRINT IN BLACK INK)

STATE OF NORTH CAROLINA

FRANKLIN

County

In The General Court Of Justice
Before The Clerk

IN THE MATTER OF

Name(s) By Which Individual To Be Searched May Be Known

BRYAN EVERETTE PERRY

CRIMINAL RECORD SEARCH

G.S. 7A-109, -308(a)(17), -343(3)

☐ For DMV Hearing

REQUEST FOR CERTIFIED CRIMINAL RECORD SEARCH

I request that the Clerk of Superior Court conduct a search of the official records in the courts of the county named above and certify the results of that search for the name(s) listed above. In making this request I understand and acknowledge that:

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2. I am requesting a search of (check all that apply) ☒ criminal records. ☒ infraction records.

NOTE TO REQUESTOR: Infractions in North Carolina are non-criminal violations of the law. A finding of responsibility for an infraction is not a conviction of a crime. A search for a defendant's complete record requires a search for both, because many categories of offenses like motor vehicle offenses include both criminal offenses and infractions. But if you are interested only in records of criminal offenses, a search for infractions is not necessary. Note that electronic infraction records are purged five (5) years after final disposition.

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8. The fact that a criminal record is found under one or more of those names does not mean that the record is a record for the individual for whom I am requesting this search; the record may be that of another individual with the same or a similar name.
9. I am solely responsible for any interpretation and use I make of the results of this search and I understand the Clerk is not responsible for my interpretation or use of the results.

Name And Address Of Requestor (Including City, State And Zip Code)

BRYAN EVERETTE PERRY
768 STALLINGS RD
ZEBULON

NC 27597

Signature Of Requestor



CERTIFICATION

NOTE TO CLERK: If request is for a DMV Hearing, search both criminal and infraction records, regardless of the options selected in No. 2, above. This is to certify that I have searched the indices to (check all that apply) ☒ criminal records ☒ infractions in this office from

1980 to the present and

☐ I have found that no record was indexed by the name(s) given above.

☒ I have found the following excerpt(s) from the public records indexed by the name(s) given above as appears in the attached 5 page(s).

☐ This search is limited as follows:

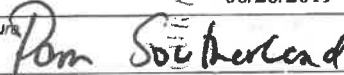
Some automated system information code definitions are included on the back of this form to help you understand the record(s) that may be attached to this form.

Not Valid Without The
Clerk Of Superior Court's Raised Seal
On Each Page

Date Of Search

08/28/2019

Signature



☒ Deputy CSC

☐ Assistant CSC

☐ Clerk Of Superior Court

NOTE: "Any person who without lawful authority intentionally ... alters or changes any ... official case record is guilty of a Class H felony." G.S. 14-221.2.

(Over)

340 FRANKLIN ICA INQUIRY 01 92CR 000732 FILM:
DISPOSED R S DOB/AGE CR FILING DATE: 021292
CITATION W M 08011966 DL#: 4774036 NC
PERRY, BRYAN, E CIT#: 3602820 TRIAL DATE: 022492
RT 5 BOX 623 CSLR: CSLRC: AM
ZEBULON NC DEF ATTY: TYP: VRA:
CHG/ARRN OFFN: I UNSAFE MOVEMENT 20-154
COMPLAINANT: MONTGOMERY SHP ISSUED: 020692 SERVED: 020692
OFFN DATE: 020692 ARRN DATE: MOTIONS DATE: DISP DATE: 022692
CONT. D: S: C: NR: INT?: FRM: RSONCO: GANG REL: DV CV: N

PLEA VER MOD FINE COSTS WCC REST JUDGE PAID TO-BE-PAID
RS RS WM \$ \$ \$ YES
CONV OFFN: I UNSAFE MOVEMENT 20-154 CAB:
SENT LEN: - SENT TYPE: CONS F/JGMT:
PROB: WITHDRAWN: APPEALED TO SUPERIOR:
AREA CD: 08 ACCD: P HWY: RP1600 V LIC: TRANS TO SUPERIOR:
CDL: N CMV: N HAZ: N TRP/DIST: C4 V ST: V TYP: PU APPELLATE:

ARREST DATE: CHECK DIGIT: SID: LID:
NEXT#: PF2 - NAME INQUIRY ADDL CHARGES: Y

340 FRANKLIN ICA INQUIRY 02 92CR 000732 FILM:
DISPOSED R S DOB/AGE CR FILING DATE: 021292
CITATION W M 08011966 DL#: 4774036 NC
PERRY, BRYAN, E CIT#: 3602820 TRIAL DATE: 022492
RT 5 BOX 623 CSLR: CSLRC: AM
ZEBULON NC DEF ATTY: TYP: VRA:
CHG/ARRN OFFN: T EXPIRED REGISTRATION CARD/TAG 20-111(2)
COMPLAINANT: MONTGOMERY SHP ISSUED: 020692 SERVED: 020692
OFFN DATE: 020692 ARRN DATE: MOTIONS DATE: DISP DATE: 022692
CONT. D: S: C: NR: INT?: FRM: RSONCO: GANG REL: DV CV: N

PLEA VER MOD FINE COSTS WCC REST JUDGE PAID TO-BE-PAID
GU GU WM \$ \$ \$ YES
CONV OFFN: T EXPIRED REGISTRATION CARD/TAG 20-111(2) CAB:
SENT LEN: - SENT TYPE: CONS F/JGMT:
PROB: WITHDRAWN: APPEALED TO SUPERIOR:
AREA CD: 08 ACCD: P HWY: RP1600 V LIC: TRANS TO SUPERIOR:
CDL: N CMV: N HAZ: N TRP/DIST: C4 V ST: V TYP: PU APPELLATE:

ARREST DATE: CHECK DIGIT: SID: LID:
NEXT#: PF2 - NAME INQUIRY ADDL CHARGES:

340 FRANKLIN ICA INQUIRY 01 83CR 000033 FILM:
DISPOSED R S DOB/AGE CR FILING DATE: 010483
CITATION W M 08011966 DL#: 4774036 NC
PERRY, BRYAN, EVERETTE CIT#: C3714471 TRIAL DATE: 031483
RT 2 BOX 542 CSLR: CSLRC:
ZEBULON NC DEF ATTY: TYP: VRA:
CHG/ARRN OFFN: T EXCEEDING SAFE SPEED 20-141(A)
COMPLAINANT: BATTON, C, F CPD ISSUED: 122782 SERVED: 122782
OFFN DATE: 122782 ARRN DATE: MOTIONS DATE: DISP DATE: 031483
CONT. D: 03 S: 00 C: 00 NR: 00 INT?: FRM: RSONCO: GANG REL: DV CV: N

PLEA	VER	MOD	FINE	COSTS	WCC	REST	JUDGE	PAID	TO-BE-PAID
GU	GU	JU	\$ 00000.00	\$ 31.00	\$.00	296	YES	
CONV OFFN: T EXCEEDING SAFE SPEED							20-141(A)	CAB:	
SENT LEN:		-	SENT TYPE:		CONS F/JGMT:				
PROB:		WITHDRAWN:			APPEALED TO SUPERIOR:				
AREA CD:		ACCD:	HWY:	V LIC:	TRANS TO SUPERIOR:				
CDL:	CMV:	HAZ:	TRP/DIST:	V ST:	V TYP:	APPELLATE:			
DISPOSITION - PJC									

ARREST DATE: CHECK DIGIT: SID: LID:
NEXT#: PF2 - NAME INQUIRY ADDL CHARGES:

340 FRANKLIN ICA INQUIRY 01 83CR 003209 FILM:
DISPOSED R S DOB/AGE CR FILING DATE: 100383
CITATION W M 08011966 DL#: 47740236 NC
PERRY, BRYAN, EVERETTE CIT#: 4998345 TRIAL DATE: 010984
RT 2 BOX 542 CSLR: CSLRC:
ZEBULON NC DEF ATTY: TYP: VRA:
CHG/ARRN OFFN: T SPEEDING 076/55 20-141(J1)
COMPLAINANT: ROBERTS, A SHP ISSUED: 092983 SERVED: 092983
OFFN DATE: 092983 ARRN DATE: MOTIONS DATE: DISP DATE: 010984
CONT. D: 02 S: 00 C: 00 NR: 00 INT?: FRM: RSONCO: GANG REL: DV CV: N

PLEA	VER	MOD	FINE	COSTS	WCC	REST	JUDGE	PAID	TO-BE-PAID
GU	GU	JU	\$ 00015.00	\$ 35.00	\$.00	293	YES	
CONV OFFN: T SPEEDING							20-141(J1)	CAB:	
SENT LEN:		-		SENT TYPE:		CONS F/JGMT:			
PROB:				WITHDRAWN:		APPEALED TO SUPERIOR:			
AREA CD:		ACCD:	HWY:	V LIC:		TRANS TO SUPERIOR:			
CDL:	CMV:	HAZ:	TRP/DIST:	V ST:	V TYP:	APPELLATE:			

ARREST DATE: CHECK DIGIT: SID: LID:
NEXT#: PF2 - NAME INQUIRY ADDL CHARGES:

340 FRANKLIN ICA INQUIRY 01 08CR 702814 FILM:
DISPOSED R S DOB/AGE CR FILING DATE: 090508
CITATION W M 08011966 DL#: 04774036 NC
PERRY, BRYAN, EVERETTE CIT#: 43E1834 TRIAL DATE: 101408
768 STALLINGS RD CSLR: CSLRC: AM
ZEBULON NC 27597 DEF ATTY: TYP: VRA:
CHG/ARRN OFFN: T EXPIRED REGISTRATION CARD/TAG 20-111(2)
COMPLAINANT: PULLIAM, B, E SHP ISSUED: 090308 SERVED: 090308
OFFN DATE: 090308 ARRN DATE: MOTIONS DATE: DISP DATE: 090408
CONT. D: 00 S: 00 C: 00 NR: 00 INT?: FRM: RSONCO: GANG REL: DV CV: N

PLEA VER MOD FINE COSTS WCC REST JUDGE PAID TO-BE-PAID
VD \$ \$ \$
CONV OFFN: CAB:
SENT LEN: - SENT TYPE: CONS F/JGMT:
PROB: WITHDRAWN: APPEALED TO SUPERIOR:
AREA CD: 07 ACCD: N HWY: NC39 V LIC: PYE4102 TRANS TO SUPERIOR:
CDL: N CMV: N HAZ: N TRP/DIST: C4 V ST: NC V TYP: SUV APPELLATE:

ARREST DATE: CHECK DIGIT: SID: LID:
NEXT#: PF2 - NAME INQUIRY ADDL CHARGES:

Section 8: Liability and property insurance

- a) Commercial General Liability: not less than \$2,000,000 per occurrence and \$5,000,000 aggregate
- b) Commercial Automobile Liability: not less than \$2,000,000 per occurrence
- c) Professional Liability: not less than \$5,000,000 per occurrence or claim and \$5,000,000 aggregate



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/15/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Todd & Scarboro Inc 2499 Wendell Blvd Wendell, NC 27591	CONTACT NAME: Cindy O'Brien Boykin	
	PHONE (A/C, No, Ext): 919-365-7255 FAX (A/C, No):	
	E-MAIL ADDRESS: cindy@triangleinsurance.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Arch Insurance Company	A0609
	INSURER B: Insurance Company of The West	A0579
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER:
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Sexual or Physical Abuse <input checked="" type="checkbox"/> Contractual Liability GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			MAPK08365705	08/25/2019	08/25/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			MAPK08365705	08/25/2019	08/25/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$			MAUM08498005	08/25/2019	08/25/2020	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	WNC 5042946 00	08/25/2019	08/25/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	<input checked="" type="checkbox"/> Ambulance Services Professional			MAPK08365705	08/25/2019	08/25/2020	Per Occurrence \$ 1,000,000 Aggregate \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**Durham County EMS
200 E Main St
Durham, NC 27701

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Cindy O'Brien Boykin

**Section 9: Audited financial statement for the
applicant for the last three calendar of fiscal years of
operation**

May & Place, PA
CERTIFIED PUBLIC ACCOUNTANTS

P.O. Box 900
Louisburg, NC 27549
Bus: 919-496-3041
Fax: 919-496-6342

Scott H. May, CPA
Dale R. Place, CPA, CFE

Independent Accountant's Compilation Report

To The Management
NSMT, Inc. (North State Medical Transport, Inc.)
Raleigh, North Carolina 27610

Management is responsible for the accompanying financial statements of NSMT, Inc. (a Corporation), which comprise the balance sheet as of December 31, 2016, and the related statement of income and retained earnings for the year then ended in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

Management has elected to omit substantially all of the disclosures and the statement of cash flows required by accounting principles generally accepted in the United States of America. If the omitted disclosures and the statement of cash flows were included in the financial statements, they might influence the user's conclusions about the Company's financial position, results of operations, and cash flows. Accordingly, the financial statements are not designed for those who are not informed about such matters.

May & Place, PA
Louisburg, North Carolina
April 27, 2017

NSMT, Inc.
(North State Medical Transport, Inc.)
INCOME AND RETAINED EARNINGS
For the Year Ended December 31, 2016

	<u>2016</u>
TRANSPORTATION REVENUES (Net)	\$ 3 503 465
OPERATING EXPENSES	
Officers' Salaries	263 999
Salaries and Wages	1 728 919
Payroll Taxes	196 515
Repairs and Maintenance	145 718
Dues and Subscriptions	2 350
Medical Supplies	113 897
Other Taxes and Licenses	40 866
Depreciation	423 834
Advertising	51 131
Fuel	273 527
Billings and Collections	110 846
Uniforms	3 210
Postage	245
Insurance	192 960
Legal and Professional	21 404
Meals and Entertainment	283
Merchant Fees	15 418
Office Expense	109 167
Utilities	33 379
Telephone	10 837
Travel	690
Rent Expense	183 476
Penalties	1 021
Miscellaneous	44
Management and Consultant Fees	130 000
TOTAL OPERATING EXPENSES	4 053 736
NET INCOME (LOSS) FROM OPERATIONS	(550 271)
OTHER INCOME AND (EXPENSE)	
Commissions	20 703
Interest Expense	(30 430)
TOTAL OTHER INCOME AND EXPENSE	(9 727)
NET INCOME (LOSS) BEFORE INCOME TAXES	(559 998)
INCOME TAXES – Benefits (Expense)	228 535
NET INCOME (LOSS)	(331 463)
RETAINED EARNINGS - BEGINNING OF YEAR	365 456
RETAINED EARNING - END OF YEAR	\$ 33 993
See independent accountant's compilation report.	

May & Place, PA
CERTIFIED PUBLIC ACCOUNTANTS

P.O. Box 900
Louisburg, NC 27549
Bus: 919-496-3041
Fax: 919-496-6342

Scott H. May, CPA
Dale R. Place, CPA, CFE

Independent Accountant's Compilation Report

To The Management
NSMT, Inc. (North State Medical Transport, Inc.)
Raleigh, North Carolina 27610

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May & Place, PA
Louisburg, North Carolina
March 5, 2018

NSMT, Inc.
(North State Medical Transport, Inc.)
INCOME AND RETAINED EARNINGS
For the Year Ended December 31, 2017

	<u>2017</u>
TRANSPORTATION REVENUES (Net)	\$ <u>5 127 121</u>
OPERATING EXPENSES	
Officers' Salaries	264 261
Salaries and Wages	2 283 405
Payroll Taxes	202 482
Repairs and Maintenance	245 731
Dues and Subscriptions	1 415
Medical Supplies	116 645
Other Taxes and Licenses	17 090
Depreciation	371 552
Advertising	35 485
Fuel	283 041
Billings and Collections	180 326
Uniforms	-
Postage	257
Insurance	378 622
Legal and Professional	8 765
Meals and Entertainment	-
Merchant Fees	20 761
Office Expense	143 439
Utilities	18 093
Telephone	31 981
Travel	529
Rent Expense	200 968
Management and Consultant Fees	130 000
TOTAL OPERATING EXPENSES	<u>4 934 848</u>
NET INCOME (LOSS) FROM OPERATIONS	<u>192 273</u>
OTHER INCOME AND (EXPENSE)	
Commissions	(82)
Interest Expense	(33 271)
TOTAL OTHER INCOME AND EXPENSE	<u>(33 353)</u>
NET INCOME (LOSS) BEFORE INCOME TAXES	158 920
INCOME TAXES – Benefits (Expense)	<u>(43 798)</u>
NET INCOME (LOSS)	<u>115 122</u>
RETAINED EARNINGS - BEGINNING OF YEAR	<u>592 621</u>
RETAINED EARNING - END OF YEAR	\$ <u>707 743</u>
See independent accountant's compilation report.	

May & Place, PA
CERTIFIED PUBLIC ACCOUNTANTS

P.O. Box 900
Louisburg, NC 27549
Bus: 919-496-3041
Fax: 919-496-6342

Scott H. May, CPA
Dale R. Place, CPA, CFE

Independent Accountant's Compilation Report

To the Management
NSMT, Inc. (North State Medical Transport, Inc.)
Raleigh, North Carolina 27610

Management is responsible for the accompanying financial statements of NSMT, Inc. (a Corporation), which comprise the balance sheet as of December 31, 2018, and the related statement of income and retained earnings for the year then ended in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements.

Management has elected to omit substantially all of the disclosures and the statement of cash flows required by accounting principles generally accepted in the United States of America. If the omitted disclosures and the statement of cash flows were included in the financial statements, they might influence the user's conclusions about the Company's financial position, results of operations, and cash flows. Accordingly, the financial statements are not designed for those who are not informed about such matters.

May & Place, PA
Louisburg, North Carolina
May 6, 2019

NSMT, Inc.
(North State Medical Transport, Inc.)
BALANCE SHEET
December 31, 2018

ASSETS

	<u>2018</u>
CURRENT ASSETS	
Cash	\$ 251 822
Due from North State Investment Group, LLC	181 136
Accounts Receivable	<u>984 826</u>
TOTAL CURRENT ASSETS	<u>1 417 784</u>
PROPERTY AND EQUIPMENT	
Furniture and Fixtures	173 317
Vehicles and Equipment	<u>2 056 263</u>
	2 229 580
Less Accumulated Depreciation	<u>1 902 398</u>
TOTAL PROPERTY AND EQUIPMENT	<u>327 182</u>
TOTAL ASSETS	<u>\$ 1 744 966</u>

LIABILITIES AND STOCKHOLDERS' EQUITY

CURRENT LIABILITIES	
Income Taxes Payable	\$ 7 088
Current Portion of Notes Payable	316 154
Deferred Taxes	151 814
Due to Pro Source Billing Solutions Inc	<u>10 538</u>
TOTAL CURRENT LIABILITIES	<u>485 594</u>
LONG TERM LIABILITIES	
Notes Payable, Net of Current Portion	<u>332 834</u>
TOTAL LIABILITIES	<u>818 428</u>
STOCKHOLDERS' EQUITY	
Common Stock, No Par Value, 100,000 Shares	25 000
Authorized, 25,000 Issued and Outstanding	<u>901 538</u>
Retained Earnings	
TOTAL STOCKHOLDERS' EQUITY	<u>926 538</u>
TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY	<u>\$ 1 744 966</u>

See independent accountant's compilation report.

NSMT, Inc.
(North State Medical Transport, Inc.)
INCOME AND RETAINED EARNINGS
For the Year Ended December 31, 2018

	<u>2018</u>
TRANSPORTATION REVENUES (Net)	\$ <u>5 415 281</u>
OPERATING EXPENSES	
Officers' Salaries	272 524
Salaries and Wages	2 333 314
Payroll Taxes	233 368
Repairs and Maintenance	260 232
Dues and Subscriptions	3 916
Medical Supplies	127 085
Other Taxes and Licenses	15 179
Depreciation	72 773
Advertising	58 548
Fuel	299 630
Billings and Collections	331 232
Postage	258
Insurance	543 503
Legal and Professional	12 903
Meals and Entertainment	204
Merchant Fees	31 276
Office Expense	103 622
Utilities and IT Services	97 638
Telephone	35 391
Travel	159
Rent Expense	295 269
Management and Consultant Fees	130 000
TOTAL OPERATING EXPENSES	<u>5 258 024</u>
NET INCOME (LOSS) FROM OPERATIONS	<u>157 257</u>
OTHER INCOME AND (EXPENSE)	
Commissions	(1 200)
Interest Expense	(32 482)
Gain (Loss) on Disposal of Assets	35 838
Bad Debts	(1 000)
Charitable Contributions	(5 700)
TOTAL OTHER INCOME AND EXPENSE	<u>(4 544)</u>
NET INCOME (LOSS) BEFORE INCOME TAXES	152 713
INCOME TAXES – Benefits (Expense)	<u>41 082</u>
NET INCOME (LOSS)	193 795
RETAINED EARNINGS - BEGINNING OF YEAR	<u>707 743</u>
RETAINED EARNING - END OF YEAR	\$ <u>901 538</u>

See independent accountant's compilation report.

Section 10: Does the applicant certify each of the following statements?

- a) The applicant agrees not to discriminate as to any person with regard to race, color, creed, national origin or gender: **YES**
- b) The applicant agrees that all vehicles used as ambulances shall conform to the specifications and requirements adopted by the North Carolina Department of Health and Human Services, Division of Health Service Regulation, Office Of Emergency Medical Services: **YES**
- c) The applicant agrees that all emergency medical personal employed to provide ambulance service in Durham County used shall hold current EMS credentials at the appropriate levels from the North Carolina Department of Health and Human Services, Division of Health Service Regulation, Office of Emergency Medical Services: **YES**
- d) The applicant authorizes the Director of Emergency Medical Services of Durham County, North Carolina, to investigate and verify the veracity of any and all information submitted in support of this application: **YES**
- e) The applicant agrees to submit such periodic reports as may be required by the Director of Emergency Medical Services of Durham County. Further, the applicant agrees that all patient care reports generate during the course of the applicant's service in Durham County shall be submitted to the North Carolina EMS Performance Improvement Center (EMS-PIC) in a timely manner and in such format as required by the EMS-PIC: **YES**

Attachment 1: Articles of Incorporation



NORTH CAROLINA

Department of The Secretary of State

To all whom these presents shall come, Greetings:

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

ARTICLES OF ORGANIZATION

OF

NORTH STATE INVESTMENT GROUP, LLC

the original of which was filed in this office on the 14th day of June, 2004.



**IN WITNESS WHEREOF, I have hereunto
set my hand and affixed my official seal at the
City of Raleigh, this 14th day of June, 2004**

Elaine F. Marshall

Secretary of State

8. Check one of the following:

 (i) **Member-managed LLC**: all members by virtue of their status as members shall be managers of this limited liability company.

☒ (ii) **Manager-managed LLC**: except as provided by N.C.G.S. Section 57C-3-20(a), the members of this limited liability company shall not be managers by virtue of their status as members.

9. Any other provisions which the limited liability company elects to include are attached.

10. These articles will be effective upon filing, unless a date and/or time is specified:

This is the 11 day of June, 20 04.


Signature

Patricia Marin, Assistant Secretary, LegalZoom.com, Inc., Organizer

Type or Print Name and Title

NOTES:

1. Filing fee is \$125. This document must be filed with the Secretary of State.

CORPORATIONS DIVISION
(Revised January 2002)

P.O. Box 29622

RALEIGH, NC 27626-0622
(Form L-01)

FILED FOR RECORD
VANCE COUNTY, N.C.
CYNTHIA S. ABBOTT
REGISTER OF DEEDS

RECORDED Apr 24 2008

AT 11:02 am

INSTRUMENT # 02040

CERTIFICATE OF ASSUMED NAME FOR A LIMITED LIABILITY COMPANY (LLC)

The undersigned LLC, proposing to engage in business in VANCE County, North Carolina, under an assumed name other than its LLC name, hereby certifies that:

1. The name under which the business is to be conducted is:

North State Medical Transport

(Insert assumed name)

2. The name and address of the owner(s) of such business is (are):

Stuart Coward 8729 NC 395 Zebulon NC 27597

Richard Hardin 1987 Robersonville Rd Washington NC 27889

Bryan Perry 7608 Stallings Rd Zebulon NC 27597

North State Investment Group LLC 7419 Knightdale Blvd Knightdale NC 27545

(Insert name and address of LLC)

In witness whereof, this certificate is signed in the name of the LLC by its manager(s), this

23 day of April, 20 08.

By: [Signature] SEAL
Manager

By: [Signature] SEAL
Manager

By: [Signature] SEAL
Manager

State of NC

County of Wake

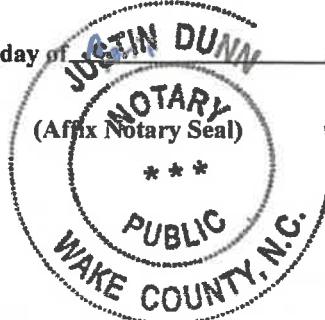
I, Justin Dunn, a Notary Public, do hereby certify that
Stuart Coward, Richard Hardin and Bryan Perry, manager(s) of
North State Investment Group, LLC, LLC, personally

appeared before me this 23rd day of April, 20 08, and that they
signed the foregoing certificate on behalf of the LLC.

Witness my hand and official seal, this the 23 day of April, 20 08.

Notary Public

My Commission Expires: April 29, 2018



Rev. 7/02