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CENTRAL DIST. OF CALIF.
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UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF CALIFORNIA

February 2018 Grand Jury

UNITED STATES OF AMERICA,

Plaintiff,

v.

SARKIS MANUKYAN,
aka "Sako,"
aka "Zako," and
EDUARD TEROSIPYAN,

Defendants.

No. 18CR00377-JFW

I N D I C T M E N T

[18 U.S.C. § 1347: Health Care Fraud; 18 U.S.C. § 2: Aiding and Abetting and Causing an Act to be Done; 42 U.S.C. § 1320a-7b(b)(2)(A): Illegal Remunerations for Health Care Referrals; 18 U.S.C. § 1028A(a)(1): Aggravated Identity Theft; 21 U.S.C. §§ 846, 841(a)(1), (b)(1)(C): Attempted Distribution of Hydrocodone; 21 U.S.C. §§ 846, 843(a)(2): Use of and Attempted Use of Registration Number Issued to Another Person; 18 U.S.C. § 371: Conspiracy; 18 U.S.C. §§ 982(a)(7) and 981(a)(1)(C), 21 U.S.C. § 853, and 28 U.S.C. § 2461(c): Criminal Forfeiture]

1 The Grand Jury charges:

2 COUNTS ONE AND TWO

3 [18 U.S.C. §§ 1347, 2]

4 A. INTRODUCTORY ALLEGATIONS

5 At all times relevant to this Indictment:

6 1. Defendant SARKIS MANUKYAN, also known as ("aka")
7 "Sako," aka "Zako" ("MANUKYAN"), was a resident of Los Angeles,
8 within the Central District of California. Defendant MANUKYAN
9 operated medical clinics located at 240 N. Virgil Avenue, Suite
10 #6, Los Angeles, California ("the Virgil Clinic"), and at 358 E.
11 Olive Avenue, Burbank, California ("the Olive Clinic"), both
12 within the Central District of California.

13 2. Defendant EDUARD TEROSIPYAN ("TEROSIPYAN") was a
14 resident of Los Angeles, within the Central District of
15 California. Defendant TEROSIPYAN assisted defendant MANUKYAN in
16 the operation of the Olive Clinic, including by obtaining
17 Medicare patients to be billed at the Olive Clinic.

18 3. Recruiter 1 ("Recruiter 1") was a recruiter who
19 obtained Medicare patients for defendant MANUKYAN to be billed
20 at the Virgil Clinic and who, acting as a confidential source
21 working with law enforcement, later helped obtain Medicare
22 patients for defendants MANUKYAN and TEROSIPYAN to be billed at
23 the Olive Clinic.

24 4. Recruiter 2 ("Recruiter 2") was a recruiter who,
25 acting as a confidential source working with law enforcement,
26 obtained Medicare patients for defendant MANUKYAN to be billed
27 at the Virgil Clinic.

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1 5. Recruiter 3 ("Recruiter 3") was a recruiter who,
2 acting as a confidential source working with law enforcement,
3 obtained Medicare patients for defendants MANUKYAN and
4 Terosipyan to be billed at the Olive Clinic.

5 6. Physician 1 ("Physician 1") and Physician 2
6 ("Physician 2") were physicians licensed to practice medicine in
7 the State of California who were approved Medicare providers and
8 registered with the United States Drug Enforcement
9 Administration ("DEA") to dispense pharmaceutical controlled
10 substances.

11 7. Non-physician 1 ("Non-physician 1") saw and treated
12 patients at the Olive Clinic, holding himself out as a physician
13 despite not having a license from the State of California to
14 practice as a physician.

15 MEDICARE

16 8. Medicare was a federal health care benefit program,
17 affecting commerce, that provided benefits to individuals who
18 were 65 years and older or disabled. Medicare was administered
19 by the Centers for Medicare and Medicaid Services ("CMS"), a
20 federal agency under the United States Department of Health and
21 Human Services. Medicare was a "Federal health care program" as
22 referenced in Title 42, United States Code, Section 1320a-7b(b),
23 and a "health care benefit program" as defined by Title 18,
24 United States Code, Section 24(b).

25 9. Individuals who qualified for Medicare benefits were
26 referred to as Medicare "beneficiaries." Each beneficiary was
27 given a unique health insurance claim number ("HICN").
28

1 10. Health care providers that provided medical services
2 that were reimbursed by Medicare were referred to as Medicare
3 "providers." To participate in Medicare, providers, including
4 medical clinics, were required to submit applications in which
5 the providers agreed to comply with all Medicare-related laws
6 and regulations, including the anti-kickback statute (42 U.S.C.
7 § 1320a-7b(b)), which proscribes the offering, payment,
8 solicitation, or receipt of any remuneration in exchange for a
9 patient referral or referral of other business for which payment
10 may be made by any federal health care program. If Medicare
11 approved a provider's application, Medicare assigned the
12 provider a Medicare "provider number," which was used for the
13 processing and payment of claims submitted by the providers.

14 11. A health care provider with a Medicare provider number
15 could submit claims to Medicare to obtain reimbursement for
16 services rendered to Medicare beneficiaries.

17 12. Most providers submitted their claims electronically
18 pursuant to an agreement they executed with Medicare in which
19 the providers agreed that: (a) they were responsible for all
20 claims submitted to Medicare by themselves, their employees, and
21 their agents; (b) they would submit claims only on behalf of
22 those Medicare beneficiaries who had given their written
23 authorization to do so; and (c) they would submit claims that
24 were accurate, complete, and truthful.

25 13. Medical clinics who provided physician services to
26 Medicare beneficiaries, including the Virgil and Olive Clinics,
27 could submit claims for reimbursement to the Medicare program.

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1 14. A Medicare claim for payment was required to set
2 forth, among other things, the following: the beneficiary's
3 name and unique Medicare identification number; the type of
4 services provided to the beneficiary; the date that the services
5 were provided; and the name and National Provider Identifier
6 ("NPI") of the physician who provided the care.

7 B. THE SCHEME TO DEFRAUD

8 15. Beginning at least as early as in or about February
9 2015, and continuing to at least in or about April 2015 in Los
10 Angeles County, within the Central District of California, and
11 elsewhere, defendant SARKIS MANUKYAN, together with others known
12 and unknown to the Grand Jury, knowingly, willfully, and with
13 the intent to defraud, executed, and attempted to execute, a
14 scheme and artifice: (a) to defraud a health care benefit
15 program, namely Medicare, as to material matters in connection
16 with the delivery of and payment for health care benefits,
17 items, and services; and (b) to obtain money from Medicare by
18 means of material false and fraudulent pretenses,
19 representations, and promises, and the concealment of material
20 facts in connection with the delivery of and payment for health
21 care benefits, items, and services.

22 16. The fraudulent scheme operated, in substance, as
23 follows:

24 a. Individuals known as "marketers" or "recruiters,"
25 including Recruiter 1 and Recruiter 2 and others known and
26 unknown to the Grand Jury, recruited Medicare beneficiaries and
27 took them to the Virgil Clinic in exchange for kickbacks paid by
28 defendant MANUKYAN.

1 b. Defendant MANUKYAN, together with others known
2 and unknown to the Grand Jury, used and caused to be used the
3 names and HICNs of the beneficiaries brought by the recruiters
4 to the Virgil Clinic to submit and cause to be submitted false
5 and fraudulent claims to Medicare for medical services
6 purportedly rendered to the beneficiaries by Physician 1 and for
7 diagnostic testing purportedly provided to the beneficiaries
8 through the Virgil Clinic. In fact, as defendant MANUKYAN then
9 well knew, the beneficiaries did not meet or receive any
10 services from Physician 1, the diagnostic tests had not been
11 rendered and were not medically necessary, and the referrals for
12 those services had been procured through the payment of illegal
13 kickbacks.

14 c. As a result of the submission of these false and
15 fraudulent claims, Medicare made payments to the Virgil Clinic
16 and diagnostic testing providers.

17 d. Defendant MANUKYAN, together with others known
18 and unknown to the Grand Jury, then transferred and disbursed
19 and caused to be transferred and disbursed to himself and others
20 the monies received from Medicare as a result of the false and
21 fraudulent claims.

22 C. EXECUTIONS OF THE FRAUDULENT SCHEME

23 17. On or about the dates set forth below, in Los Angeles
24 County, within the Central District of California, and
25 elsewhere, defendant MANUKYAN, together with others known and
26 unknown to the Grand Jury, knowingly and willfully executed and
27 attempted to execute the fraudulent scheme described above by
28 submitting and causing to be submitted to Medicare for payment

1 the following false and fraudulent claims for medical services
2 that were not rendered and were not medically necessary and
3 where the referrals for those services were procured through the
4 payment of illegal kickbacks:

COUNT	MEDICARE BENEFICIARY	CLAIM NUMBER	DATE SUBMITTED	AMOUNT BILLED
ONE	F.G.	551115089220820	3/27/15	\$350
TWO	R.S.	551115105273850	4/14/15	\$350

COUNT THREE

[42 U.S.C. § 1320a-7b(b) (2) (A); 18 U.S.C. § 2]

18. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 through 16 of this Indictment as though fully set forth herein.

19. On or about February 13, 2015, in Los Angeles County, within the Central District of California, and elsewhere, defendant MANUKYAN, together with others known and unknown to the Grand Jury, aiding and abetting one another, knowingly and willfully paid and caused to be paid remuneration, namely, approximately \$400 cash, to marketers, which constituted a kickback for referring Medicare beneficiaries F.G. and R.S. to the Virgil Clinic for outpatient physician services, for which payment could be made in whole and in part under a Federal health care program, namely, Medicare.

COUNTS FOUR AND FIVE

[18 U.S.C. §§ 1028A(a)(1), 2]

20. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 through 17 of this Indictment as though fully set forth herein.

21. On or about the dates set forth below, in Los Angeles County, within the Central District of California, and elsewhere, defendant MANUKYAN, together with others known and unknown to the Grand Jury, knowingly transferred, possessed, and used, and willfully caused to be transferred, possessed, and used, without lawful authority, means of identification that defendant MANUKYAN knew belonged to another person, namely, the names and HICNs of the Medicare beneficiaries identified below, during and in relation to the offense of Health Care Fraud, a felony violation of Title 18, United States Code, Section 1347, as charged in Counts of this Indictment identified below:

COUNT	BENEFICIARY	DATE	RELATED COUNT
FOUR	F.G.	3/27/15	COUNT ONE
FIVE	R.S.	4/14/15	COUNT TWO

COUNT SIX

[21 U.S.C. §§ 846, 841(a)(1), (b)(1)(C); 18 U.S.C. § 2]

22. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 and 6 of this Indictment as though fully set forth herein.

23. On or about August 26, 2016, in Los Angeles County, within the Central District of California, and elsewhere, defendant MANUKYAN knowingly and intentionally provided without a legitimate medical purpose a prescription for approximately 90 pills of 10-milligram strength hydrocodone, a Schedule II narcotic drug controlled substance, to an individual in exchange for \$200 and thereby distributed and attempted to distribute and cause the distribution of hydrocodone.

COUNT SEVEN

[21 U.S.C. §§ 846, 843(a)(2); 18 U.S.C. § 2]

24. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1, 6, and 23 of this Indictment as though fully set forth herein.

25. On or about August 26, 2016, in Los Angeles County, within the Central District of California, and elsewhere, defendant MANUKYAN knowingly and intentionally used and attempted to use a DEA registration number issued to another person, namely, Physician 1, in the course of distributing hydrocodone, a Schedule II narcotic drug controlled substance.

COUNTS EIGHT AND NINE

[18 U.S.C. §§ 1347, 2]

26. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 through 14 of this Indictment as though fully set forth herein.

A. THE SCHEME TO DEFRAUD

27. Beginning at least as early as in or about January 2018 and continuing to at least in or about June 2018, in Los Angeles County, within the Central District of California, and elsewhere, defendants MANUKYAN and TEROSIPYAN, together with others known and unknown to the Grand Jury, knowingly, willfully, and with the intent to defraud, executed, and attempted to execute, a scheme and artifice: (a) to defraud a health care benefit program, namely Medicare, as to material matters in connection with the delivery of and payment for health care benefits, items, and services; and (b) to obtain money from Medicare by means of material false and fraudulent pretenses, representations, and promises, and the concealment of material facts in connection with the delivery of and payment for health care benefits, items, and services.

28. The fraudulent scheme operated, in substance, as follows:

a. Individuals known as "marketers" or "recruiters," including Recruiter 1 and Recruiter 3 and others known and unknown to the Grand Jury, recruited Medicare beneficiaries and took them to the Olive Clinic in exchange for kickbacks paid by defendants MANUKYAN and TEROSIPYAN.

1 b. Defendants MANUKYAN and TEROSIPYAN offered and
2 paid larger kickbacks for each Medicare beneficiary referred to
3 the Olive Clinic if the visit included blood being drawn for
4 diagnostic testing. When the beneficiaries did not want their
5 blood to be drawn, defendants MANUKYAN and TEROSIPYAN would use
6 blood drawn from someone else other than the beneficiaries for
7 the diagnostic testing.

8 c. Defendants MANUKYAN and TEROSIPYAN, together with
9 others known and unknown to the Grand Jury, used and caused to
10 be used the names and HICNs of the beneficiaries brought by the
11 recruiters to the Olive Clinic to submit and cause to be
12 submitted false and fraudulent claims to Medicare for medical
13 services purportedly to the beneficiaries rendered by Physician
14 2 and for diagnostic testing purportedly provided to the
15 beneficiaries through the Olive Clinic. In fact, as defendants
16 MANUKYAN and TEROSIPYAN then well knew, the beneficiaries did
17 not meet or receive any services from Physician 2, the
18 diagnostic tests had not been rendered and were not medically
19 necessary, and the referrals for those services had been
20 procured through the payment of illegal kickbacks.

21 d. As a result of the submission of these false and
22 fraudulent claims, Medicare made payments to the Olive Clinic
23 and diagnostic testing providers.

24 e. Defendants MANUKYAN and TEROSIPYAN, together with
25 others known and unknown to the Grand Jury, then transferred and
26 disbursed and caused to be transferred and disbursed to
27 themselves and others the monies received from Medicare as a
28 result of the false and fraudulent claims.

1 B. EXECUTIONS OF THE FRAUDULENT SCHEME

2 29. On or about the dates set forth below, in Los Angeles
3 County, within the Central District of California, and
4 elsewhere, defendants MANUKYAN and TEROSIPYAN, together with
5 others known and unknown to the Grand Jury, aiding and abetting
6 one another, knowingly and willfully executed and attempted to
7 execute the fraudulent scheme described above by submitting and
8 causing to be submitted to Medicare for payment the following
9 false and fraudulent claims for medical services that were not
10 rendered and were not medically necessary and where the
11 referrals for those services were procured through the payment
12 of illegal kickbacks:

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COUNT	MEDICARE BENEFICIARY	CLAIM NUMBER	DATE SUBMITTED	AMOUNT BILLED
EIGHT	A.R.	551118128027890	5/7/18	\$790
NINE	A.R.	551118129004570	5/8/18	\$610

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COUNT TEN

[18 U.S.C. § 371]

30. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 through 14, 27, and 28 of this Indictment as though fully set forth herein.

A. OBJECTS OF THE CONSPIRACY

31. Beginning at least as early as in or around June 2017, and continuing through in or around June 2018, in Los Angeles County, within the Central District of California, and elsewhere, defendants MANUKYAN and TEROSIPYAN, together with others known and unknown to the Grand Jury, knowingly combined, conspired, and agreed to commit the following offenses against the United States:

a. Knowingly and willfully soliciting and receiving remuneration in return for referring an individual to a person for the furnishing and arranging for the furnishing of any item or service for which payment may be made in whole or in part under a Federal health care program, in violation of Title 42, United States Code, Section 1320a-7b(b)(1)(A); and

b. Knowingly and willfully offering to pay and paying any remuneration to any person to induce such person to refer an individual to a person for the furnishing and arranging for the furnishing of any item or service for which payment may be made in whole or in part under a Federal health care program, in violation of Title 42, United States Code, Section 1320a-7b(b)(2)(A).

1 B. THE MANNER AND MEANS OF THE CONSPIRACY

2 32. The objects of the conspiracy were carried out, and to
3 be carried out, in substance, as follows:

4 a. Defendants MANUKYAN and TEROSIPYAN would develop
5 relationships with patient recruiters, who would refer Medicare
6 beneficiaries to the Olive Clinic for purported outpatient
7 physician services and diagnostic testing services, which
8 services would then be billed to Medicare.

9 b. In exchange for the Medicare referrals,
10 defendants MANUKYAN and TEROSIPYAN would offer to pay and would
11 pay kickbacks of approximately \$170 for each Medicare
12 beneficiary referred to the Olive Clinic if the visit included
13 blood being drawn for diagnostic testing. If the beneficiary
14 did not want blood to be drawn, defendants MANUKYAN and
15 TEROSIPYAN would use blood drawn from someone else other than
16 the beneficiary for the diagnostic testing.

17 c. In exchange for Medicare referrals, defendants
18 MANUKYAN and TEROSIPYAN would offer to pay and would pay
19 kickbacks of approximately \$100 if the visit did not include
20 blood being drawn for diagnostic testing, as well as kickbacks
21 of \$700 per month for each Medicare beneficiary referred to a
22 hospice and approximately \$700 for each Medicare beneficiary
23 referred to a home health agency.

24 d. Defendants MANUKYAN and TEROSIPYAN would instruct
25 recruiters to pay beneficiaries \$50 to ensure the beneficiaries
26 would agree to visit the Olive Clinic, and would offer to pay
27 and would pay the recruiter an additional \$20 for each such
28 beneficiary to compensate the recruiter for this expense.

1 C. OVERT ACTS

2 33. On or about the following dates, in furtherance of the
3 conspiracy and to accomplish its objects, defendants MANUKYAN
4 and TEROSIPYAN, together with others known and unknown to the
5 Grand Jury, committed and willfully caused others to commit the
6 following overt acts, among others, within the Central District
7 of California and elsewhere:

8 Overt Act No. 1: On or about May 4, 2018, defendants
9 MANUKYAN and TEROSIPYAN offered to pay Recruiter 3, who was then
10 acting as a confidential human source working with law
11 enforcement, approximately \$170 for each Medicare beneficiary
12 referred to the Olive Clinic if the visit included blood being
13 drawn for diagnostic testing.

14 Overt Act No. 2: On or about May 4, 2018, defendants
15 MANUKYAN and TEROSIPYAN offered to pay Recruiter 3 approximately
16 \$100 for each Medicare beneficiary referred to the Olive Clinic
17 if the visit did not include blood being drawn for diagnostic
18 testing.

19 Overt Act No. 3: On or about May 4, 2018, defendants
20 MANUKYAN and TEROSIPYAN offered to pay Recruiter 3 approximately
21 \$700 per month for each Medicare beneficiary referred to a
22 hospice.

23 Overt Act No. 4: On or about May 4, 2018, defendants
24 MANUKYAN and TEROSIPYAN offered to pay Recruiter 3 approximately
25 \$700 for each Medicare beneficiary referred to a home health
26 agency.

27 Overt Act No. 5: On or about May 4, 2018, defendants
28 MANUKYAN and TEROSIPYAN instructed Recruiter 3 to pay \$50 to

1 each beneficiary Recruiter 3 brought to the Olive Clinic in
2 order to ensure the beneficiary would agree to visit the clinic.

3 Overt Act No. 6: On or about May 4, 2018, defendant
4 TEROSIPYAN paid \$100 to Recruiter 3 for the referral of Medicare
5 beneficiary A.R. to the Olive Clinic.

6 Overt Act No. 7: On or about May 8, 2018, defendants
7 MANUKYAN and TEROSIPYAN caused to be submitted a claim to
8 Medicare from the Olive Clinic for purported services provided
9 to Medicare beneficiary A.R.

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COUNT ELEVEN

[42 U.S.C. § 1320a-7b(b) (2) (A); 18 U.S.C. § 2]

34. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 through 14, 27, 28, 32, and 33 of this Indictment as though fully set forth herein.

35. On or about May 4, 2018, in Los Angeles County, within the Central District of California, and elsewhere, defendants MANUKYAN and TEROSIPYAN, together with others known and unknown to the Grand Jury, aiding and abetting one another, knowingly and willfully offered to pay and paid, and caused to be paid, remuneration, namely, \$100 cash, to a marketer, which constituted a kickback for referring Medicare beneficiary A.R. to the Olive Clinic for outpatient physician services, for which payment could be made in whole and in part under a Federal health care program, namely, Medicare.

COUNTS TWELVE AND THIRTEEN

[18 U.S.C. §§ 1028A(a)(1), 2(a), (b)]

36. The Grand Jury hereby repeats, realleges, and incorporates by reference paragraphs 1 through 14 and 27 through 29 of this Indictment as though fully set forth herein.

37. On or about the dates set forth below, in Los Angeles County, within the Central District of California, and elsewhere, defendants MANUKYAN and TEROSIPYAN, together with others known and unknown to the Grand Jury, knowingly transferred, possessed, and used, and willfully caused to be transferred, possessed, and used, without lawful authority, means of identification that defendants MANUKYAN and TEROSIPYAN knew belonged to another person, namely, the name and HICN of the Medicare beneficiary identified below, during and in relation to the offense of Health Care Fraud, a felony violation of Title 18, United States Code, Section 1347, as charged in the Counts of this Indictment identified below:

COUNT	BENEFICIARY	DATE	RELATED COUNT
TWELVE	A.R.	5/7/18	COUNT EIGHT
THIRTEEN	A.R.	5/8/18	COUNT NINE

FORFEITURE ALLEGATION ONE

[18 U.S.C. §§ 982(a)(7), 981(a)(1)(C) and 28 U.S.C. § 2461(c)]

39. Pursuant to Rule 32.2(a), Fed. R. Crim. P., notice is hereby given to defendants MANUKYAN and TEROSIPYAN that the United States will seek forfeiture as part of any sentence in accordance with Title 18, United States Code, Sections 982(a)(7) and 981(a)(1)(C) and Title 28, United States Code, Section 2461(c), in the event of any defendant's conviction under any of Counts One through Five or Counts Eight through Thirteen of this Indictment.

40. Defendant MANUKYAN shall forfeit to the United States the following property:

a. all right, title, and interest in any and all property, real or personal, that constitutes or is derived, directly or indirectly, from the gross proceeds traceable to the commission of any offense set forth in any of Counts One through Five of this Indictment; and

b. a sum of money equal to the total value of the property described in subparagraph a.

41. Defendants MANUKYAN and TEROSIPYAN shall forfeit to the United States the following property:

a. all right, title, and interest in any and all property, real or personal, that constitutes or is derived, directly or indirectly, from the gross proceeds traceable to the commission of any offense set forth in any of Counts Eight through Thirteen of this Indictment; and

1 b. a sum of money equal to the total value of the
2 property described in subparagraph a. If more than one
3 defendant is found guilty under any of Counts Eight through
4 Thirteen of this Indictment, each such defendant found guilty
5 shall be liable for the entire amount forfeited pursuant to that
6 Count.

7 42. Pursuant to Title 21, United States Code, Section
8 853(p), as incorporated by Title 18, United States Code, Section
9 982(b) and Title 28, United States Code, Section 2461(c), each
10 defendant shall forfeit substitute property, up to the total
11 value of the property described in the preceding paragraph if,
12 as a result of any act or omission of a defendant, the property
13 described in the preceding paragraph, or any portion thereof
14 (a) cannot be located upon the exercise of due diligence;
15 (b) has been transferred, sold to or deposited with a third
16 party; (c) has been placed beyond the jurisdiction of the Court;
17 (d) has been substantially diminished in value; or (e) has been
18 commingled with other property that cannot be divided without
19 difficulty.

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FORFEITURE ALLEGATION TWO

[21 U.S.C. § 853]

43. Pursuant to Rule 32.2(a), Fed. R. Crim. P., notice is hereby given to defendant MANUKYAN that the United States will seek forfeiture as part of any sentence in accordance with Title 21, United States Code, Section 853, in the event of defendant's conviction under Count Six or Seven of this Indictment.

44. Defendant MANUKYAN shall forfeit to the United States the following property:

a. all right, title, and interest in any and all property, real or personal, constituting, or derived from, any proceeds obtained, directly or indirectly, as a result of any offense set forth in Count Six or Seven of this Indictment;

b. all right, title, and interest in any and all property, real or personal, used, or intended to be used, in any manner or part, to commit, or to facilitate the commission of any offense set forth in Count Six or Seven of this Indictment; and

c. a sum of money equal to the total value of the property described in subparagraphs a. and b.

45. Pursuant to Title 21, United States Code, Section 853(p), defendant MANUKYAN shall forfeit substitute property, up to the total value of the property described in the preceding paragraph if, as a result of any act or omission of defendant, the property described in the preceding paragraph, or any portion thereof (a) cannot be located upon the exercise of due diligence; (b) has been transferred, sold to or deposited with a third party; (c) has been placed beyond the jurisdiction of the

1 Court; (d) has been substantially diminished in value; or
2 (e) has been commingled with other property that cannot be
3 divided without difficulty.

4
5 A TRUE BILL

6
7 Foreperson

8
9 NICOLA T. HANNA
10 United States Attorney

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12
13 LAWRENCE S. MIDDLETON
14 Assistant United States Attorney
15 Chief, Criminal Division

16 RANEE A. KATZENSTEIN
17 Assistant United States Attorney
18 Chief, Major Frauds Section

19 STEPHEN A. CAZARES
20 Assistant United States Attorney
21 Deputy Chief, Major Frauds Section

22 JOSEPH BEEMSTERBOER
23 Deputy Chief, Fraud Section
24 United States Department of Justice

25 DIIDRI ROBINSON
26 Assistant Chief, Fraud Section
27 United States Department of Justice

28 NIALL M. O'DONNELL
Trial Attorney, Fraud Section
United States Department of Justice