

UNITED STATES BANKRUPTCY COURT DISTRICT OF SOUTH CAROLINA	PROOF OF CLAIM	Your Claim is Scheduled As Follows: Schedule/Claim ID: s15616 AMOUNT/CLASSIFICATION: \$4,080.00 UNSECURED
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Name of Debtor: Cliffs Club & Hospitality Service Company, LLC	Case Number: 12-01237
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NOTE: See reverse and attached for List of Debtors/Case Numbers/important details. Other than claims under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for Administrative Expenses arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503(a).

Name of Creditor (the person or other entity to whom the debtor owes money or property) :

Name and address where notices should be sent:

29347866010533

Golf Art, LLC
4272 E Phillips Place
Centennial, CO 80122

RECEIVED

 APR 23 2012

 BMC GROUP

The amounts reflected above constitute your claim as scheduled by the Debtor or pursuant to a filed claim. If you agree with the amounts set forth herein, and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.

If the amounts shown above are listed as Contingent, Unliquidated or Disputed, a proof of claim must be filed except as provided in the accompanying bar date notice.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

Creditor Telephone Number () email:

Name and address where payment should be sent (if different from above):	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
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THIS SPACE IS FOR COURT USE ONLY

Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number (if known): _____

Filed on: _____

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ _____ *N/A*

If all or part of your claim is secured, complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. BASIS FOR CLAIM: _____
(See instruction #2)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: _____ <i>N/A</i>	3a. Debtor may have scheduled account as: _____ <i>N/A</i> (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ <i>N/A</i> (See instruction #3b)
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4. SECURED CLAIM: (See instruction #4)

Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.

Nature of property or right of setoff:
Describe:

Real Estate Motor Vehicle Other _____ *N/A*

Value of Property: \$ _____

Annual Interest Rate: _____ % Fixed or Variable (when case was filed)

Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____

Basis for Perfection: _____

Amount of Secured Claim: \$ _____

Amount Unsecured: \$ _____

5. Amount of Claim Entitled to Administrative Expense status under 11 U.S.C. § 503(b)(9) or Priority under 11 U.S.C. § 507(a). If any part of the claim falls into one of the following categories, check the box specifying the administrative expense or priority and state the amount.

Amount entitled to priority: \$ _____

Amount entitled to administrative expense under 11 U.S.C. § 503(b)(9): \$ _____

You MUST specify the priority of the claim:

<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
<input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use -11 U.S.C. § 507(a)(7).	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).
<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).	<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).
	<input type="checkbox"/> Value of goods received by the debtor within 20 days before the date of the bankruptcy filing - 11 U.S.C. § 503(b)(9).

* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

Cliffs POC

00206

6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and definition of "redacted").
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.
 If the documents are not available, please explain:

DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES OR EMAIL NOT ACCEPTED) so that it is actually received on or before 4:00 pm prevailing Eastern Time on May 31, 2012 for Non-Governmental Claimants OR on or before 4:00 pm prevailing Eastern Time on August 27, 2012 for Governmental Claimants.

BY MAIL TO:
 BMC Group, Inc
 Attn: Cliffs Claims Processing
 PO Box 3020
 Chanhassen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:
 BMC Group, Inc
 Attn: Cliffs Claims Processing
 18675 Lake Drive East
 Chanhassen, MN 55317

8. SIGNATURE: (See instruction #8)

Check the appropriate box.

- I am the creditor. I am the creditor's authorized agent.
 (Attach copy of power of attorney, if any.) I am the trustee, or the debtor, or their authorized agent.
 (See Bankruptcy Rule 3004.) I am a guarantor, surety, indorser, or other codebtor.
 (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: OTTO F. BUECHLE II
 Title: OWNER / PRESIDENT
 Company: GOLF ART LLC

 4.18.12
 (Signature) (Date)

Address and telephone number (if different from notice address above):

Telephone number: 303.748.2724 email: TheTrophyMAN@COMCAST.NET

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

LIST OF DEBTORS:

Case Name	Case Nbr
The Cliffs Club & Hospitality Group, Inc.	12-01220
CCHG Holdings, Inc.	12-01223
The Cliffs at Mountain Park Golf & Country Club, LLC	12-01225
The Cliffs at Keowee Vineyards Golf & Country Club, LLC	12-01226
The Cliffs at Walnut Cove Golf & Country Club, LLC	12-01227
The Cliffs at Keowee Falls Golf & Country Club, LLC	12-01229
The Cliffs at Keowee Springs Golf & Country Club, LLC	12-01230
The Cliffs at High Carolina Golf & Country Club, LLC	12-01231
The Cliffs at Glassy Golf & Country Club, LLC	12-01234
The Cliffs Valley Golf & Country Club, LLC	12-01236
Cliffs Club & Hospitality Service Company, LLC	12-01237

Golf Art, LLC dba O Trophies

4272 E. Phillips Place
Centennial, CO 80122

Finance Charge

Date	Invoice #
2/27/2012	FC 143

Bill To
The Cliffs 200 Fire Pink Way Landrum, SC 29356 Attn: Nathan Olivo

copy

Terms

Description	Amount
Finance Charges on Overdue Balance Invoice #09-2978 for 4,080.00 on 09/12/2011	62.37

We appreciate your prompt payment on or before the due date shown.

Total	\$62.37
Payments/Credits	\$0.00
Balance Due	\$62.37

Golf Art LLC dba  4272 E. Phillips Place
 Centennial, CO 80122
O Trophies

M / 1-28-12

Statement

Date
1/27/2012

copy

To:
The Cliffs 200 Fire Pink Way Landrum, SC 29356 Attn: Nathan Olivo

Amount Due	Amount Enc.
\$4,381.78	

Date	Transaction				Amount	Balance
09/11/2011	Balance forward					0.00
09/12/2011	INV #09-2978. Due 09/12/2011.				4,580.00	4,580.00
12/27/2011	INV #FC 140. Due 12/27/2011. Finance Charge				239.41	4,819.41
01/22/2012	PMT The Cliffs -partial pmt cc				-500.00	4,319.41
01/27/2012	INV #FC 142. Due 01/27/2012. Finance Charge				62.37	4,381.78
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due	
62.37	0.00	239.41	0.00	4,080.00	\$4,381.78	

Phone # 303-814-3040

Fax # 303-688-4734

E-mail vickimanzanares72@msn.com

Web Site WWW.OTROPHIES.COM

03-748-2724 Otto Buechle - Direct

Golf Art, LLC dba O Trophies

4272 E. Phillips Place
Centennial, CO 80122

MA / 1-28-12

Finance Charge

Date	Invoice #
1/27/2012	FC 142

copy

Bill To
The Cliffs 200 Fire Pink Way Landrum, SC 29356 Attn: Nathan Olivo

Terms

Description	Amount						
Finance Charges on Overdue Balance Invoice #09-2978 for 4,080.00 on 09/12/2011	62.37						
<table border="1"> <tr> <td>Total</td> <td>\$62.37</td> </tr> <tr> <td>Payments/Credits</td> <td>\$0.00</td> </tr> <tr> <td>Balance Due</td> <td>\$62.37</td> </tr> </table>		Total	\$62.37	Payments/Credits	\$0.00	Balance Due	\$62.37
Total	\$62.37						
Payments/Credits	\$0.00						
Balance Due	\$62.37						

Golf Art, LLC dba O Trophies

4272 E. Phillips Place
Centennial, CO 80122

Finance Charge

Date	Invoice #
12/27/2011	FC 140

Bill To
The Cliffs 200 Fire Pink Way Landrum, SC 29356 Attn: Nathan Olivo

Copy

Terms

Description	Amount
Finance Charges on Overdue Balance Invoice #09-2978 for 4,580.00 on 09/12/2011	239.41 0.00
Total	\$239.41
Payments/Credits	\$0.00
Balance Due	\$239.41

Golf Art, LLC

4272 E. Phillips Place
Centennial, CO 80122



O Trophies

*Tammy
country*

Invoice

DATE INVOICE #

9/12/2011 09-2978

BILL TO

The Cliffs
200 Fire Pink Way
Landrum, SC 29356
Attn: Nathan Olivo

SHIP TO

The Cliffs
200 Fire Pink Way
Landrum, SC 29356

glacie
m/9/20/11
m/10/21/11

copy

9.26.11

PO # 11572G, 11573G, 11574G, 1175G, 1176G

CLIENT #	P.O. NO.	TERMS	DUE DATE	REP	SHIP DATE	SHIP VIA	JOB #
582		Due Now	9/12/2011	OB	9/16/2011	UPS	09-582A
ITEM	DESCRIPTION		QTY	RATE		AMOUNT	
Annual Bronze A...	Bear Awards		2	650.00		1,300.00	
Annual Resin Aw...	Bear Awards		14	200.00		2,800.00	
Engraved	Engraved plaques		16	15.00		240.00	
Delivery/Shipping	Packaging, Delivery or Shipping Charges			240.00		240.00	
<i>Failed to Tammy 11 23.11</i>							
<i>Towens@cliffscommunities.com</i>							
<i>acatn4</i>							
<i>PO Box 1549</i>							
<i>Travelers Rest SC</i>							
<i>24690 out email request put</i>							
We appreciate your prompt payment on or before the due date shown.						Total	\$4,580.00

TERMS: DUE UPON RECEIPT OF INVOICE UNLESS OTHERWISE INDICATED. "A Late Payment Charge of 1 1/2% per month (18% annual rate) or the maximum amount allowed by law will be applied to this balance owed under this invoice when invoice becomes past due. If any account which is past due is turned over for collection, you will be liable for all attorney's fees and other costs of collection.

Phone #

Fax #

E-mail

Web Site

303-814-3040

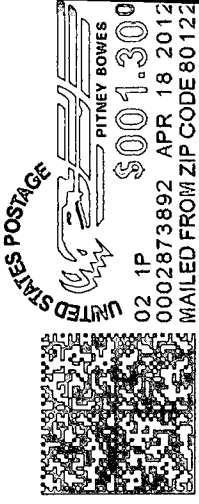
303-688-4734

vickimanzanares72@msn.com

WWW.OTROPHIES.COM

GolfArt

4272 E. Phillips Place
Centennial, CO 80122



FIRST CLASS

RECEIVED

APR 23 2012

BMC GROUP

BMC Group, INC

ATTN: Cliffs Claims Processing

P.O. Box 3020

CHAN HASSEN, MN 55317-3020