

UNITED STATES BANKRUPTCY COURT DISTRICT OF SOUTH CAROLINA **PROOF OF CLAIM**

Name of Debtor: **The Cliffs Valley Golf & Country Club**
 Case Number: **12-01236**

2012 MAR 19 PM 2:03
 U.S. BANKRUPTCY COURT
 DISTRICT OF SOUTH CAROLINA

NOTE: This form should not be used to make a claim for an administrative expense 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.

Name of Creditor (The person or other entity to whom the debtor owes money or property):
NuCO2

Name and address where notices should be sent:
NuCO2
2800 S.E. Market Place
Stuart, Florida 34997
 Telephone number: **772-221-1754**

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

Check box if you have never received any notices from the bankruptcy court in this case.

Check box if the address differs from the address on the envelope sent to you by the court.

Account or other number by which creditor identifies debtor:
XX8506

Check here replaces if this claim a previously filed claim, dated: _____
 amends

1. Basis for Claim

Goods sold

Services performed

Money loaned

Personal injury/wrongful death

Taxes

Other LEASE EQUIPMENT

Retiree benefits as defined in 11 U.S.C. § 1114(a)

Wages, salaries, and compensation (fill out below)

Your SS #: _____

Unpaid compensation for services performed

From _____ to _____ (date) (date)

RECEIVED
 APR 26 2012
 BMC GROUP

2. Date debt was incurred: 2/1/2012

3. If court judgment, date obtained:

4. Total Amount of Claim at Time Case Filed: \$ 219.88

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

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

5. Secured Claim.

Check this box if your claim is secured by collateral (including a right of setoff).
 Brief Description of Collateral:
 Real Estate Motor Vehicle
 Other

Value of Collateral: \$ _____

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

6. Unsecured Priority Claim.

Check this box if you have an unsecured priority claim.
 Amount entitled to priority \$
 Specify the priority of the claim:

Wages, salaries, or commissions (up to \$4,650)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).

Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).

Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).

Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

Other - Specify applicable paragraph of 11 U.S.C. § 507(a)()


*Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

9. 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.

THIS SPACE FOR COURT USE ONLY

Cliffs POC

 00317

Date: **3/12/12**

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): **CREST ADMIN**

Customer Number	Customer Name	Reference	Document Number	Doc Type	Invoice Date	Open Amount
138506	The Cliffs Valley		33088162	RI	2/1/2012	219.88
						219.88
National account 139931						

UNITED STATES BANKRUPTCY COURT

Tammi M. Hellwig
Clerk of Court

DISTRICT OF SOUTH CAROLINA
J. BRATTON DAVIS UNITED STATES BANKRUPTCY COURTHOUSE
1100 LAUREL STREET
COLUMBIA, SOUTH CAROLINA 29201-2423

TELEPHONE (803)765-5436
www.scb.uscourts.gov

April 24, 2012

Julia Osborne
The Cliffs Club & Hospitality, Inc.
Claims Processing/BMC Group, Inc.
18675 East Lake Drive
Chanhassen MN 55317

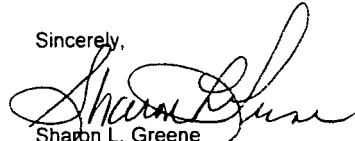
Re: The Cliffs Club & Hospitality Group, Inc.
C/A No.12-01220-jw

Dear Ms. Osborne,

On March 6, 2012, BMC Group, Inc., was appointed as the claims and noticing agent in the above captioned bankruptcy case pending in the District of South Carolina. Please find enclosed 16 proofs of claim which has been submitted for filing.


If you have any questions, please do not hesitate to contact me at (803) 765-5038.

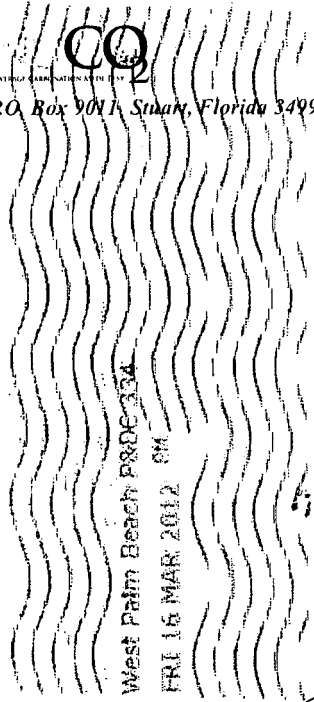
Sincerely,



Sharon L. Greene
Public Services Supervisor/Pro Se Coordinator

CO
P.O. Box 9011, Stuart, Florida 34995-9011

UNITED STATES POSTAGE

02 1M \$01.50⁰⁰
0004279249 MAR 16 2012
MAILED FROM ZIP CODE 34997



West Palm Beach PDG-334
FRI 16 MAR 2012 6M

ITEM X-RAYED
BY USMS

BANKRUPTCY CLERK'S OFFICE
J. BRATTON DAVIS U.S. BANKRUPTCY COURT
1100 LAUREL STREET
COLUMBIA, SOUTH CAROLINA 29201-2423

ORIGIN ID: LGBA (310) 321-5555
SHARON GREENE / CLERK OF COURT
J. BRATTON DAVIS UNITED STATES
BANKRUPTCY COURTHOUSE
1100 LAUREL STREET
COLUMBIA, SC 29201
UNITED STATES US

SHIP DATE: 12APR12
ACTWGT: 1.0 LB MAN
CAD: 462272/CAFE2511

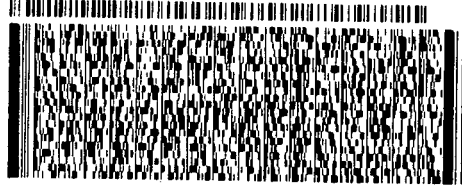
BILL SENDER

TO THE CLIFFS CLUB & HOSPITALITY, INC.
CLAIMS PROCESSING/ BMC GROUP, INC.
18675 EAST LAKE DRIVE

RECEIVED

CHANHASSEN MN 55317
(310) 321-5555
REF: CLIFFS CLAIMS

APR 26 2012
BMC GROUP



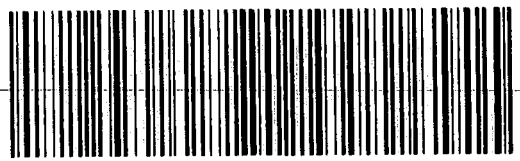
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FedEx
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0221

THU - 26 APR A1
STANDARD OVERNIGHT

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MN-US
MSP



Part # 1561MR-001 M01T US 1000

Emp# 216120 25APR12 USCA 512C1/C440/A270