

UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA

PROOF OF CLAIM



Your Claim is Scheduled As Follows:
Schedule/Claim ID: s12286
AMOUNT/CLASSIFICATION:
\$50,000.00 UNSECURED
(CONTINGENT)

Name of Debtor:
The Cliffs at Glassy Golf & Country Club, LLC

Case Number:
12-01234

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:
 29347866005157
Losier, Thomas
2 Kevin Court
Park Ridge, NJ 07656

RECEIVED
MAY 03 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 (201-391-2730) email: +LOSIER@VERIZON.NET

THIS SPACE IS FOR COURT USE ONLY

Name and address where payment should be sent (if different from above):

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

Court Claim Number (if known):

Payment Telephone Number () email:

Filed on: _____

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 50,000 -

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) Family membership - The Cliffs at Glassy Golf & Country Club LLC

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:
L00185

3a. Debtor may have scheduled account as:
(See instruction #3a)

3b. Uniform Claim Identifier (optional):
(See instruction #3b)

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.

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

Nature of property or right of setoff:

Basis for Perfection: _____

Describe:

Real Estate Motor Vehicle Other _____

Amount of Secured Claim: \$ _____

Value of Property: \$ _____

Amount Unsecured: \$ _____

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

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:

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

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

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).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

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).

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

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.



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)

NONE RECEIVED

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

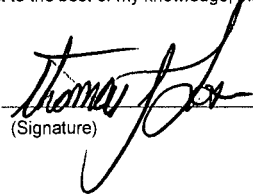
8. SIGNATURE: (See instruction #8)

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: Thomas J. Losier
 Title: _____
 Company: _____


 (Signature)

4/29/12
 (Date)

Address and telephone number (if different from notice address above): (same)
2 Kevin Court
Parr Ridge, NJ 07656

Telephone number: 201 391 2730 email: tlosier@verizon.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

A U.S. DEPARTMENT OF HOUSING & URBAN DEVELOPMENT SETTLEMENT STATEMENT		B. TYPE OF LOAN: 1. <input type="checkbox"/> FHA 2. <input type="checkbox"/> FmHA 3. <input checked="" type="checkbox"/> CONV. UNINS. 4. <input type="checkbox"/> VA 5. <input type="checkbox"/> CONV. INS.				
		6. FILE NUMBER: LOSIER			7. LOAN NUMBER:	
		8. MORTGAGE INS CASE NUMBER:				
C. NOTE: <i>This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "POC" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.</i> <small>1.0 3/98 (LOSIER, PFD, LOSIER/10)</small>						
D. NAME AND ADDRESS OF BORROWER: Thomas J. Losier and Theresa M. Losier 2 Kevin Court Park Ridge, NJ 07656		E. NAME AND ADDRESS OF SELLER: The Cliffs at Glassy, Inc.		F. NAME AND ADDRESS OF LENDER: Wachovia Bank, NA 12301 Vance Davis Drive Charlotte, NC 28262		
G. PROPERTY LOCATION: Lot 130, Cliffs at Glassy West, Sec. 6 Greenville County		H. SETTLEMENT AGENT: 57-0522927 Horton Drawdy Ward & Jenkins, P.A. PLACE OF SETTLEMENT 307 Pettigru Street Greenville, SC 29601			I. SETTLEMENT DATE: June 26, 2006	
J. SUMMARY OF BORROWER'S TRANSACTION				K. SUMMARY OF SELLER'S TRANSACTION		
100. GROSS AMOUNT DUE FROM BORROWER:				400. GROSS AMOUNT DUE TO SELLER:		
101. Contract Sales Price		237,000.00		401. Contract Sales Price		237,000.00
102. Personal Property				402. Personal Property		
103. Settlement Charges to Borrower (Line 1400)		2,524.75		403.		
104.				404.		
105.				405.		
<i>Adjustments For Items Paid By Seller in advance</i>			<i>Adjustments For Items Paid By Seller in advance</i>			
106. City/Town Taxes	to			406. City/Town Taxes	to	
107. County Taxes	to			407. County Taxes	to	
108. Assessments	06/27/06 to 07/01/06	7.67		408. Assessments	06/27/06 to 07/01/06	7.67
109. Family Membership		50,000.00		409. Family Membership		50,000.00
110.				410.		
111.				411.		
112.				412.		
120. GROSS AMOUNT DUE FROM BORROWER		289,532.42		420. GROSS AMOUNT DUE TO SELLER		287,007.67
200. AMOUNTS PAID BY OR IN BEHALF OF BORROWER:				500. REDUCTIONS IN AMOUNT DUE TO SELLER:		
201. Deposit or earnest money		15,000.00		501. Excess Deposit (See Instructions)		
202. Principal Amount of New Loan(s)		120,600.00		502. Settlement Charges to Seller (Line 1400)		85,746.63
203. Existing loan(s) taken subject to				503. Existing loan(s) taken subject to		
204.				504. Payoff of first Mortgage		
205.				505. Payoff of second Mortgage		
206.				506.		
207.				507. (Deposit disb. as proceeds)		
208.				508.		
209. Prepaid Interest Credit		33,579.00		509. Prepaid Interest Credit		33,579.00
<i>Adjustments For Items Unpaid By Seller</i>			<i>Adjustments For Items Unpaid By Seller</i>			
210. City/Town Taxes	to			510. City/Town Taxes	to	
211. County Taxes	01/01/06 to 06/27/06	730.46		511. County Taxes	01/01/06 to 06/27/06	730.46
212. Assessments	to			512. Assessments	to	
213.				513.		
214.				514.		
215.				515.		
216.				516.		
217.				517.		
218.				518.		
219.				519.		
220. TOTAL PAID BY/FOR BORROWER		169,909.46		520. TOTAL REDUCTION AMOUNT DUE SELLER		120,056.09
300. CASH AT SETTLEMENT FROM/TO BORROWER:				600. CASH AT SETTLEMENT TO/FROM SELLER:		
301. Gross Amount Due From Borrower (Line 120)		289,532.42		601. Gross Amount Due To Seller (Line 420)		287,007.67
302. Less Amount Paid By/For Borrower (Line 220)		(169,909.46)		602. Less Reductions Due Seller (Line 520)		(120,056.09)
303. CASH (X FROM) (TO) BORROWER		119,622.96		603. CASH (X TO) (FROM) SELLER		166,951.58

The undersigned hereby acknowledge receipt of a completed copy of pages 1&2 of this statement & any attachments referred to herein. I HAVE CAREFULLY REVIEWED THE HUD-1 SETTLEMENT STATEMENT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS A TRUE AND ACCURATE STATEMENT OF ALL RECEIPTS AND DISBURSEMENTS MADE ON MY ACCOUNT OR BY ME IN THIS TRANSACTION. I FURTHER CERTIFY THAT I HAVE RECEIVED A COPY OF THE HUD-1 SETTLEMENT STATEMENT.

Borrower

 Thomas J. Losier

 Theresa M. Losier

Seller The Cliffs at Glassy, Inc.
 BY: _____

TO THE BEST OF MY KNOWLEDGE, THE HUD-1 SETTLEMENT STATEMENT WHICH I HAVE PREPARED IS A TRUE AND ACCURATE ACCOUNT OF THE FUNDS WHICH WERE RECEIVED AND HAVE BEEN OR WILL BE DISBURSED BY THE UNDERSIGNED AS PART OF THE SETTLEMENT OF THIS TRANSACTION.

Horton Drawdy Ward & Jenkins, P.A.
 Settlement Agent

WARNING: IT IS A CRIME TO KNOWINGLY MAKE FALSE STATEMENTS TO THE UNITED STATES ON THIS OR ANY SIMILAR FORM. PENALTIES UPON CONVICTION CAN INCLUDE A FINE AND IMPRISONMENT. FOR DETAILS SEE: TITLE 18 U.S. CODE SECTION 1001 & SECTION 1010.

L. SETTLEMENT CHARGES				PAID FROM BORROWER'S FUNDS AT SETTLEMENT	PAID FROM SELLER'S FUNDS AT SETTLEMENT
700. TOTAL COMMISSION Based on Price	\$ 199,421.00 @ 12.0000 %		23,930.52		
<i>Division of Commission (line 700) as Follows:</i>					
701. \$ 19,942.10	to Cliffs Real Estate, Inc.				
702. \$ 3,988.42	to IMI Resort Properties, Inc.				
703. Commission Paid at Settlement					23,930.52
704.	to				
800. ITEMS PAYABLE IN CONNECTION WITH LOAN					
801. Loan Origination Fee	0.4975 % to Wachovia Bank, NA			600.00	
802. Loan Discount	% to				
803. Appraisal Fee	to Jensen Appraisal Service			375.00	
804. Credit Report	to				
805. Lender's Inspection Fee	to				
806. Mortgage Ins. App. Fee	to				
807. Assumption Fee	to				
808.					
809.					
810.					
811.					
900. ITEMS REQUIRED BY LENDER TO BE PAID IN ADVANCE					
901. Interest From 06/26/06 to 07/01/06	@ \$ /day (5 days %)				
902. Mortgage Insurance Premium for	months to				
903. Hazard Insurance Premium for	1.0 years to				
904.					
905.					
1000. RESERVES DEPOSITED WITH LENDER					
1001. Hazard Insurance	months @ \$ per month				
1002. Mortgage Insurance	months @ \$ per month				
1003. City/Town Taxes	months @ \$ per month				
1004. County Taxes	months @ \$ per month				
1005. Assessments	months @ \$ per month				
1006.	months @ \$ per month				
1007.	months @ \$ per month				
1008.	months @ \$ per month				
1100. TITLE CHARGES					
1101. Settlement or Closing Fee	to				
1102. Abstract/Title Search/Copies	to Barrett's/Horton		220.00		
1103. Title Examination	to				
1104. Title Insurance Binder	to Pettigru Title Company, Inc.		115.00		
1105. Deed Preparation	to Jeffrey H. Gray, Esq.			195.00	
1106. Notary Fees	to				
1107. Attorney's Fees	to Horton Drawdy Ward & Jenkins, P.A.		475.00		
<i>(includes above item numbers:)</i>					
1108. Title Insurance	to Pettigru Title Company, Inc.		589.75		
<i>(includes above item numbers:)</i>					
1109. Lender's Coverage	\$ 120,000.00	75.00			
1110. Owner's Coverage	\$ 237,000.00	514.75			
1111. Family Membership	to Cliffs Golf and Country Club, Inc.			50,000.00	
1112. Dues Credit	to Cliffs Golf and Country Club, Inc.			5,000.00	
1113. Road Escrow	to Cliffs Road Escrow Fund			2,500.00	
1114. Utility Installation Fee	to Cliffs Water Escrow Fund			1,250.00	
1115. Charity Donation	to Cliffs Charity Fund			1,994.21	
1116. Working Capital Contribution	to Cliffs Community Association Reserve		125.00		
1117.					
1118.					
1200. GOVERNMENT RECORDING AND TRANSFER CHARGES					
1201. Recording Fees: Deed \$ 10.00 ; Mortgage \$ 15.00 ; Releases \$			25.00		
1202. City/County Tax/Stamps: Deed ; Mortgage					
1203. State Tax/Stamps: Revenue Stamps 876.90 ; Mortgage				876.90	
1204.					
1205.					
1300. ADDITIONAL SETTLEMENT CHARGES					
1301. Survey	to				
1302. Pest Inspection	to				
1303.					
1304.					
1305.					
1400. TOTAL SETTLEMENT CHARGES (Enter on Lines 103, Section J and 502, Section K)			2,524.75		85,748.63

By signing page 1 of this statement, the signatories acknowledge receipt of a completed copy of page 2 of this two page statement.

Horton Drawdy Ward & Jenkins, P.A.
Settlement Agent

Certified to be a true copy.

STATEMENT



The Cliffs Club & Hospitality Service Company, LLC
DEBTOR IN POSSESSION
 PO Box 1279
 Travelers Rest, SC 29690
 Phone: (864) 371-1075 Fax: (864) 836-1249

MEMBER NUMBER	STATEMENT DATE
L00185	03-31-12
CHECK NUMBER	AMOUNT TO PAY

THOMAS LOSIER
 2 KEVIN CT
 PARK RIDGE NJ 07656-2454

REMITTANCE ADDRESS
 : 2 9 6 9 0 1 2 0 1 7 9 4 :
 The Cliffs Club & Hospitality Service Company, LLC
 PO Box 1279
 Travelers Rest, SC 29690

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

DATE	REF. NO.	DESCRIPTION	AMOUNT	SVC / GRAT	TAX	TOTAL
		Balance Forward				456.65
03-12-12	0000005372	Ref. 0000005372 - Payment Rece				-456.65
03-31-12	SJ3322/22	Dues - Glassy - Family	419.04	0.00	20.95	439.99
03-31-12	SJ3322/22	GL - Service Charge - NRes	15.72	0.00	0.94	16.66

PROOF of dues PAYING member

Minimum Billing Period	01-01-12	12-31-12	Remaining Food Minimum Balance	600.00	
456.65	0.00	0.00	0.00	0.00	456.65
CURRENT BAL	30 DAYS BAL	60 DAYS BAL	90 DAYS BAL	120 DAYS BAL	AMOUNT DUE

Payments to the club are not deductible as charitable contributions for income tax purposes.

The Cliffs Club & Hospitality Service Company, LLC

Please call (864) 371-1075, email ar@cliffscommunities.com, or fax (864) 836-1249 with billing questions. A late fee of 1.5% will be applied on balances over 30 days.

T. Losier
2 Kevin Ct.
Park Ridge, NJ 07656

U.S. POSTAGE
PAID
PARK RIDGE, NJ
07656
APR 30, 12
AMOUNT
\$1.10
00013085-07



55317



1000

first class

RECEIVED

MAY 03 2012

BMC GROUP

BMC Group Inc

Attn: Cliffs Claims Processing

Po. Box 3020

Chanhassen, MN 55317-3020

first class