

UNITED STATES BANKRUPTCY COURT _____ DISTRICT OF SOUTH CAROLINA		PROOF OF CLAIM
Name of Debtor: The Cliffs Club & Hospitality Group, Inc., et al d/b/a The Cliffs Golf & Country Club		Case Number: 12-01220
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Hurlie Collier		COURT USE ONLY
Name and address where notices should be sent: Collier, Hurlie 2915 Georgetown, Houston, TX 77005		<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Telephone number: _____ email: _____ (713) 646-1332 hcollier@bakerlaw.com		
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number: _____ email: _____		
1. Amount of Claim as of Date Case Filed: \$ <u>100,000.00</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Member; Member Initiation Deposit</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor: <u>s14443</u>	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 the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.		
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____
5. Amount of Claim Entitled to 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 priority and state the amount.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5).
<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"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. §507 (a)().
		Amount entitled to priority: \$ _____
*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)		

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Note: In the event this claim is allowed in Case No. 12-01220, said claim will be withdrawn in Case No. 12-01227.

7. Documents: Attached are redacted copies of any 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 the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.

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

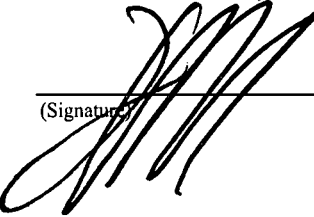
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Hurlie Collier

Title: _____

Company: _____

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



(Signature)

05/02/2012

(Date)

Telephone number: _____ email: _____

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.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

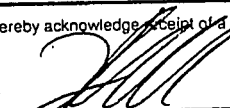
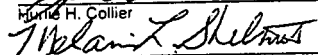
8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

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 type="checkbox"/> CONV. UNINS.	4. <input type="checkbox"/> VA	5. <input type="checkbox"/> CONV. INS.
		6. FILE NUMBER: 11-0170			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 (11-0170.PFD/11-0170/13)</small>						
D. NAME AND ADDRESS OF BUYER:		E. NAME AND ADDRESS OF SELLER:		F. NAME AND ADDRESS OF LENDER:		
Hurlie H. Collier and Melanie L. Shelnuitt 2915 Georgetown Street Houston, TX 77005		HomeTrust Bank a federally chartered Savings Bank PO Box 10 Asheville, NC 28802		Cash		
G. PROPERTY LOCATION:		H. SETTLEMENT AGENT:		I. SETTLEMENT DATE:		
33 Smokey Ridge Trail Arden, NC 28704 Buncombe County, North Carolina		26-0175902 Peltz Law Firm, PLLC PLACE OF SETTLEMENT 7 Orchard Street, Suite 100 Asheville, NC 28801		May 18, 2011		
J. SUMMARY OF BUYER'S TRANSACTION			K. SUMMARY OF SELLER'S TRANSACTION			
100. GROSS AMOUNT DUE FROM BUYER:			400. GROSS AMOUNT DUE TO SELLER:			
101. Contract Sales Price			401. Contract Sales Price			
102. Personal Property			402. Personal Property			
103. Settlement Charges to Buyer (Line 1400)			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 05/19/11 to 01/01/12			408. Assessments 05/19/11 to 01/01/12			
109.			409.			
110.			410.			
111.			411.			
112.			412.			
120. GROSS AMOUNT DUE FROM BUYER			420. GROSS AMOUNT DUE TO SELLER			
200. AMOUNTS PAID BY OR IN BEHALF OF BUYER:			500. REDUCTIONS IN AMOUNT DUE TO SELLER:			
201. Deposit or earnest money			501. Excess Deposit (See Instructions)			
202. Principal Amount of New Loan(s)			502. Settlement Charges to Seller (Line 1400)			
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. Due Diligence Fee			508. Due Diligence Fee			
209.			509.			
<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 01/01/11 to 05/19/11			511. County Taxes 01/01/11 to 05/19/11			
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 BUYER			520. TOTAL REDUCTION AMOUNT DUE SELLER			
300. CASH AT SETTLEMENT FROM/TO BUYER:			600. CASH AT SETTLEMENT TO/FROM SELLER:			
301. Gross Amount Due From Buyer (Line 120)			601. Gross Amount Due To Seller (Line 420)			
302. Less Amount Paid By/For Buyer (Line 220)			602. Less Reductions Due Seller (Line 520)			
303. CASH (X FROM) (TO) BUYER			603. CASH (X TO) (FROM) SELLER			

The undersigned hereby acknowledge receipt of a completed copy of pages 1&2 of this statement & any attachments referred to herein.

Buyer


 Hurlie H. Collier

 Melanie L. Shelnuitt

Seller

HomeTrust Bank a federally chartered Savings Bank

BY: _____

L. SETTLEMENT CHARGES

		PAID FROM BUYER'S FUNDS AT SETTLEMENT	PAID FROM SELLER'S FUNDS AT SETTLEMENT
700. TOTAL COMMISSION Based on Price	\$ [REDACTED]		
<i>Division of Commission (line 700) as Follows:</i>			
701. \$ [REDACTED] to NC Mountain Realty group			
702. \$ [REDACTED] to Whitworth Properties, LLC			
703. Commission Paid at Settlement			
704. [REDACTED] to [REDACTED]			
800. ITEMS PAYABLE IN CONNECTION WITH LOAN			
801. Loan Origination Fee	1.0000 % to		
802. Loan Discount	% to		
803. Appraisal Fee	to		
804. Credit Report	to		
805. Lender's Inspection Fee	to		
806. Mortgage Ins. App. Fee	to		
807. Assumption Fee	to		
808. Flood Certification Fee			
809.			
810.			
811.			
900. ITEMS REQUIRED BY LENDER TO BE PAID IN ADVANCE			
901. Interest From	to @ \$ /day (days %)		
902. MIP Totins. for Life/Loan 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. Aggregate Adjustment	months @ \$ per month		
1100. TITLE CHARGES			
1101. Attorneys Fee	to Peltz Law Firm, PLLC	[REDACTED]	
1102. Abstract or Title Search	to		
1103. Title Examination Fee	to		
1104. Title Insurance Binder	to		[REDACTED]
1105. Document Preparation	to Kanipe Law Firm, PLLC		
1106. Notary Fees	to		
1107. Attorney's Fees	to		
<i>(includes above item numbers:</i>			
1108. Title Insurance	to Investors Title Ins. Company	[REDACTED]	
<i>(includes above item numbers:</i>			
1109. Lender's Coverage	\$		
1110. Owner's Coverage	\$ [REDACTED]		
1111. Overnight/Courier Fees			
1112. Payoff Coordination			
1113. Copy/Fax/Postage Fee			
1200. GOVERNMENT RECORDING AND TRANSFER CHARGES			
1201. Recording Fees: Deed \$ [REDACTED] Mortgage \$ [REDACTED] Releases \$ [REDACTED]			
1202. City/County Tax/Stamps: Deed [REDACTED] Mortgage [REDACTED]			
1203. State Tax/Stamps: [REDACTED] Mortgage [REDACTED]			
1204.			
1205.			
1300. ADDITIONAL SETTLEMENT CHARGES			
1301. Survey	to		
1302. Pest Inspection	to		
1303. Golf Membership	to The Cliffs Club & Hospitality Group, Inc.	100,000.00	
1304.			
1305.			
1400. TOTAL SETTLEMENT CHARGES (Enter on Lines 103, Section J and 502, Section K)			
		[REDACTED]	[REDACTED]

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

Peltz Law Firm, PLLC
Settlement Agent

Certified to be a true copy.

DISBURSEMENTS SUMMARY / BALANCE SHEET

Buyer: Hurlie H. Collier and Melanie L. Shelnett
Seller: HomeTrust Bank a federally chartered Savings Bank
Lender: Cash
Settlement Agent: Peltz Law Firm, PLLC
 (828)255-2728
Place of Settlement: 7 Orchard Street, Suite 100
 Asheville, NC 28801
Settlement Date: May 18, 2011
Property Location: 33 Smokey Ridge Trail
 Arden, NC 28704
 Buncombe County, North Carolina

INCOMING FUNDS

Hurlie H. Collier and Melanie L. Shelnett
 Deposit/Earnest money

Total Incoming Funds

DISBURSEMENTS

NC Mountain Realty group
 Commission
 Whitworth Properties, LLC
 Commission
 Peltz Law Firm, PLLC
 Kanipe Law Firm, PLLC
 Register of Deeds
 Register of Deeds
 The Cliffs Club & Hospitality Group, Inc.
 HomeTrust Bank
 Investors Title Ins. Company
 Title Insurance

Attorneys Fee
 Document Preparation
 Recording Fees
 State Tax/Stamps
 Golf Membership
 Closing Proceeds
 Title Charges

100,000.00

Number of checks - 9

Total Disbursements

Baker Hostetler

Baker & Hostetler LLP

1000 Louisiana
Suite 2000
Houston, TX 77002-5018

T 713.751.1600
F 713.751.1717
www.bakerlaw.com

May 2, 2012

Pamela Gale Johnson
direct dial: 713.646.1324
PJohnson@Bakerlaw.com

BY UPS

BMC Group, Inc.
ATTN: Cliffs Claims Processing
18675 Lake Drive East
Chanhassen, MN 55317

Re: *Case No. 12-01220, The Cliffs Club & Hospitality Group, Inc., et al d/b/a The Cliffs Golf & Country Club; In the United States Bankruptcy Court District of South Carolina*

Gentlemen:

Enclosed for filing in the above-referenced matter are the following:

- Original and duplicate Proof of Claim in Case No. 12-01227, The Cliffs at Walnut Cove Golf & Country Club, LLC d/b/a The Cliffs Golf & Country Club; and
- Original and duplicate Proof of Claim in Case No. 12-01220, The Cliffs Club & Hospitality Group, Inc., et al, d/b/a The Cliffs Golf & Country Club.

Please mark each proof of claim with your file stamp and return one of each claim to me in the enclosed, self-addressed, metered envelope.

If you have any questions or concerns, please do not hesitate to contact me.

Regards,



Pamela Gale Johnson

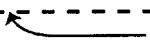
PGJ/cyd

Enclosures

Chicago Cincinnati Cleveland Columbus Costa Mesa
Denver Houston Los Angeles New York Orlando Washington, DC

<p>HURLIE COLLIER 7137511600 BAKER HOSTETLER LLP 1000 LOUISIANA SUITE 2000 HOUSTON TX 77002</p> <p>SHIP TO: BMC GROUP, INC. 8006551129 ATTN: CLIFFS CLAIMS PROCESSING 18675 LAKE DR E CHANHASSEN MN 55317-9383</p>	<p>0.0 LBS LTR 1 OF 1</p> <p>MN 559 9-56</p> 	<p>UPS NEXT DAY AIR</p> <p>1</p> <p>TRACKING #: 1Z X65 5R8 25 9629 2802</p>		<p>BILLING: P/P</p> <p>Reference No.1: 009970.009468-09468</p> <p><small>REF. 12.04.02 NY45 24.0A 01/2012</small></p> 
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FOLD on this line and place in shipping pouch with bar code and delivery address visible

1. Fold the first printed page in half and use as the shipping label.
2. Place the label in a waybill pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.
3. Keep the second page as a receipt for your records. The receipt contains information useful for tracking your package.