

UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA

PROOF OF CLAIM



Your Claim is Scheduled As Follows:
Schedule/Claim ID: s15793
AMOUNT/CLASSIFICATION:
\$6,549.10 UNSECURED

Name of Debtor:
Cliffs Club & Hospitality Service Company, LLC

Case Number:
12-01237

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:
 29347866011152
 Turf Mountain Sod Inc.
 3277 Chimney Rock Road
 Hendersonville, NC 28792

RECEIVED

MAY 07 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:

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):

Filed on: _____

Payment Telephone Number () email:

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 6,549.10

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: Goods Sold
(See instruction #2)

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

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.

Nature of property or right of setoff:
Describe:

Real Estate Motor Vehicle Other _____

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:

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

- Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).
- 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)

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: Linda P. Bradley
Title: 2nd Vice President
Company: Turf Mountain Sod Inc.

Linda P. Bradley April 20, 2012
(Signature) (Date)

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

Telephone number: email:
828 685 3642 turfmountain@bellsouth.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

TURF MOUNTAIN
Sod

3277 Chimney Rock Road, Hendersonville, N.C. 28792
828-685-3642 Fax 828-685-1121

STATEMENT



Date : 05/01/12
1
Terms: NET 30

THE CLIFFS COMMUNITIES, INC.
ACCOUNTS PAYABLE
P.O. BOX 1549
TRAVELERS REST, SC 29690

JIM ANTHONY

TRX NO.	TYPE	DATE	P.O. NO. / DESCRIPTION	CHARGES	CREDIT	BALANCE
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Balance Forward

6549.10

Thank you for your business!

6,549.10

TOTAL PAYMENTS THIS MONTH:		.00	.00	.00	6549.10	TOTAL DUE	
CURRENT	31 - 60 DAYS	61 - 90 DAYS	91 + DAYS OVER				

Date 9-27-11
 / CLIFT OF Glassy

ID: CAGPSC
 NO: I-52320
 P.O. #:
 DATE: 09/27/11
 SHIP DATE: 09/27/11
 VIA:
 TERMS: NET 30
 REF.:
 CONTACT: JIM ANTHON
 FAX #: (864) 836-1120

IN ACCOUNT WITH
TURF MOUNTAIN SOD, INC.
 (828) 685-3642
 3277 Chimney Rock Road, Hendersonville, NC 28792
 Fred W. Pittillo David Bradley F. Wayne Pittillo
 No Guarantee — Expressed or Implied

QTY	DESCRIPTION	UNIT PRICE	TOTAL
1000	1/2" max x 280000 Sod	1.70	1700.00
18	1/4" Pallet Dept	5.00	90.00
	July Ra		

Handwritten notes on grid: 'Thank you', 'EAT', and a signature.

EY
 56

UNIT PRICE	TOTAL
1.70	1700.00
5.00	90.00

Sales : 1790.00
 Freight: 175.00
 Total : 1965.00

Thank you for your business!

No guarantee implied or expressed exists with this product.

Date 4-20-11

Cliffs AT Glassy

IN ACCOUNT WITH
TURF MOUNTAIN SOD, INC.

(828) 685-3642

3277 Chimney Rock Road, Hendersonville, NC 28792

Fred W. Pittillo David Bradley Wayne Pittillo

No Guarantee — Expressed or Implied

ID.: CAGPSC
NO.: I-50617^
P.O. #:
DATE: 04/20/11
SHIP DATE: 04/20/11
VIA:
TERMS: NET 30

REF.:
CONTACT: JIM ANTHONY
FAX #: (864) 836-1120

4-20	14 pallets sod				
	Low mow blue		#	1470.00	
	1 pallets		#	70.00	
	delivery		#	175.00	
			#	1715.00	
	13 pallets returned		-	65.00	
			#	1650.00	
	THANKS, David				
	John S. ...				
	AN INTEREST CHARGE OF 1.5% PER MONTH WILL BE CHARGED ON PAST DUE ACCOUNTS				

SEY
356

	UNIT PRICE	TOTAL
	.21	1470.00
	5.00	70.00
	-5.00	-65.00

Sales : 1475.00

Freight: 175.00

TOTAL : 1650.00

Thank you for your business!

No guarantee implied or expressed exists with this product.

Date 4-18-11

CLIFFS OF GLASS

ID.: CAGPSC
NO.: I-50606
P.O. #:
DATE: 04/18/11
SHIP DATE: 04/18/11
VIA:
TERMS: NET 30

IN ACCOUNT WITH
TURF MOUNTAIN SOD, INC.

(828) 685-3642
3277 Chimney Rock Road, Hendersonville, NC 28792
Fred W. Pittillo David Bradley F Wayne Pittillo
No Guarantee — Expressed or Implied

REF.:
CONTACT: JIM ANTHON
FAX #: (864) 836-1120

9000	Low mow BT		1890	CC
18	PALET Depos. ↓	5.00	90	CC
	Deliv Fee		175	CC
51	PALET Return ↓	-5.00	-255	CC
84	Tube Return 10.00		-840	CC
			1060	CC

Thanks
GWH

AN INTEREST CHARGE OF 1.5% PER MONTH
WILL BE CHARGED ON PAST DUE ACCOUNTS

SEY
356

	UNIT PRICE	TOTAL
	.21	1890.00
	5.00	90.00
	-5.00	-255.00
	-10.00	-840.00

Sales : 885.00

Freight: 175.00

Total : 1060.00

Thank you for your business!

No guarantee implied or expressed exists with this product.

Date 4-7-01
Cliffs Glassy

IN ACCOUNT WITH
TURF MOUNTAIN SOD, INC.

(828) 685-3642
 3277 Chimney Rock Road, Hendersonville, NC 28792
 Fred W. Pittillo David Bradley R. Wayne Pittillo
 No Guarantee — Expressed or Implied

ID: CAGPSC
 NO: I-50409^
 P.O. #:
 DATE: 04/07/11
 SHIP DATE: 04/07/11
 VIA:
 TERMS: NET 30

REF.:
 CONTACT: JIM ANTHONY
 FAX #: (864) 836-1120

6210 sq ft low mow @ .21 per	1304.10
1000 yds fescue @ 1.70 per	1700.00
18 pallets @ 5.00 per dep.	90.00
23 pipe @ 10.00 per dep.	230.00
delivery (2 trips)	350.00
30 pipe returned	-300.00

SEY
356

UNIT PRICE	TOTAL
.21	1304.10
1.70	1700.00
5.00	90.00
10.00	230.00
-10.00	-300.00

Total 3374.10

Thanks,
Larry

2474.10
 600.00

 1,874.10

26/11

AN INTEREST CHARGE OF 1.5% PER MONTH
 WILL BE CHARGED ON PAST DUE ACCOUNTS

Sales : 3024.10

Freight: 350.00

TOTAL : 3374.10

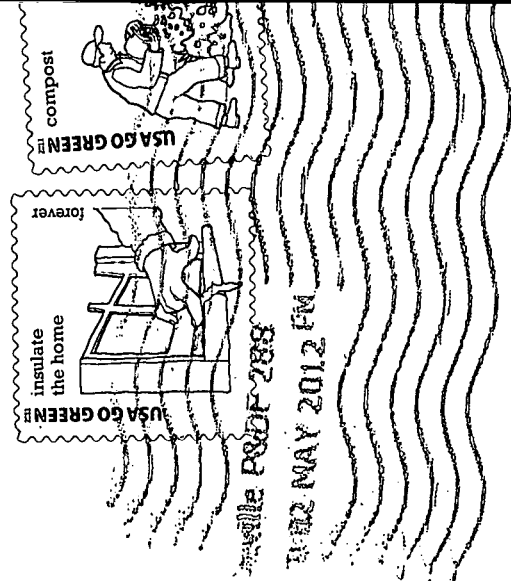
Thank you for your business!

No guarantee implied or expressed exists with this product. CREDIT - 900.00

Stand

2474.10

Jury Mtn Sod
3277 Chimney Rk Rd
H'ville NC
28792



RECEIVED
MAY 07 2012
BMC GROUP

BMC Group Inc.
Attn: Cliffs Claims Processing
PO Box 3020
Chanhassen MN

55317-3020