

<b>UNITED STATES BANKRUPTCY COURT</b>		<b>District of South Carolina</b>	<b>PROOF OF CLAIM</b>
Name of Debtor: <b>THE CLIFFS VALLEY GOLF &amp; COUNTRY CLUB, LLC</b>		Case Number: <b>12-01236</b>	
NOTE: <i>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.</i>			
Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>William Errico</b>			<b>COURT USE ONLY</b>
Name and address where notices should be sent: <b>James W. Reynolds, Esquire Odin, Feldman &amp; Pittleman, P.C. 9302 Lee Highway, Ste. 1100, Fairfax, VA 22031-1214</b>		<b>RECEIVED MAY 11 2012 BMC GROUP</b>	<input type="checkbox"/> Check this box if this claim amends a previously filed claim.
Telephone number: <b>(703) 218-2134</b> email: <b>jim.reynolds@ofplaw.com</b>			Court Claim Number: _____ <i>(If known)</i>
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: _____			
<b>1. Amount of Claim as of Date Case Filed:</b> \$ <u>60,000.00</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.			
<b>2. Basis for Claim:</b> <u>Refund of membership deposit.</u> <i>(See instruction #2)</i>			
<b>3. Last four digits of any number by which creditor identifies debtor:</b>	<b>3a. Debtor may have scheduled account as:</b> _____ <i>(See instruction #3a)</i>	<b>3b. Uniform Claim Identifier (optional):</b> _____ <i>(See instruction #3b)</i>	
<b>4. Secured Claim</b> (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.		<b>Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:</b> \$ _____	
<b>Nature of property or right of setoff:</b> <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other <b>Describe:</b>		<b>Basis for perfection:</b> _____	
<b>Value of Property:</b> \$ _____		<b>Amount of Secured Claim:</b> \$ _____	
<b>Annual Interest Rate</b> _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable <i>(when case was filed)</i>		<b>Amount Unsecured:</b> \$ _____	
<b>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.</b>			
<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).	<b>Amount entitled to priority:</b> \$ _____
<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)(____).	
*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.			
<b>6. Credits.</b> 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 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:

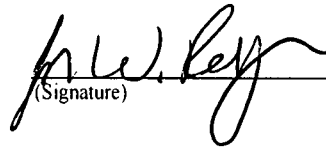
**8. Signature:** (See instruction #8)

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: James W. Reynolds  
 Title: Counsel for William Errico  
 Company: Odin, Feldman & Pittleman, P.C.  
 Address and telephone number (if different from notice address above):  
 \_\_\_\_\_  
 \_\_\_\_\_

  
 (Signature)

5/7/12  
 (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.

## DEFINITIONS

**Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

**Creditor**

A creditor is a person, corporation, or other entity to whom debtor owes a debt that was incurred before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

**Claim**

A claim is the creditor's right to receive payment for a debt owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

**Proof of Claim**

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

**Secured Claim Under 11 U.S.C. § 506 (a)**

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien.

A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

**Unsecured Claim**

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

**Claim Entitled to Priority Under 11 U.S.C. § 507 (a)**

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

**Redacted**

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of 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.

**Evidence of Perfection**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

## INFORMATION

**Acknowledgment of Filing of Claim**

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system ([www.pacer.psc.uscourts.gov](http://www.pacer.psc.uscourts.gov)) for a small fee to view your filed proof of claim.

**Offers to Purchase a Claim**

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

Windows Live Hotmail Print Message

Page 1 of 4

**RE: Club Membership**

From: **Nate Weyand** (nweyand@cliffscommunities.com)  
Sent: Wed 10/03/07 11:02 AM  
To: william errico (dadoopman@hotmail.com)  
Cc: Terri Queen (tqueen@cliffscommunities.com); Magan Boggs (mboggs@cliffscommunities.com)

Mr. Errico,

The voluntary resignation of your Golf membership will be effective October 31, 2007 as requested. I will send you a written acknowledgement as well via US mail.

I would estimate a refund in the Valley Golf priority waiting list to take approximately 26-30 months.

Thank you and I'm sorry to hear about your decision.

Best,

Nate



**Nate Weyand**

*Director, Membership Services*

The Cliffs Communities  
864.371.1019 | office  
864.313.5317 | mobile  
864.371.1563 | fax  
800.371.1000 | toll-free  
[nweyand@cliffscommunities.com](mailto:nweyand@cliffscommunities.com)

[www.cliffscommunities.com](http://www.cliffscommunities.com)

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**From:** william errico [mailto:dadoopman@hotmail.com]  
**Sent:** Monday, October 01, 2007 11:03 PM  
**To:** Nate Weyand  
**Cc:** Terri Queen  
**Subject:** Re: Club Membership

Nate, since you have no inactive status for membership, this is my official notice of

## Windows Live Hotmail Print Message

Page 2 of 4

resignation of my golf membership at the Cliffs Valley Club effective October 31, 2007..  
Please confirm and stop billing my American Express card.

Also provide me with an anticipated date when I can expect a return of the \$60,000  
initiation fee.

— Original Message —

**From:** Nate Weyand

**To:** william errico

**Sent:** Wednesday, July 18, 2007 4:23 PM

**Subject:** RE: Club Membership

Mr. Errico,

Thank you for your email. In order to process a resignation, we must receive a written request for resignation. This can be as simple as an email or a letter faxed to 864-371-1563.

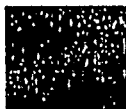
Our records indicate that you have a \$60,000 initiation deposit with the Club. I would estimate that a refund in our priority waiting list will take 16-18 months.

I'm sorry to hear that you considering resigning. Please keep in mind that the golf membership may only be transferred to your future resale buyer if you have it in good standing on the property at resale closing. Per the bylaws, the golf membership is not guaranteed to be available for your resale buyer unless you transfer it at closing.

Please let me know if you have any further questions.

Best,

Nate



**Nate Weyand**

*Director, Membership Services*

The Cliffs Communities  
864 371 1010 office



**THE CLIFFS GOLF AND COUNTRY CLUB, INC.  
VALLEY A ENROLLMENT FORM**

This is to certify that **Bill and Frieda Errico** have made application for membership in the CLIFFS GOLF AND COUNTRY CLUB. The membership classification applied for is **Valley A** membership. It is acknowledged that the applicant has submitted a payment of **Fifty thousand dollars (\$50,000)**. The following is the scheduled due dates and amounts of future payments:

**Due at Closing**

By signing this form, the Member(s) acknowledges, as a matter of record, the type of Membership classification, and its privileges, and the refund value of initiation deposit paid in the event of resignation or transfer of membership. Furthermore, the Member(s) has received a copy of the club by-laws, rules and regulations, and has an understanding of the same.

MEMBERSHIP CLASSIFICATION:	<b>Valley A</b>
MEMBERSHIP ACCOUNT NUMBER:	<b>E96</b>
INITIATION DEPOSIT PAID:	<b>\$50,000</b>
TOTAL FEES PAID:	<b>\$50,000</b>
PROPERTY REFERENCE:	<b>C/47</b>
CLOSING DATE:	<b>February 25, 2003</b>

2/20/03  
Date  
[Signature]  
Member Signature

2/26/03  
Date  
[Signature]  
Member Signature

[Signature]  
Patt M. Fero  
VP, Club & Community Relations  
The Cliffs Golf & CC, Inc.

[Signature]  
Mimsy DeMars  
Manager, Membership Services  
The Cliffs Golf & CC, Inc.

The Cliffs Clubs  
 The Cliffs at Glassy, Cliffs Valley, The Cliffs at Keowee Vineyards and The Cliffs at Walnut Cove  
 250 Knightsridge Road, Travelers Rest, South Carolina 29690  
 864-660-1100  
 www.cliffscommunities.com

### THE CLIFFS GOLF AND COUNTRY CLUB, INC MEMBERSHIP AGREEMENT

I have received and reviewed official club documents, specifically The Cliffs Golf and Country Clubs constitution and by-laws, rules and regulations, outlining the Valley Membership Program. I agree to participate and become enrolled as a member of The Cliffs Golf and Country Club, Inc. which is managed and operated by The Cliffs Golf and Country Club, Inc. and agree to pay the applicable membership fees in the amount(s) indicated below:

<u>Membership Classification</u>	<u>Membership Fees</u>
X Valley Social Athletic	\$10,000
X Valley A Golf	\$50,000
_____ Valley Sports	\$ _____

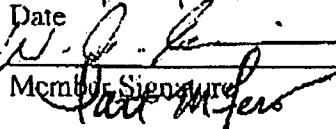
My rights and privileges as a member shall be governed by the plan documents and the club's by-laws, rules and regulations. Membership in the club does not convey any ownership, stock or equity certificate or other rights of ownership. As a member, I cannot be assessed as a matter of contract with the Club, and I assume no liability whatsoever in connection with the membership other than the payment of an applicable membership fee, dues and charges incurred by myself, my family and guests.

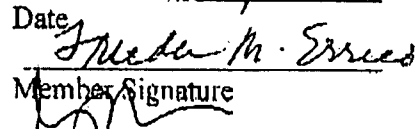
The Club reserves the right to set membership classification limitations. The Club has the plenary power to modify classes of memberships, their definitions, privileges, requirements and availability.

I shall be bound by the terms and conditions of the plan documents, as they may be amended from time to time in accordance with their terms and this membership purchase agreement.

I agree to pay the dues, fees and charges applicable to my membership classification(s) set forth by the club ownership, as it may be amended from time to time.

I hereby agree to release and discharge the Club, its ownership, affiliates, employees and agents from any and all claims and causes of actions that I may have against any of them regarding the Club membership program and facilities, except claims and causes of action arising from misrepresentations or omissions in the club documents.

2/20/03  
 Date  
  
 Member Signature  
 Matt M. Fero  
 VP, Club & Community Relations  
 The Cliffs Golf & CC, Inc.

2/26/03  
 Date  
  
 Member Signature  
 Mimsy DeMars  
 Manager, Membership Services  
 The Cliffs Golf & CC, Inc.

**THE CLIFFS GOLF AND COUNTRY CLUB, INC.  
VALLEY SOCIAL ATHLETIC MEMBERSHIP ENROLLMENT FORM**

This is to certify that **Bill and Frieda Errico** have purchased a Valley Social Athletic Membership, in conjunction with purchase of property at The Cliffs Valley Community. It is acknowledged that he/she has submitted membership fees in the amount **Ten thousand dollars (\$10,000)**. It is further agreed that the member(s) understand the membership classification purchased, its privileges and benefits, and refund values associated with a resignation from the club, as outlined in the Cliffs Golf & Country Clubs constitution and by-laws, rules and regulations.

(For office use only)

MEMBERSHIP CLASSIFICATION	Valley Social Athletic
MEMBERSHIP ACCOUNT NUMBER	E96
INITIATION DEPOSIT PAID	\$10,000
TOTAL FEES PAID	\$10,000
I.O.T REFERENCE:	C/47
CLOSING DATE:	February 25, 2003

2/20/03  
Date  
[Signature]  
Member Signature

[Signature]  
Patt M. Fero  
VP, Club & Community Relations  
The Cliffs Golf & CC, Inc.

2/25/03  
Date  
[Signature]  
Member Signature

[Signature]  
Mimsy DeMars  
Manager, Membership Services  
The Cliffs Golf & CC, Inc.



**Odin  
Feldman  
Pittleman PC**

**James W. Reynolds**  
jim.reynolds@ofplaw.com  
**Direct: 703-218-2134**

May 9, 2012

**VIA FEDERAL EXPRESS**

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

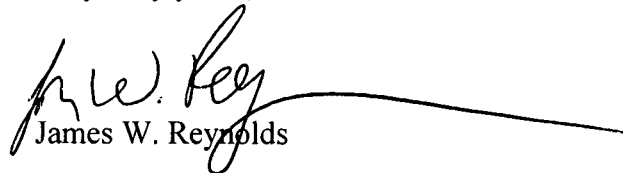
Re: The Cliffs Valley Golf & Country Club, LLC, Debtor  
U.S. Bankruptcy Court, District of South Carolina  
Case No. 12-01236

Dear Sir or Madam:

Enclosed for filing in the captioned matter is the original Proof of Claim of William Errico. I have also enclosed a copy of the Proof of Claim and a self-addressed, stamped envelope. Please provide me with a date stamped copy of the Proof of Claim.

Please feel free to contact me if you have any questions or comments regarding the enclosed.

Very truly yours,

  
James W. Reynolds

JWR/lb  
Encl.

cc: Mr. William Errico (w/enc.)

#1694226v1 55686/00001

From: (703) 218-2134  
 James W. Reynolds  
 Odin, Feldman & Pittleman, P.C.  
 9302 Lee Highway  
 Suite 1100  
 Fairfax, VA 22031

Origin ID: BCBA



J12101112190225

Ship Date: 09MAY12  
 ActWgt: 0.5 LB  
 CAD: 103932012/NET3250

Delivery Address Bar Code



Ref # 55686 / 00001  
 Invoice #  
 PO #  
 Dept #

**RECEIVED**  
**MAY 11 2012**  
**BMC GROUP**

SHIP TO: (404) 527-4000

BILL SENDER

**Attn: Cliff's Claims Processing**  
**BMC Group, Inc.**  
**18675 LAKE DR E**

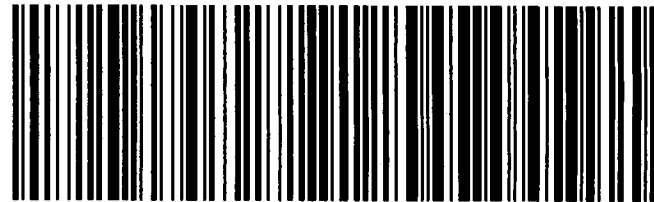
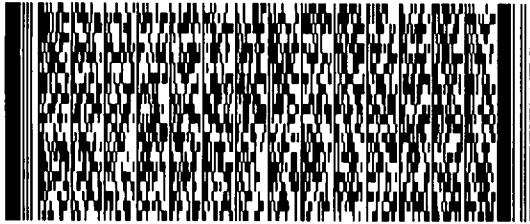
**CHANHASSEN, MN 55317**

**THU - 10 MAY A1**  
**STANDARD OVERNIGHT**

TRK# 7983 7787 8360  
 0201

**XH FBLA**

**55317**  
 MN-US  
**MSP**



512G361A4/A278

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$500, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.