

UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTH CAROLINA

PROOF OF CLAIM



Your Claim is Scheduled As Follows:
Schedule/Claim ID: s12515
AMOUNT/CLASSIFICATION:
\$27,500.00 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).

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.

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

Nancy K. Ralston

Name and address where notices should be sent:

29347866011734
Ralston, Nancy
1 May Apple Way
Landrum, SC 29356

RECEIVED

MAY 14 2012

BMC GROUP

864-895-8185 Nancy.Ralston23@att.net

Creditor Telephone Number () email:

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.

THIS SPACE IS FOR COURT USE ONLY

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 \$ 427.84 + 27,500 Unsecured above

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 attachment A
(See instruction #2)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:
0003

3a. Debtor may have scheduled account as:
R00003
(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: \$ 427.84

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)

X Nancy Ralston

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: _____
 Title: _____
 Company: _____

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

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

2. Basis for Claim

In December of 2010, I was offered a prepayment option of \$9180 for one year's dues. I accepted this option by sending a timely check in the amount of \$9180 on December 10, 2010. In August the Cliff's Hospitality determined that they did not have enough operating capital so they decided to raise everyone's dues by a \$100 per month. This was against the membership plan that was in place, because it stated that there can be no special assessment if there ^{was} is a short fall of operating revenues. Not only did they raise the dues by \$100 per month, they required that the 4 months increase be paid in September 2011. Since I had prepaid my dues for the entire year, they breached the contract with me which was a prepayment of the dues for the entire year which prevented an increase in the amount that I ^{had already} paid. In my September bill, I was assessed the additional \$400 and since I have not paid this \$400, they have started adding finance charges to my account. See attached. B

Since they have been charging me this \$400 plus interest, it shows up as an accounts receivable. This is not a valid A/R; and, therefore, should be removed as an asset in bankruptcy since it was added fraudulently. The total amount of the claim as of April 30, 2012 including interest is \$427.84. C



2011 Prepaid Dues Election Form

Please complete this form if you would like to prepay your 2011 Annual Dues. Form must be completed in its entirety and submitted along with a check made payable to The Cliffs Golf & Country Clubs by December 15, 2010 to PO Box 1279, Travelers Rest, SC 29690.

*2011 Membership Dues (check your membership type below)

Membership Type	Amount to pay
<input checked="" type="checkbox"/> Golf	\$9,180
<input type="checkbox"/> Family	\$4,380
<input type="checkbox"/> Wellness	\$3,120
<input type="checkbox"/> Sports	\$5,940
<input type="checkbox"/> Corporate	\$9,180

*Member Name: NANCY RALSTON *Home Club: Glassy

*Member Number: R0003 Phone #: (864) 895-8185

Address: 1 May Apple Way
Landrum, SC 29356

Email: nancyralston23@att.net

* Section must be completed

Your incentive credit for prepaying will be applied to your member account on January 31. This incentive credit will sit on your account, just like cash, and be applied towards charges you make on your member account.

Thank you so much for your participation and please call (864) 371-1075 with any questions.

DEADLINE: December 15, 2010

If enrolled in 2010, annual prepaid cart, locker and club storage billings for 2011 will be automatically billed to your December member account statement.

©

Nancy K. Ralson R-00003
Finance Charge on Dues Increase

10/31/2011	0.25
10/31/2011	5.76
11/30/2011	0.25
11/30/2011	5.75
12/31/2011	0.50
12/31/2011	4.10
1/31/2012	0.00
2/29/2012	4.98
3/31/2012	6.25
4/30/2012	0.00

27.84 Interest Assessed on Additional Dues

400.00 Additional Dues Assessed in Breach of Contract

427.84 Total Claim

Nancy Ralston & Bill Hunt
1 May Apple Way
Landrum, SC 29356

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**KELLER
WILLIAMS**

GREENVILLE SC 29606

UNITED STATES
MAIL

POSTAGE
NEVER FAILS



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MAY 14 2012

BMC Group Inc.

BMC
Processing

Attn: Cliffs Claims

P.O. Box 3020

Chanhassen, Mn. 55317-3020

55317+3020

