
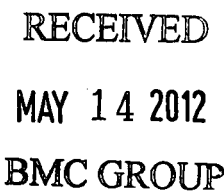




|   |   |  |  |
|---|---|--|--|
| <b>UNITED STATES BANKRUPTCY COURT<br/>DISTRICT OF SOUTH CAROLINA</b>  |   | <b>PROOF OF CLAIM</b>  |   |
| Name of Debtor:<br><b>The Cliffs at Keowee Falls Golf &amp; Country Club, LLC</b>   |   | Case Number:<br><b>12-01229</b>  | <b>Your Claim is Scheduled As Follows:<br/>Schedule/Claim ID: s14087<br/>AMOUNT/CLASSIFICATION:<br/>\$75,000.00 UNSECURED<br/>(CONTINGENT)</b>                         |
| <small>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).</small> |   |  |  |
| Name of Creditor (the person or other entity to whom the debtor owes money or property) :<br><b>BRIAN STRITT</b>  |   | <br><b>RECEIVED</b><br><br><b>MAY 14 2012</b><br><br><b>BMC GROUP</b>               |  |
| Name and address where notices should be sent:<br> 29347866005653<br>Stritt, Brian<br>23 Cleveland St., Ste A<br>Greenville, SC 29601  |   |  |  |
| Creditor Telephone Number <b>(84) 233-1101</b> email: <b>brian@palmettobenefit.com</b>  |   |  |  |
| Name and address where payment should be sent (if different from above):  |   | <input type="checkbox"/> 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. | <input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.<br><b>Court Claim Number (if known):</b> _____<br>Filed on: _____ |
| Payment Telephone Number ( ) email:   |   | <b>THIS SPACE IS FOR COURT USE ONLY</b>  |  |
| <b>1. AMOUNT OF CLAIM AS OF DATE CASE FILED</b> \$ <u>75,000</u>  |   |  |  |
| <p>If all or part of your claim is secured, complete item 4.</p> <p>If all or part of your claim is entitled to priority, complete item 5.</p> <p><input type="checkbox"/> 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.</p>                               |   |  |  |
| <b>2. BASIS FOR CLAIM:</b> <u>CWB MEMBERSHIP PURCHASED</u><br><small>(See instruction #2)</small>   |   |  |  |
| <b>3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:</b><br><u>0333</u>  |   | <b>3a. Debtor may have scheduled account as:</b><br>_____<br><small>(See instruction #3a)</small>  | <b>3b. Uniform Claim Identifier (optional):</b> _____<br><small>(See instruction #3b)</small>  |
| <b>4. SECURED CLAIM:</b> (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: \$ _____  |  |
| <b>Nature of property or right of setoff:</b><br>Describe:<br><input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____  |   | Basis for Perfection: _____  |  |
| Value of Property: \$ _____   |   | Amount of Secured Claim: \$ _____  |  |
| Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable<br><small>(when case was filed)</small>   |   | Amount Unsecured: \$ _____   |  |
| <b>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.</b>  |   |  |  |
| Amount entitled to priority: \$ _____   |   | Amount entitled to administrative expense under 11 U.S.C. § 503(b)(9): \$ _____  |  |
| <b>You MUST specify the priority of the claim:</b>  |   |  |  |
| <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).  | <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).   |  |  |
| <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"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).   |  |  |
| <input type="checkbox"/> 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).  | <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) ( _____ ).  |  |  |
|   | <input type="checkbox"/> Value of goods received by the debtor within 20 days before the date of the bankruptcy filing - 11 U.S.C. § 503(b)(9). |  |  |
| <small>* 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.</small>   |   |  |  |
|   |   |  | <b>Cliffs POC</b><br><br>00654  |
| <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 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: BRIAN STRITT  
Title: \_\_\_\_\_  
Company: \_\_\_\_\_

 5.11.12  
(Signature) (Date)

Address and telephone number (if different from notice address above):  
23 CLEVELAND ST SEA  
GREENVILLE SC 29601

Telephone number: 864-233-1101      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 |



*The Cliffs*

October 9, 2003

Mr. Brian Stritt  
31 L. West Prentiss Avenue  
Greenville, SC 29605

Dear Mr. Stritt,

Congratulations on your recent decision to purchase property in the **Cliffs at Keowee Falls South Community!** I want to take this opportunity to introduce myself and extend to you an early welcome. I have had the pleasure of being associated with the Cliffs for over ten years. I have witnessed the beginnings for all four Cliffs developments and it has been a most rewarding experience. I can attest to the fact that The Cliffs Communities have always delivered on their promises and you will not regret being a part of our great Cliffs Family!

It is my understanding that you have opted to purchase a **Keowee Falls Golf** membership. Enclosed in this membership packet are forms that need completion in order to process your memberships. Please be reminded that in order to activate and finalize your membership, your real estate transaction must be closed, membership fees received and all membership forms must be completed and returned to the club.

1. **Membership application:** Please complete this form for your membership file and return to the club. There are two designated areas for Member Name. Married couples should use one section for the husband and the other one for the wife. Please indicate your preferred mailing address (business or home) with an asterisk by the line.
2. **Membership agreement form:** Two copies are provided. Please sign and return one to the club, and retain the other copy for your files.
3. **Membership Social Athletic enrollment form:** Two copies are provided. Please sign and return one to the club, and retain the other copy for your files.
4. **Keowee Falls South Golf Membership enrollment form:** For those who have elected to purchase a Keowee Falls South A or Keowee Falls South Sports golf membership, please sign and return one copy to the club, and retain the other copy for your files.
5. **Membership card with account number:** This permanent card indicates your assigned membership account number.

All property owners at the Cliffs at Keowee Falls South are processed as Honorary Social Athletic Members of our existing Cliffs Clubs, until which time the Keowee Falls South golf course opens for play. You and your family have unlimited usage of the Cliffs

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

Clubhouses and general recreational facilities. Golf access is provided through our reciprocal golf program. Please refer to the enclosed reciprocal golf program outline for details. For those of you who elected to purchase a Keowee Falls South A or Keowee Falls South Sports membership, you may want to participate with the existing clubs as an interim golf member which would provide more golf access for you until the Keowee Falls South golf course opens for play. Please contact Mimsy DeMars, Manager of Membership Services for additional information about the interim program.

If you would like to review a copy of the existing Cliffs Clubs by-laws, rules and regulations, we will be happy to mail them to you. The Keowee Falls South membership program parallels the existing program very closely.

I would like to emphasize that we are available to assist you at all times. Please feel free to call me about any of the enclosed forms, or for additional information regarding the above. Watch for your club monthly newsletter to stay updated on all of the happenings. I look forward to seeing you soon!

Kind regards,

*Patt M. Fero*

Patt M. Fero  
Vice President  
Community & Club Relations  
The Cliffs Communities

*Mimsy DeMars*

Mimsy DeMars  
Manager  
Membership Services  
The Cliffs Communities

**THE CLIFFS AT KEOWEE FALLS SOUTH GOLF & COUNTRY CLUB  
MEMBERSHIP AGREEMENT**

I have received and reviewed official club documents, specifically The Cliffs at Keowee Falls South Golf and Country Club constitution and by-laws, rules and regulations (as modified June 1, 1999), outlining the Keowee Falls South Membership Program. I agree to participate and become enrolled as a member of The Cliffs at Keowee Falls South Golf and Country Club, 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> |
|----------|------------------------------------|------------------------|
| _____    | Keowee Falls South Social Athletic | \$ _____               |
| <b>X</b> | Keowee Falls South Golf            | <b>\$75,000.00</b>     |
| _____    | Keowee Falls South 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.

10.9.03  
 \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Member Signature  
Patt M. Fero

Patt M. Fero  
 VP, Corporate Relations  
 The Cliffs at Keowee Falls South Golf & Country Club

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Member Signature  
Mimsy

Mimsy DeMars  
 Manager, Membership Services  
 The Cliffs at Keowee Falls South Golf & Country Club



**THE CLIFFS AT KEOWEE FALLS SOUTH GOLF & COUNTRY CLUB  
KEOWEE FALLS SOUTH GOLF ENROLLMENT FORM**

This is to certify that **Brian Stritt** has made application for membership in the CLIFFS GOLF AND COUNTRY CLUB. The membership classification applied for is Keowee Falls South Golf membership. It is acknowledged that the applicant has submitted a payment of **Seventy-five thousand dollars (\$75,000)**. The following is the scheduled due dates and amounts of future payments:

**Per Terms of Promissory Note**

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>Keowee Falls South Golf</b>                  |
| MEMBERSHIP ACCOUNT NUMBER: | <b>S333</b>                                     |
| INITIATION DEPOSIT PAID:   | <b>\$75,000</b>                                 |
| TOTAL FEES PAID:           | <b>\$75,000</b>                                 |
| PROPERTY REFERENCE:        | <b>Section <u>Emerald Bay</u> Lot <u>16</u></b> |
| DATE:                      | <b>October 9, 2003</b>                          |

10.9.03  
Date

*Patt M. Fero*  
Member Signature

Patt M. Fero  
VP, Club & Community Relations  
The Cliffs at Keowee Falls South Golf Club

\_\_\_\_\_  
Date

*Mimsy DeMars*  
Member Signature

Mimsy DeMars  
Manager, Membership Services  
The Cliffs at Keowee Falls South Golf Club

-- The Cliffs Clubs --



PALMETTO BENEFIT MANAGEMENT

23 Cleveland Street, Suite A  
Greenville, SC 29601



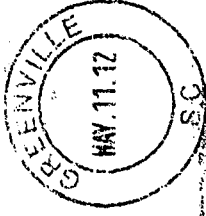
RECEIVED

MAY 14 2012

BMC GROUP



# 0000000726



BMC Group Inc.  
Attn: Cliffs Claims Processing  
PO Box 3020  
Chanhasen MN 55317-3020

55317+3020

