

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF SOUTH CAROLINA

PROOF OF CLAIM



Your Claim is Scheduled As Follows:  
Schedule/Claim ID: s15612  
AMOUNT/CLASSIFICATION:  
\$7,670.84 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).

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.

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:

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

Georgia Pine Straw Inc

Name and address where notices should be sent:

29347866010519  
Georgia Pine Straw Inc.  
148 Williams Avenue  
Lyons, GA 30436

RECEIVED

MAY 21 2012

BMC GROUP

Creditor Telephone Number (712) 526-4459 email: Leslie.4579@Bellsouth.net

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.

Payment Telephone Number ( ) email:

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 7,670.84

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

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: Darrin Ramsey  
 Title: Gen. Mgr  
 Company: G A Pine Straw, Inc  
 Address and telephone number (if different from notice address above):  
 \_\_\_\_\_  
 \_\_\_\_\_

Darrin Ramsey      5-14-12  
 (Signature)      (Date)

Telephone number: 912-526-4459      email: DarrinDKR1@AOL.com

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

# Georgia Pine Straw, Inc.

148 Williams Avenue

(912) 526-4459

Lyons, GA 30436

## Invoice

DATE	INVOICE #
11/12/2008	54791

BILL TO
Cliffs Communities, Inc. Accounts Payable Department PO Box 1549 Travelers Rest, SC 29690

SHIP TO
Mountain Park david 864-430-4863 Charles 3.05

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
11803	Net 30		11/12/2008	273	Lester	

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	AMOUNT
1,064	Straw	Bales Long Needle per David	3.25	3,458.00
1	Fuel Surcharge	Fuel Surcharge	128.10	128.10

**FAXED**  
1.29.09

Terms of Payment  
All Accounts Are Due Within 30 Days of Purchase.  
Any Accounts Not Paid Within 30 Days Become Past Due.  
A Monthly Charge of 1% Will Be Applied to Entire Past Due Balance of Account.  
Accounts Collected by Attorney Are Subject to 15% Attorney's Fee.

*David Cenn*  
David Cenn

Sales Tax (0.0%)	\$0.00
<b>Total</b>	<b>\$3,586.10</b>

**Georgia Pine Straw, Inc.**

148 Williams Avenue

(912) 526-4459

Lyons, GA 30436

**Invoice**

DATE

INVOICE #

1/22/2009

55185

**BILL TO**

Cliffs Communities, Inc.  
Accounts Payable Department  
PO Box 1549  
Travelers Rest, SC 29690

**SHIP TO**

Mountain Park  
Patrick  
864-915-3999  
Harry 3.00

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
4831	Net 30		1/22/2009	224	Lester	
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
1,008	Straw	Bales			3.00	3,024.00
1	Fuel Surcharge	Fuel Surcharge			32.03	32.03
<p><del>PAST DUE</del> <del>PLEASE REMIT PAYMENT</del></p> <p><b>FAXED</b> <u>1-29-09</u></p>						
<p>Terms of Payment All Accounts Are Due Within 30 Days of Purchase. Any Accounts Not Paid Within 30 Days Become Past Due. A Monthly Charge of 1% Will Be Applied to Entire Past Due Balance of Account. Accounts Collected by Attorney Are Subject to 15% Attorney's Fee.</p>						
<p><i>A. B. Cu</i> Dario Com</p>					<p><b>Sales Tax (0.0%)</b> \$0.00</p>	
<p>Drop 1-22-09 Harry Bayward</p>					<p><b>Total</b> \$3,056.03</p>	

# Georgia Pine Straw, Inc.

148 Williams Avenue

(912) 526-4459

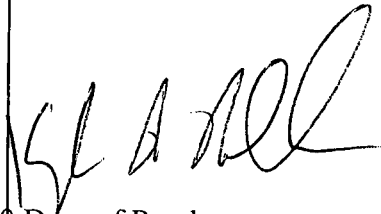
Lyons, GA 30436

## Invoice

DATE	INVOICE #
4/7/2009	55845

BILL TO
Cliffs Communities, Inc. Accounts Payable Department PO Box 1549 Travelers Rest, SC 29690

SHIP TO
Cliffs @ Keowee Vineyards 856 Clubhouse Drive Sunset SC 29685 Mac

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
9314	Net 30		4/7/2009	300	Sammuel	
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
1,064	Straw	Bales			3.00	3,192.00
1	Fuel Surcharge	Fuel Surcharge			32.01	32.01
<p>Terms of Payment                      All Accounts Are Due Within 30 Days of Purchase.                      Any Accounts Not Paid Within 30 Days Become Past Due.                      A Monthly Charge of 1% Will Be Applied to Entire Past Due Balance of Account.                      Accounts Collected by Attorney Are Subject to 15% Attorney's Fee.</p> 						
					<b>Sales Tax (0.0%)</b>	\$0.00
					<b>Total</b>	\$3,224.01

# Georgia Pine Straw, Inc.

148 Williams Avenue

(912) 526-4459

Lyons, GA 30436

## Invoice

DATE

INVOICE #

5/11/2009

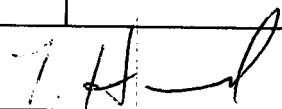
56301

### BILL TO

Cliffs Communities, Inc.  
Accounts Payable Department  
PO Box 1549  
Travelers Rest, SC 29690

### SHIP TO

Falls South  
call Patrick 864-915-3999

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
64696	Net 30		5/11/2009	324	Diaz	
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
1,064	Straw	Bales			3.00	3,192.00
1	Fuel Surcharge	Fuel Surcharge			32.03	32.03
<p>Terms of Payment All Accounts Are Due Within 30 Days of Purchase. Any Accounts Not Paid Within 30 Days Become Past Due. A Monthly Charge of 1% Will Be Applied to Entire Past Due Balance of Account. Accounts Collected by Attorney Are Subject to 15% Attorney's Fee.</p>						
					Sales Tax (0.0%) \$0.00	
					Total \$3,224.03	

**Georgia Pine Straw, Inc.**

148 Williams Avenue

(912) 526-4459

Lyons, GA 30436

**Invoice**

DATE

INVOICE #

6/1/2009

56494

**BILL TO**

Cliffs Communities, Inc.  
Accounts Payable Department  
PO Box 1549  
Travelers Rest, SC 29690

**SHIP TO**

Falls South  
call Patrick 864-915-3999

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
4947	Net 30		6/1/2009	345	Garcia	
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
1,064	Straw	Bales			3.00	3,192.00
1	Fuel Surcharge	Fuel Surcharge			30.80	30.80
<p>Terms of Payment All Accounts Are Due Within 30 Days of Purchase. Any Accounts Not Paid Within 30 Days Become Past Due. A Monthly Charge of 1% Will Be Applied to Entire Past Due Balance of Account. Accounts Collected by Attorney Are Subject to 15% Attorney's Fee.</p>						
					<b>Sales Tax (0.0%)</b>	\$0.00
					<b>Total</b>	\$3,222.80

**Georgia Pine Straw, Inc.**

148 Williams Avenue

(912) 526-4459

Lyons, GA 30436

**Invoice**

DATE	INVOICE #
6/26/2009	56671

<b>BILL TO</b>
Cliffs Communities, Inc. Accounts Payable Department PO Box 1549 Travelers Rest, SC 29690

<b>SHIP TO</b>
valley Harry 3.00

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
23414	Net 30		6/26/2009	180	Nino	
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
1,008	Straw	Bales			3.00	3,024.00
1	Fuel Surcharge	Fuel Surcharge			32.03	32.03
<p><b>FAXED</b> <u>7-23-09</u></p> <p><i>Rob Wilkins</i></p>						
<p>Terms of Payment All Accounts Are Due Within 30 Days of Purchase. Any Accounts Not Paid Within 30 Days Become Past Due. A Monthly Charge of 1% Will Be Applied to Entire Past Due Balance of Account. Accounts Collected by Attorney Are Subject to 15% Attorney's Fee.</p>						
					<b>Sales Tax (0.0%)</b>	\$0.00
					<b>Total</b>	\$3,056.03

Drop T# 180 at Cliffs Valley  
6-26-09  
Harry Hayward





## Georgia Pine Straw Inc.

148 Williams Avenue      Phone 912-526-4459      1-800-944-4753  
Lyons, Georgia 30436      Fax 912-526-8730

To Whom It May Concern:

Please note that the invoices and the claim amount are not the same. The claim amount was a settlement that was reached between the claimant and the debtor.

Thank you,

Darrien Ramsey  
Georgia Pine Straw, Inc.

**Georgia**  
**Pine Straw Inc.**  
148 Williams Avenue  
Lyons, Georgia 30436

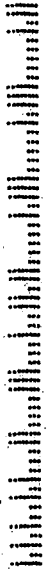
U.S. POSTAGE  
PAID  
VIDALIA, GA  
30474  
MAY 16, 12  
AMOUNT  
**\$0.65**  
00041565-01,



1000  
55317

BMC Group, Inc  
ATTN: Cliffs Claims Processing  
PO Box 3020  
Chanhassen, MN 55317-3020

RECEIVED  
MAY 21 2012  
BMC GROUP



5531733020