

UNITED STATES BANKRUPTCY COURT
DISTRICT OF SOUTHERN DISTRICT

PROOF OF CLAIM

Name of Debtor:
THE CLIFFS AT MOUNTAIN PARK Golf & COUNTRY CLUB, LLC

Case Number:
12-01225

Your Claim is Scheduled As Follows:
Schedule/Claim ID: **s12233**
ADMIN INT/CLASSIFICATION:

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 owns money or property) :

Name and address where notices should be sent:
DeCando, Dan
3505 Rio Vista Dr
Mahwah, NJ 07430

RECEIVED
MAY 21 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 EMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

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.

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 \$ **100,000.00**

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.

(See ATTACHED - TRANSFERRED FROM CLIFFS AT GLASSY Golf and Country Club to Mountain Park Golf & Country Club)

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: **CONTRACT - MEMBER INITIATION DEPOSIT**

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

3a. Debtor may have scheduled account as:

3b. Uniform Claim Identifier (optional):

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: \$

Ratio 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: \$

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 \$2,800* 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).

Amount entitled to administrative expense under 11 U.S.C. § 503(b)(9): \$

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 #8)



UNITED STATES BANKRUPTCY COURT DISTRICT OF SOUTH CAROLINA		PROOF OF CLAIM	
Name of Debtor: The Cliffs at Glassy Golf & Country Club, LLC		Case Number: 12-01234	
<p>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).</p>			
Name of Creditor (the person or other entity to whom the debtor owes money or property) :		<p>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.</p> <p>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.</p> <p>If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.</p>	
Name and address where notices should be sent: 29347866004306 DeCando, Dan 3505 Rio Vista Dr Mahwah, NJ 07430			
Creditor Telephone Number () email:			
Name and address where payment should be sent (if different from above):		<p><input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.</p> <p>Court Claim Number (If known): _____</p> <p>Filed on: _____</p>	
Payment Telephone Number () email:			
<p>1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ _____</p> <p>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.</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>			
2. BASIS FOR CLAIM: (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)			
<p>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.</p> <p>Nature of property or right of setoff: Describe:</p> <p><input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____</p> <p>Value of Property: \$ _____</p> <p>Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)</p>		<p>Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____</p> <p>Basis for Perfection: _____</p> <p>Amount of Secured Claim: \$ _____</p> <p>Amount Unsecured: \$ _____</p>	
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): \$ _____	
<p>You MUST specify the priority of the claim:</p> <p><input type="checkbox"/> Domestic support obligations: under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</p> <p><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).</p> <p><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).</p> <p><input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).</p> <p><input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).</p> <p><input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).</p> <p><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).</p>			
* 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
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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: Don DeCarlo

Title: _____
Company: _____

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

Don DeCarlo 4/26/12
 (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 3671.

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

In re **The Cliffs at Glassy Golf & Country Club, LLC**

Case No. **12-01234**

Debtor

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	CONTINGENT		AMOUNT OF CLAIM
		UNLIQUIDATED		
		DISPUTED		
Vendor No. s12010 CULBRETH, CHARLES 3800 LAXTON COURT CHARLOTTE, NC 28270	MEMBER MEMBER INITIATION DEPOSIT	X		\$75,000.00
Vendor No. s12228 CULLUM, ALLEN 4325 TRAVIS STREET DALLAS, TX 75205-4451	MEMBER MEMBER INITIATION DEPOSIT	X		\$100,000.00
Vendor No. s11971 DABDOUB, WILLIAM 100 AYSHIRE COURT SLIDELL, LA 70461	MEMBER MEMBER INITIATION DEPOSIT	X		\$75,000.00
Vendor No. s15024 DABDOUB, WILLIAM 100 AYSHIRE COURT SLIDELL, LA 70461	MEMBER MEMBER ACCOUNT BALANCE			\$361.47
Vendor No. s12231 DARBY, JEFF 3800 RIVER PLACE BOULEVARD AUSTIN, TX 78730	MEMBER MEMBER INITIATION DEPOSIT	X		\$35,000.00
Vendor No. s15105 DAUGHERTY, BOBBY PO BOX 807 BLACK MOUNTAIN, NC 28711	MEMBER MEMBER ACCOUNT BALANCE			\$15.46
Vendor No. s12436 DE ST. AUBIN, ARTHUR 780 TARPON COVE DRIVE #102 NAPLES, FL 34110	MEMBER MEMBER INITIATION DEPOSIT	X		\$5,020.00
Vendor No. s12437 DEBERRY, J. FISHER 903 CAROLINA BLVD ISLE OF PALMS, SC 29451	MEMBER MEMBER INITIATION DEPOSIT	X		\$17,000.00
Vendor No. s12233 DECANDO, DAN 3505 RIO VISTA DR MAHWAH, NJ 07430	MEMBER MEMBER INITIATION DEPOSIT	X		\$100,000.00

JEFFREY H. GRAY, P.C.

1710 HIGHWAY 11
LANDRUM, SC 29356

JEFFREY H. GRAY
ATTORNEY AT LAW

864-895-3100
FAX: 864-895-3113
EMAIL: jgray@jgraylaw.com

 COPY

May 1, 2012

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

Re: Dan Decando
Proof of Claim
Our File No. 10-48

Dear Sir:

Please be advised we represent Dan Decando.

Enclosed please find our client's Proof of Claim. You will note that this debt was originally that of Cliffs At Glassy Golf & Country Club, Inc. However, the debt was transferred to the Cliffs at Mountain Park Golf and Country Club on September 10, 2010.

In the event you require any further clarifications, please do not hesitate to contact us.

Sincerely,

JEFFREY H. GRAY, P.C.


Jeffrey H. Gray

Enclosure

FIRST CLASS

FIRST CLASS

FIRST CLASS

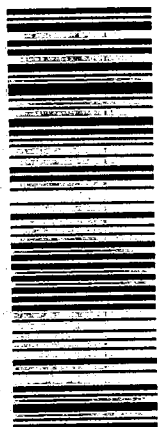
FIRST CLASS

FIRST CLASS

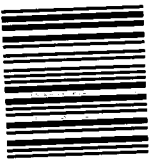
DAN DeCANDO
3505 RIO VISTA DR
MAHWAH NJ 07430

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL™



7011 3500 0003 6841 4281



55317



1000

U.S. POSTAGE
PAID
HAWTHORNE, NJ
MAY 07 2012
AMOUNT
\$6.40
000990495-05

First Class Mail

Attn: Cliff's Drivers
BMC Group Inc
P.O. Box 3020
Chanhassen MN 55317-3020

RECEIVED
MAY 21 2012
BMC GROUP