



<b>UNITED STATES BANKRUPTCY COURT DISTRICT OF SOUTH CAROLINA</b>		<b>PROOF OF CLAIM</b>	 <b>Your Claim is Scheduled As Follows: Schedule/Claim ID: s11905 AMOUNT/CLASSIFICATION: \$7,750.00 UNSECURED (CONTINGENT)</b>
Name of Debtor: <b>The Cliffs at Glassy Golf &amp; Country Club, LLC</b>		Case Number: <b>12-01234</b>	<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> <p style="text-align: center;"><b>THIS SPACE IS FOR COURT USE ONLY</b></p> <p><input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. <b>Court Claim Number (if known):</b> _____ Filed on: _____</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).			
Name of Creditor (the person or other entity to whom the debtor owes money or property) :			
Name and address where notices should be sent:  29347866000327 Orr, David 103 Moonshine Falls Trail Landrum, SC 29356		<b>RECEIVED</b>  <b>MAY 25 2012</b>  <b>BMC GROUP</b>	
Creditor Telephone Number <i>804 895 6329</i> email: <i>dorr400@bclusa.th.net</i>			
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.	
Payment Telephone Number ( ) email:			
<b>1. AMOUNT OF CLAIM AS OF DATE CASE FILED</b> \$ <u>6,000.00</u>			
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. <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.			
<b>2. BASIS FOR CLAIM:</b> <u>Initiation Deposit - \$1750 11/27/99 on settlement statement \$4250 10/24/2000 check register</u>			
<b>3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:</b>		<b>3a. Debtor may have scheduled account as:</b> (See instruction #3a)	<b>3b. Uniform Claim Identifier (optional):</b> (See instruction #3b)
<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. <b>Nature of property or right of setoff:</b> Describe: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Property: \$ _____ Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> 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: \$ _____			
<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"/> 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"/> 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"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). <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).			
* 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)			

Cliffs POC  
  
00927

**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: David J. Orr  
 Title: \_\_\_\_\_  
 Company: \_\_\_\_\_

      5-21-2012  
 (Signature)      (Date)

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

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

**A. SETTLEMENT STATEMENT**

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

OMB NO. 2502-0265



<b>B. TYPE OF LOAN</b>							
1. <input type="checkbox"/> FHA	2. <input type="checkbox"/> FmHA	3. <input type="checkbox"/> Conv. Unis.	6. FILE NUMBER	7. LOAN NUMBER	8. MORTGAGE INS CASE NUMBER		
4. <input type="checkbox"/> VA	5. <input type="checkbox"/> Conv. Ins.		99-264				

**C. NOTE:** This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "[POC]" were paid outside the closing; they are shown here for informational purposes and are not included in the totals. 4.2 05-95 (11/99-264)

<b>D. NAME AND ADDRESS OF BORROWER</b>		<b>E. NAME AND ADDRESS OF SELLER</b>		<b>F. NAME AND ADDRESS OF LENDER</b>	
David J. Orr and Cecile S. Orr 106 Kensington Drive Apt. 217 Spartanburg, SC 29304		Brent Burns and Royall Burns PO Box 8621 Greenville, SC 29604		Branch Banking & Trust Company of South Carolina P.O. Box 408 Greenville, SC 29602	

<b>G. PROPERTY LOCATION</b>		<b>H. SETTLEMENT AGENT</b>		<b>I. SETTLEMENT DATE</b>	
Lot 141, Sec 1 Glassy Mtn 1 Landrum, SC 29356 Greenville County, SC		Jeffrey H. Gray, LLC		November 5, 1999	
		<b>PLACE OF SETTLEMENT</b>			
		6 Old Highway 25 Travelers Rest, SC 29690			

<b>J. SUMMARY OF BORROWER'S TRANSACTION</b>	<b>K. SUMMARY OF SELLER'S TRANSACTION</b>
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100. GROSS AMOUNT DUE FROM BORROWER		400. GROSS AMOUNT DUE TO SELLER	
101. Contract Sales Price	51,000.00	401. Contract Sales Price	
102. Personal Property		402. Personal Property	
103. Settlement Charges to Borrower line 1400	2,770.54	403.	
104.		404.	
105.		405.	
Adjustments for items paid by Seller in advance		Adjustments for items paid by Seller in advance	
106. City/town Taxes to		406. City/town Taxes to	
107. County Taxes to		407. County Taxes to	
108. Homeowner's Dues 11-05-99 to 07-01-20	391.80	408. Homeowner's Dues 11-05-99 to 07-01-20	
109.		409.	
110. Water Tap Fee	1,250.00	410. Water Tap Fee	
111.		411.	
112.		412.	
120. GROSS AMOUNT DUE FROM BORROWER	55,412.34	420. GROSS AMOUNT DUE TO SELLER	
200. AMOUNTS PAID BY OR IN BEHALF OF BORROWER		500. REDUCTIONS IN AMOUNT DUE TO SELLER	
201. Deposit or earnest money	2,000.00	501. Excess Deposit (see instructions)	
202. Principal Amount of New Loan(s)	45,900.00	502. Settlement Charges to Seller line 1400	
203. Existing Loan(s) Taken Subject to		503. Existing Loans Taken Subject to	
204.		504. Payoff 1st Mtg to Bank of America	
205.		505. Payoff of second mortgage loan	
206.		506.	
207.		507. (Deposit disbursed as proceeds)	
208.		508.	
209.		509.	
Adjustments for items unpaid by Seller		Adjustments for items unpaid by Seller	
210. City/town Taxes to		510. City/town Taxes to	
211. County Taxes to		511. County Taxes to	
212. Homeowner's Dues to		512. Homeowner's Dues to	
213.		513.	
214.		514.	
215.		515.	
216.		516.	
217.		517.	
218.		518.	
219.		519.	
220. TOTAL PAID BY/FOR BORROWER	47,900.00	520. TOTAL REDUCTION AMOUNT DUE SELLER	
300. CASH AT SETTLEMENT FROM/TO BORROWER		600. CASH AT SETTLEMENT TO/FROM SELLER	
301. Gross Amt Due from Borrower (line 120)	55,412.34	601. Gross Amount Due to Seller (line 420)	
302. Less Amt Paid by/for Borrower (line 220)	( 47,900.00)	602. Less Reductions Due Seller (line 520)	
603 CASH [ ] FROM [ ] TO BORROWER	7,512.34	603 CASH [ ] TO [ ] FROM SELLER	

SETTLEMENT CHARGES

		PAID FROM BORROWER'S FUNDS AT SETTLEMENT	PAID FROM SELLER'S FUNDS AT SETTLEMENT
700.	Total Sales Brokers Commissions Based on Price \$ 60,000.00 @ 12.0000 % = 6,120.00 Division of Commission Line 700 as follows		
701.	\$ 6,120.00 to Cliffs Real Estate, Inc.		
702.	\$ 600.00 to Cliffs Marketing		
703.	Commission Paid to Seller's Agent		
704.			
800. ITEMS PAYABLE IN CONNECTION WITH LOAN			
801.	Loan Origination Fee 1.0000 % to Branch Banking & Trust Company	459.00	
802.	Loan Discount % to		
803.	Appraisal Fee to		
804.	Credit Report to		
805.	Lender's Inspection Fee to		
806.	Mortgage Ins. App. Fee to		
807.	Assumption Fee to		
808.			
809.			
810.			
811.			
900. ITEMS REQUIRED BY LENDER TO BE PAID IN ADVANCE			
901.	Interest from to @ \$ /day( days %)		
902.	Mortgage Insurance Premium for months to		
903.	Hazard Insurance Premium for 1 years to		
904.			
905.			
1000. RESERVES DEPOSITED WITH LENDER			
1001.	Hazard Insurance months @ \$ per month		
1002.	Mortgage Insurance months @ \$ per month		
1003.	City/Town Taxes months @ \$ per month		
1004.	County Taxes months @ \$ per month		
1005.	Homeowner's Dues months @ \$ per month		
1006.			
1007.			
1008.			
1100. TITLE CHARGES			
1101.	Commercial Carrier to Jeffrey H. Gray		
1102.	Postage, Copies, Fax to Jeffrey H. Gray	10.00	
1103.	Loan Payoff Fee to Jeffrey H. Gray, LLC		
1104.	Title Insurance Binder to		
1105.	Document Preparation to Pinnacle Title Agency, Inc.	275.00	
1106.	Notary Fees to		
1107.	Attorney's Fees to Jeffrey H. Gray	260.00	
	(includes above item numbers: )		
1108.	Title Insurance to Pinnacle Title Agency, Inc.		
	(includes above item numbers: )		
1109.	Lender's Coverage \$		
1110.	Owner's Coverage \$		
1111.			
1112.			
1113.			
1200. GOVERNMENT RECORDING AND TRANSFER CHARGES			
1201.	Recording Fees: Deed \$ 10.00 ;Mortgage \$ 11.00 ;Releases \$ 5.00	21.00	
1202.	City/County Tax/Stamps: Deed \$ ;Mortgage \$		
1203.	State Tax/Stamps: Deed \$ 188.70 ;Mortgage \$		
1204.			
1205.			
1300. ADDITIONAL SETTLEMENT CHARGES			
1301.	Survey to		
1302.	Pest Inspection to		
1303.	Cliffs Social Membership to Cliffs Golf & Country Club	1,750.00	
		55.54	

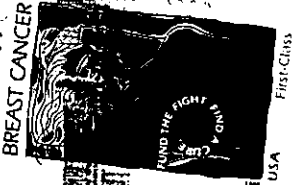
BA Checking  
5/21/2012

Check Register - *Quicken*

Date	Num	Transaction	Payment	C	Deposit	Balance
10/29/2000	EFT	Insurance Debit cat: Insurance	10.77	R		254.05
10/29/2000	5461	The Cliffs Golf And Country Club cat: MajH	4,250.00	R		

David Orr  
103 Moonshine Falls Trl  
Landrum, SC 29356-3211

GREENVILLE SC 29606  
22 MAY 2012 PM 4 L



RECEIVED

MAY 25 2012

BMC GROUP, INS GROUP

Attn: *Cliff's Claims Processing*

*PO Box 3020*

*Chanhasson, MN 55317-3020*

5531743020

