

PROOF OF CLAIM

In re
Cornerstone Ministries Investments, Inc.

Case Number
08-20355-reb

FILED
MAR 06 2008
BMC

NOTE: See Reverse for List of Debtors/Case Numbers/ Important details. This form should not be used to make a claim for an administrative expense 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.

Name of Creditor and Address: the person or other entity to who the debtor owes money or property
14327826003448
RUTH D THOMAS
MARY J GARRIS JTWROS
228 E JEFFERSON ST
YORK, SC 29745

- 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 box if you have never received any notices from the bankruptcy court or BMC Group in this case.
- Check box if this address differs from the address on the envelope sent to you by the court.

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

Creditor Telephone Number 05-792-9797

Name and address where payment should be sent (if different from above):

- Check this box if you are the debtor or trustee in this case.
- Check here replaces a previously filed claim dated _____ or amends claim number (see reverse) _____

Payment Telephone Number ()

1 AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 41,137.78
If all or part of your claim is secured, complete item 4c below; however if all of your claim is unsecured, do not complete item 4c.
If all or part of your claim is entitled to priority complete item 4b.

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:
Bonds purchased + held

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 3342
3a. Debtor may have scheduled account as:

4 CLASSIFICATION OF CLAIM

4a. UNSECURED NONPRIORITY CLAIM Total unsecured nonpriority claim: \$ 41,137.78 **DO NOT** include the priority portion of your unsecured claim here.

4b. UNSECURED PRIORITY CLAIM Total unsecured priority claim: \$ _____ **Include ONLY** the priority portion of your unsecured claim here.

Check this box ONLY if you have an unsecured claim, all or part of which is 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)
- Wages, salaries, or commissions (up to \$10,950*), 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).
- Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).
- Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family or household use - 11 U.S.C. § 507(a)(7).
- Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (____).

* Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

4c. SECURED CLAIM (See instruction #4c on reverse side.)
Check the appropriate box if your claim is secured by a lien on property or a right of set off and provide the requested information
Nature of property or right of setoff:
 Real Estate Motor Vehicle
 Other _____

Total secured claim: \$ _____
Value of Property: \$ _____ Annual Interest Rate _____ %
Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____ Basis for Perfection. _____

DO NOT include the priority or unsecured portion of your claim here.

5. CREDITS The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

6 SUPPORTING DOCUMENTS: Attach redacted copies of supporting doc such as promissory notes, purchase orders, invoices itemized statements of running accounts, contracts, court judgments mortgages, security agreements You may also attach a summary Attach redacted copies of evidence of perfection of a security interest. (See definition of "redacted" on reverse side) If the documents are not available, please explain

7 DATE-STAMPED COPY DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

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 NOT ACCEPTED) so that it is actually received on or before the Bar date.

BY MAIL TO:
Cornerstone Ministries Investments Inc.
c/o BMC Group
PO Box 900
El Segundo CA 90245-0900

BY HAND OR OVERNIGHT DELIVERY TO:
Cornerstone Ministries Investments, Inc.
c/o BMC Group
1330 East Franklin Ave
El Segundo CA 90245

THIS SPACE FOR COURT USE ONLY
Cornerstone
00386

DATE 3/27-08

SIGNATURE: The person filing this claim must sign it. Sign and print name and title, if any of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney if any
Ruth D. Thomas

CORNERSTONE
Ministries Investments, Inc.

2450 ATLANTA HIGHWAY, SUITE 903
 CUMMING, GA 30040
 (678) 455-1100

Statement
As Of 12/31/2007

Ruth D Thomas
 Mary J Garris JTWROS
 228 E Jefferson St
 York, SC 29745

BROKER

BOND #:	ISSUE DATE:	MAT DATE:	INT RATE:	INT PAID	PRINCIPAL:	UNPAID ACCD INT:	VALUE
7447	07/08/2005	07/08/2010	7.25%	Semi-Annually	20,000.00	692.78	20,692.78
8562	12/27/2006	10/01/2011	9.00%	Semi-Annually	20,000.00	445.00	20,445.00
DEBT TOTALS:					40,000.00	1,137.78	41,137.78

In re Comerston Ministries Investments, Inc
Debtor

Case No. 08-20355-reb
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO 7447							
Ruth D Thomas Mary J Garris, JTWROS 228 E Jefferson St. 29745		X	07/08/2005 \$20,000 Principle \$ 692.78 Interest		X		20,692.78
ACCOUNT NO 8562							
Ruth D Thomas Mary J Garris, JTWROS 228 E Jefferson St. 29745		X	12/27/2006 \$20,000 Principle \$ 445.00 Interest		X		20,445.00
ACCOUNT NO 7032							
Ella Ruth D Thomas Mary Jeanne Garris 228 E Jefferson St. 29745			03/30/2005 \$10,000 Principle \$ 181.25 Interest		X		10,181.25
ACCOUNT NO							
Subtotal ▶							\$
Total ▶							\$
(Use only on last page of the completed Schedule F) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							51,319.03

continuation sheets attached