


<b>UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF GEORGIA GAINESVILLE DIVISION</b>		<b>PROOF OF CLAIM</b>	
In re <b>Cornerstone Ministries Investments, Inc</b>		Case Number <b>08-20355-reb</b>	
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		<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 box if you have never received any notices from the bankruptcy court or BMC Group in this case  <input type="checkbox"/> Check box if this address differs from the address on the envelope sent to you by the court.	
Name of Creditor and Address the person or other entity to who the debtor owes money or property		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 1.2em; margin-bottom: 10px;">MAR 25 2008</div> <div style="font-size: 3em; font-weight: bold; margin-bottom: 10px;">BMC</div> <div style="font-size: 0.8em;">If you have already filed a proof of claim with the Bankruptcy Court or BMC you do not need to file again</div> <div style="font-weight: bold;">THIS SPACE IS FOR COURT USE ONLY</div>	
1432782600658 <b>CHRISTINE B ENNIS</b> 2007 BAKER TRACE DOTHAN AL 36303  <i>(334) 792-6437</i>			
Creditor Telephone Number ( )		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case  Check here if this claim <input type="checkbox"/> replaces a previously filed claim dated _____ or <input type="checkbox"/> amends claim number (see reverse) _____	
Name and address where payment should be sent (if different from above)			
Payment Telephone Number ( )			
<b>1 AMOUNT OF CLAIM AS OF DATE CASE FILED</b> \$ <u>81,739.68 as of 12-31-07</u> 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 <input checked="" 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>		<b>3 LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR</b>	
<u>Money loaned / invested / Bankrupt Company</u>		<u>2313</u>	
<b>4 CLASSIFICATION OF CLAIM</b>			
<b>4a UNSECURED NONPRIORITY CLAIM</b>		Total unsecured nonpriority claim \$ <u>81,739.68</u>	
<input type="checkbox"/> Check this box ONLY if you have an unsecured claim all or part of which is entitled to priority		DO NOT include the priority portion of your unsecured claim here	
You MUST specify the priority of the claim		Include ONLY the priority portion of your unsecured claim here	
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B)		<input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7)	
<input type="checkbox"/> 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)		<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) (____)	
* 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.			
<b>4c SECURED CLAIM</b> (See instruction #4c on reverse side)		Total secured claim \$ _____	
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		DO NOT include the priority or unsecured portion of your claim here.	
Nature of property or right of setoff:		Value of Property \$ _____ Annual Interest Rate _____ %	
<input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle		Amount of arrearage and other charges at time case filed included in secured claim if any: \$ _____ Basis for Perfection _____	
<input type="checkbox"/> Other _____			
<b>5 CREDITS</b> The amount of all payments on this claim has been credited for the purpose of making this proof of claim			
<b>6 SUPPORTING DOCUMENTS</b> Attach redacted copies of supporting documents 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.			
<b>7 DATE-STAMPED COPY</b> 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.		<b>THIS SPACE FOR COURT USE ONLY</b>	
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	
DATE <u>3/15/08</u>		Cornerstone  00638	
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. <u>Christine B. Ennis</u>			

**CORNERSTONE**  
**Ministries Investments, Inc**

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

Statement  
As Of 12/31/2007

Christine B Ennis  
2007 Baker Trace  
Dothan, AL 36303

**BROKER**

<b>BOND #</b>	<b>ISSUE DATE</b>	<b>MAT DATE</b>	<b>INT RATE</b>	<b>INT PAID</b>	<b>PRINCIPAL</b>	<b>UNPAID ACCD INT</b>	<b>VALUE</b>
2536	04/22/2003	04/01/2008	9 00%	Monthly	10,000 00	72 50	10,072 50
5044	04/13/2004	04/01/2009	8 25%	At Maturity	20,000 00	7,019 15	27,019 15
6402	08/24/2004	07/01/2009	8 25%	At Maturity	5,000 00	1,556 38	6,556 38
<b>DEBT TOTALS</b>					<b>35,000.00</b>	<b>8,648 03</b>	<b>43,648.03</b>

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BOND #.	ISSUE DATE	MAT DATE	INT RATE	INT PAID	PRINCIPAL	UNPAID ACCD INT.	VALUE
2535	04/22/2003	04/01/2008	9 00%	Monthly	10,000 00	72 50	10,072 50
5045	04/13/2004	04/01/2009	8 25%	At Maturity	20,000 00	7,019 15	27,019 15
<b>DEBT TOTALS</b>					<b>30,000.00</b>	<b>7,091.65</b>	<b>37,091.65</b>

Christine B Ennis  
2007 Baker Trace  
Dothan, Alabama 36303  
334-792-6437  
March 15, 2008

Cornerstone Ministries Investments, Inc  
c/o BMC Group  
PO Box 900  
El Segundo, CA 90245-0900

To Whom It May Concern

This correspondence is in reference to the notice I received from Cornerstone Ministries stating that they have been approved for filing Chapter 11 under the Bankruptcy Laws I have invested in this group on several occasions and am submitting my Proof of Claim in hopes of eventually recovering all or at least part of my investment

I am enclosing the Proof of Claim as well as my most recent statements from Cornerstone I have waited for a more recent statement showing my totals at the time of filing bankruptcy, but I still have not received one I feel that I should not wait any longer to file my claim If there are any questions regarding this claim or the totals of principal and interest owed to me, please contact me at the above address or telephone number I am anxiously awaiting the return of my investment or any correspondence that you might have

Sincerely,



Christine B Ennis