	PROOF OF CLAIM				
In an	Case Number		}		
In re Cornerstone Ministries Investments, Inc	1	20355-reb			
Comerstone willistries investments, inc	00-2	0333-1	# U	j	EIIFN
NOTE See Reverse for List of Debtors/Case Numbers/ important details	This form				FILED
should not be used to make a claim for an administrative expense arising a	ifter the	Che	ick box if you are		1DD 4 = 0000
commencement of the case. A request for payment of an administrative filed pursuant to 11 U.S.C. § 503	expense may be	aware th	at anyone else has		APR 16 2008
Name of Creditor and Address the person or other entity to w	vho the debtor		roof of claim relating to m. Attach copy of		
owes money or property		stateme	nt giving particulars		BMC
i di Balat i dalum tandan tarah matai ataba tahan danah atah danah sunah sunah sunah sulah data	26002818	☐ Che	ck box if you have		DIVIC
MILDRED BRIM OR ALBERT L BRIM JR		never re	ceived any notices bankruptcy court or		:
6701 CHESTER AVE #37			oup in this case	Į	
JACKSONVILLE FL 32217		☐ Che	ck box if this address	i	
		differs from the address on the lf you have already filed a proof of claim with the envelope sent to you by the Bankruptcy Court or BMC you do not need to file again			
Creditor Telephone Number 90# 258-8-000		court		i	E IS FOR COURT USE ONLY
Name and address where payment should be sent (if different from above)		Che	k this box if you are the	e debtor or trustee ii	n this case
Albert L Brim 3r			☐ renia	ICES a previous	ly filed claim dated
14607 Greenover Lane		Check here replaces a previously filed claim dated			
Jacksonville, Florida 32258	118, Florida 32258		if this claim or amends claim		ber (see reverse)
Payment Telephone Number 904 288-8000		<u> </u>	ame:	nas ciain nam	
1 AMOUNT OF CLAIM AS OF DATE CASE FILED $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	7601	07			
If all or part of your claim is secured complete item 4c below however	er if all of your cla	aım ıs uns	ecured do not complete	e 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 t					
2 BASIS FOR CLAIM (See instructions #2 and #3a on			3 LAST FOUR DIG		MBER BY WHICH CREDITOR
BOND	reverse s	side)	3a Debtor may have		
4 CLASSIFICATION OF CLAIM			\$ 94601	37	DO NOT include the priority portion
4a UNSECURED NONPRIORITY CLAIM 4b UNSECURED PRIORITY CLAIM	unsecured nonpi	nonty clair	3 1 00		of your unsecured claim here
	otal unsecured p	riority clair	n \$		Include ONLY the priority portion of your unsecured claim here
claim all or part of which is entitled to priority					
You MUST specify the priority of the claim	Γ-	Up to \$	2 425 of deposits towa	ard purchase lease	or rental of property or
Domestic support obligations under 11 U S C § 507(a)(1)(A) or (a)(1			s for personal family o		
Wages salaries or commissions (up to \$10 950) earned within 180 before filing of the bankruptcy petition or cessation of the debtors	days	Taxes	or penalties owed to go	vernmental units 1	1 U S C § 507(a)(8)
business whichever is earlier 11 U S C § 507(a)(4)	L	_	Specify applicable para		
Contributions to an employee benefit plan 11 U S C § 507(a)(5)		Amou with re	ints are subject to adjus spect to cases commen	stment on 4/1/10 and need on or after the (d every 3 years thereafter date of adjustment
4c SECURED CLAIM (See instruction #4c on reverse side)			·		DO NOT include the priority or
Check the appropriate box if your claim is secured by a lien on prope	rty or Total sec	cured clair	n \$		unsecured portion of your claim here.
a right of set off and provide the requested information Nature of property or right of setoff	Value of	Property	\$	Anr	nual Interest Rate %
Real Estate Motor Vehicle	Amount	of arreara	ge and other charges a	at time case filed in	cluded in secured claim
Other _		ıf any			sis for Perfection
5 CREDITS The amount of all payments on this claim has been					
6 SUPPORTING DOCUMENTS Attach reducted copies of s	n credited for th	e purpos	e of making this prod	of of claim	
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