UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
GAINESVILLE DIVISION

PROOF OF CLAIM

In re
Cornerstone Ministries Investments, Inc

Case Number
08-20355-reb

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

14330036001559
HARVEY M HANDFINGER
ALAINE E HANDFINGER
4212 KNOLLCREST CIRCLE
MARTINEZ GA 30907

Creditor Telephone Number (706 863-7767

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

Payment Telephone Number ( )

☐ 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

☐ Check this box if you are the debtor or trustee in this case

Check here if this claim ☐ replaces a previously filed claim dated _____ or ☐ amends claim number (see reverse) _____

1 AMOUNT OF CLAIM AS OF DATE CASE FILED $ 29,286.30

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 Certificate of Deposit - Bond
(See instructions #2 and #3a on reverse side)

3 LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 9072
3a Debtor may have scheduled account as

4 CLASSIFICATION OF CLAIM

4a UNSECURED NONPRIORITY CLAIM Total unsecured nonpriority claim $ 29,286.30 **DO NOT** include the priority portion of your unsecured claim here

4b UNSECURED PRIORITY CLAIM

☐ Check this box ONLY if you have an unsecured claim all or part of which is entitled to priority

Total unsecured priority claim $ _____ Include **ONLY** the priority portion of your unsecured claim here

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

Total secured claim $ _____ **DO NOT** include the priority or unsecured portion of your claim here

Nature of property or right of setoff

☐ Real Estate ☐ Motor Vehicle

☐ Other _____

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 _____

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
444 N Nash St
El Segundo CA 90245 2822

THIS SPACE FOR COURT USE ONLY
FILED
SEP 22 2008
BMC GROUP

DATE 9/19/08

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

Harvey M Handfinger Harvey M Handfinger Owner

Penalty for presenting fraudulent claim is a fine of up to $500 000 or imprisonment for up to 5 years or both 18 U S C §§ 152 AND 3571

Cornerstone
01367

PURCHASE AGREEMENT

(For assistance in filling out this form, please see the reverse side)

Cornerstone Ministries Investments, Inc.
2450 Atlanta Highway, Suite 903
Cumming, GA 30040
(678) 455-1100

Please redeem Cornerstone Ministries Investments, Inc. Bond # AJ4138 for the entire principal and interest due upon the maturity date, purchase a new bond and register in the name shown below. ~~I have received the Prospectus. I certify (i) that the~~ number shown on this form is my correct taxpayer identification number, and (ii) that I am not subject to backup withholding.

Signature: _____ Date _____

Signature: _____ Date _____

Enclosed is payment for purchase:

9072

Five-Year Bond: $ 27,142.29 Interest paid monthly (for investments of $10,000 or more) _____
(minimum $500) semi-annually _____ compounded _____

_____ **Shares at $6.50 per share =** $ _____ total investment.
(minimum $100)

Make checks payable to: Cornerstone Ministries Investments, Inc.

Register in the following name(s):

Name(1) Harvey Handfinger Social Security or Taxpayer ID number _____ Birthdate _____

Name (2) Alaine Handfinger Social Security or Taxpayer ID number _____

As (check one):

Individual _____ **Joint Tenants** _____ **Transfer on Death** _____ (attach instructions)

Tenants in Common _____ **Custodial** (owned by minors) _____

Corporation _____ **Trust** _____ **Other** _____

RETIREMENT ACCOUNT ( ) Traditional IRA ( ) Roth IRA ( ) KEOGH Custodian: _____

Mailing Address for the person(s) who will be registered owner(s):

Address: _____

City, State & Zip Code: _____ e-mail address: _____

Telephone Number: Business: ( ) _____ Home: ( ) _____

Please attach any special mailing instructions other than shown above
NO SUBSCRIPTION IS EFFECTIVE UNTIL ACCEPTANCE
You will be mailed a signed copy of this agreement to retain for your records.

Subscription accepted by Cornerstone Ministries Investments, Inc. and its sales representative:

Sylvia Hoglinger Date _____

Broker/Dealer _____ Broker _____

CONFIRMATION OF PURCHASE

Cornerstone Ministries Investments, Inc.
2450 Atlanta Highway, Suite 903, Cumming, GA 30040
(678) 455-1100

BOOK ENTRY

(Certificates are not issued, but entered as book entry at Transfer Online, Portland, Oregon)

Thanks for your partnership with us! Your investment is confirmed as follows:

REGISTRATION:

Harvey M. Handfinger
Alaine E. Handfinger
4212 Knollcrest Circle
Martinez GA 30907

AMOUNT:	ISSUE DATE:	MATURITY DATE:	CERTIFICATE #:
$27,142.29	3/15/2007	1/1/2012	9072

TYPE OF CERTIFICATE:
5 Year Bond 8.25% Compound Interest

OTHER REMARKS:
Replaces AJ4-138, matured 3/15/07.

Litho in U.S.A.
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