

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
GAINESVILLE DIVISION

PROOF OF CLAIM

In re
Cornerstone Ministries Investments, Inc

Case Number
08-20355-reb

FILED

SEP 29 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

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

Name of Creditor and Address the person or other entity to who the debtor owes money or property

14330036005543
WATSON BYRON W
PO BOX 327
NEWBERN AL 36765

Creditor Telephone Number (334) 628-4322

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 _____
if this claim or
 amends claim number (see reverse) _____

Payment Telephone Number ()

1 AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 6666.67
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 # 6413

(See instructions #2 and #3a on reverse side)

3 LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

3a Debtor may have scheduled account as _____

4 CLASSIFICATION OF CLAIM

4a UNSECURED NONPRIORITY CLAIM

Total unsecured nonpriority claim \$ 6666.67 + interest

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

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 docs 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

FILED
THIS SPACE FOR COURT USE ONLY
SEP 29 2008
BMC

Cornerstone



01534

DATE

09/24/2008

SIGNATURE

Byron W. Watson

The person filing this claim must sign it Sign and print name and title If any of the creditor claim and state address and telephone number if different from the notice address above

Byron W. Watson

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

Byron W. Watson
P O Box 327
Newbern AL 36756

AMOUNT	ISSUE DATE.	MATURITY DATE.	CERTIFICATE #.
\$6,666 67	09/13/2004	07/01/2009	6491B

TYPE OF CERTIFICATE

Rate	8.25%
Payment Schedule	At Maturity
Compounding Schedule	Semi-Annually

OTHER REMARKS

Re-register Twynette Yeager Bond #6491
Divide between Karen Thomas, Byron
Watson, William Watson

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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 whom the debtor owes money or property

*Byron W. Watson
P.O. Box 327
Newbern, AL 36765*

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 notice 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 (904) *628-4322*

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 _____
if this claim or
 amends claim number (see reverse): _____

Payment Telephone Number ()

1 AMOUNT OF CLAIM AS OF DATE CASE FILED \$ *6,666.67*

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 # 64918

(See instructions #2 and #3a on reverse side.)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

3a. Debtor may have scheduled account as:

4 CLASSIFICATION OF CLAIM.

4a. UNSECURED NONPRIORITY CLAIM

Total unsecured nonpriority claim: \$ *6,666.67 + interest*

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: \$ _____

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

Value of Property \$ _____ Annual Interest Rate: _____ %

Amount of arrearage and other charges at this case filed included in secured claim, if any: \$ _____ Date 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 docs 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

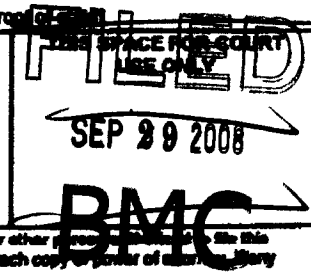
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

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

BY HAND OR OVERBOUNT DELIVERY TO:
Cornerstone Ministries Investments, Inc.
c/o BMC Group
444 N Nash St
El Segundo CA 90245-2822



DATE
05/19/2008

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

Byron W. Watson
Byron W. Watson

PO Box 327
Newbern, Alabama 36765

September 24, 2008


BMC Group
Attn Cornerstone Ministries Investments, Inc
PO Box 900
El Segundo, California 90245-0900

Dear Sirs,

This is the second filing of a claim on my certificates The first claim was filed on May 19, 2008 but it has not yet appeared on your web posting When contacted about that fact I was sent another form to fill out Please find that form enclosed along with copies of my Confirmation of Purchase and first filing on both bonds that I am claiming

Please send me confirmation of receipt of these claims

Sincerely,

A handwritten signature in black ink, appearing to read "Byron W. Watson". The signature is fluid and cursive, with the first name "Byron" being the most prominent part.

Byron W Watson