


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		<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="border: 1px solid black; padding: 2px;"> 14330036004929 MYLES REVOCABLE LIVING TRUST DALTON K OR MARTHA R MYLES TTEES 11924 TARRYNOT LN CARMEL IN 46033 </div>		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 317 846-9085		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case	
Name and address where payment should be sent (if different from above) <div style="border: 1px solid black; padding: 5px; font-size: large;"> (SAME) </div>		Check here <input type="checkbox"/> replaces a previously filed claim dated _____ if this claim or <input type="checkbox"/> amends claim number (see reverse) _____	
Payment Telephone Number ()			
1 AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 41,126.17 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			
2 BASIS FOR CLAIM <div style="border: 1px solid black; padding: 5px; font-size: large;"> CERTIFICATES (BONDS) </div>		(See instructions #2 and #3a on reverse side) 3 LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR <u>7516</u> 3a Debtor may have scheduled account as	
4 CLASSIFICATION OF CLAIM			
4a UNSECURED NONPRIORITY CLAIM		Total unsecured nonpriority claim \$ _____ DO NOT include the priority portion of your unsecured claim here	
4b UNSECURED PRIORITY CLAIM <input type="checkbox"/> 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 <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B) <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"/> Contributions to an employee benefit plan 11 U.S.C. § 507(a)(5)		Total unsecured priority claim \$ _____ Include ONLY the priority portion of your unsecured claim here <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"/> Taxes or penalties owed to governmental units 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other Specify applicable paragraph of 11 U.S.C. § 507(a) () <i>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</i>	
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 <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> 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 <u>at time case filed</u> 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 performance 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			THIS SPACE FOR COURT FILED <div style="font-size: large;">OCT 15 2008</div> BMC GROUP
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	
DATE 10/8/08	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 <div style="font-family: cursive; font-size: large;"> Dalton K. Myles Trustee </div>		

COPY March 28, 2008 M.R. Myers, Jr.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF GEORGIA GAINESVILLE DIVISION		PROOF OF CLAIM	
In re: Cornerstone Ministries Investments, Inc.		Case Number: 08-20355-reb	
<small>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.</small>		<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  14327826002871 MYLES REVOCABLE LIVING TRUST DALTON K MYLES OR MARTHA R MYLES TRUSTEES 11924 TARRYNOT LN CARMEL, IN 46033		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case. <input type="checkbox"/> replaces a previously filed claim dated _____ or <input type="checkbox"/> amends claim number (see reverse): _____	
Creditor Telephone Number (219) 846 9085		THIS SPACE IS FOR COURT USE ONLY	
Name and address where payment should be sent (if different from above): JAME		<input type="checkbox"/> Check here if this claim	
Payment Telephone Number ()		Check this box if you are the debtor or trustee in this case.	
1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 41,126.17 <small>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.</small>			
<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.			
2. BASIS FOR CLAIM: 3-FIXED RATE BONDS		3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 9516 <small>3a. Debtor may have scheduled account as:</small>	
4. CLASSIFICATION OF CLAIM.			
4a. UNSECURED NONPRIORITY CLAIM		Total unsecured nonpriority claim: \$	
4b. UNSECURED PRIORITY CLAIM		Total unsecured priority claim: \$	
<input type="checkbox"/> 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: <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B) <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"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).		<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"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____) <small>* 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.</small>	
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: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other		Total secured claim: \$ Value of Property: \$ Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ Annual Interest Rate: % 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 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.) <small>If the documents are not available, please explain.</small>			
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.		THIS SPACE FOR COURT USE ONLY	
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 3/28/2008		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. <i>Dalton K Myles Trustee, Martha R Myles Trustee</i>	

CORNERSTONE
Ministries Investments, Inc.

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

Statement
As Of 12/31/2007

Myles Revocable Living Trust
Dalton K Myles or Martha R Myles trustees
11924 Tarrynot Ln
Carmel IN 46033

BROKER
Wellstone-Sickert

BOND #	ISSUE DATE	MAT DATE	INT RATE	INT PAID	PRINCIPAL	UNPAID ACCD INT	VALUE.
6774	11/22/2004	11/22/2009	7.75%	Semi-Annually	12,000.00	98.17	12,098.17
9048	03/15/2007	01/01/2012	9.00%	Semi-Annually	18,000.00	805.50	18,805.50
9269	05/17/2007	04/01/2012	9.00%	Semi-Annually	10,000.00	222.50	10,222.50
DEBT TOTALS					40,000.00	1,126.17	41,126.17

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

Myles Revocable Living Trust
Dalton K. Myles or Martha R Myles trustees
38 Lansdowne Lane
Carmel IN 46033

AMOUNT	ISSUE DATE	MATURITY DATE	CERTIFICATE #.
\$12,000 00	11/22/2004	11/22/2009	6774

TYPE OF CERTIFICATE:

Graduated Bond Paid Semi-Annually

Year One 6 25%,
Year Two 6 75%,
Year Three 7 25%,
Year Four 7 75%,
Year Five 8 25%,

OTHER REMARKS

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.

Myles Revocable Living Trust
Dalton K. Myles or Martha R Myles trustees
11924 Tarrynot Ln
Carmel IN 46033

AMOUNT	ISSUE DATE.	MATURITY DATE	CERTIFICATE #
\$18,000 00	3/15/2007	1/1/2012	9048

TYPE OF CERTIFICATE:

5 Year Bond 8 25% Semi-annual interest

OTHER REMARKS

Replaces AH8-65, matured 3/15/07, plus
additional funds of \$10,000 00

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

Myles Revocable Living Trust
Dalton K Myles or Martha R Myles trustees
11924 Tarrynot Ln
Carmel IN 46033

AMOUNT.	ISSUE DATE.	MATURITY DATE	CERTIFICATE #
\$10 000 00	5/17/2007	4/1/2012	9269

TYPE OF CERTIFICATE

Rate	8.25%
Payment Schedule	Semi-Annually
Compounding Schedule	None

OTHER REMARKS:

October 8, 2008

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

From Myles Revocable Living Trust
Dalton K or Martha R Myles, Trustees

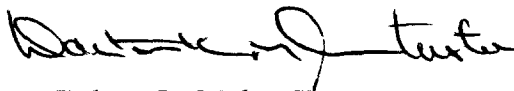
Ref Proof of Claim filed with BMC 4/4/08
Case Number 08-20355-REB

Gentlemen


This letter is a follow up to the enclosed Proof of Claim filed with BMC 4/4/08 (copy enclosed) Another exact form is submitted for your evaluation I do not believe this additional form is necessary, yet since it was sent to me, I am returning the same form, in case the court considers it a requirement Also enclosed are copies of my original certificates issued to the Myles Revocable Living Trust which are dated 11/22/04, 3/13/07, and 5/17/07

We trust and pray the Proof of Claim form is properly completed

Thank you



Dalton, K Myles, Trustee



Martha R Myles, Trustee