

**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  
  
John T Ottinger, Jr, Director, Officer  
Cornerstone Ministries Investments, Inc  
2450 Atlanta Hwy, Ste 904  
Cumming, GA 30040

- 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**

Creditor Telephone Number ( )  
  
Name and address where payment should be sent (if different from above)  
John T Ottinger, Jr, Director, Officer  
6020 Providence Lane  
Cumming GA 30040

- 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 § UNKNOWN / UNLIQUIDATED  
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  
**SEE ATTACHED**

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 \$ \_\_\_\_\_ **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 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  
1330 East Franklin Ave  
El Segundo, CA 90245

**FILED**  
**USE ONLY**  
NOV 03 2008  
**BMC**  
Cornerstone

DATE  
10/30/08

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

Any and all contingent liabilities arising out of my duties as an officer and/or director of debtor as well as monies owed, if any, from director and officers insurance as a result of a finding of liability

RECEIVED  
 NOV 03 2008  
 BMC GROUP

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REFERENCE NUMBER  
**2X7942**

TELEPHONE  
 678-341-2740

**CORNERSTONE MINISTRIES**  
 2450 ATLANTA HWY RM 904

**CUMMING GA 30040-1252**

SHIP TO: *Cornerstone Ministries* TELEPHONE *888-709-0100*  
 31/Oct/2008 19:34 09023

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 BMC GROUP  
 444 N NASH ST  
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