

UNITED STATES BANKRUPTCY COURT Northern District of Texas (Dallas Division)

PROOF OF CLAIM

Name of Debtor: Erickson Retirement Communities, LLC

Case Number: 09-37010

NOTE: 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 (the person or other entity to whom the debtor owes money or property):

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent:

20835747900163
PRESS EXPRESS
7483 C CANDLEWOOD ROAD
HANOVER, MD 21076

YOUR CLAIM IS SCHEDULED AS:
Schedule/Claim ID: s846
AMOUNT/CLASSIFICATION
\$423.00 UNSECURED

Court Claim Number: (If known)

Filed on:

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

RECEIVED
DEC 29 2009
BMC GROUP

Telephone number: 410-850-4403

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

1. Amount of Claim as of Date Case Filed: \$ 423.00

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

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.

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

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)( ).

Amount entitled to priority:

\$

\*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.

2. Basis for Claim: goods sold

3. Last four digits of any number by which creditor identifies debtor:

3a. Debtor may have scheduled account as:

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: Real Estate Motor Vehicle Other

Value of Property: \$ Annual Interest Rate %

Amount of arrearage and other charges as of time case filed included in secured claim,

if any: \$ Basis for perfection:

Amount of Secured Claim: \$ Amount Unsecured: \$

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements.

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

If the documents are not available, please explain:

Date: 12/24/09

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.

Merle Lebowitz, President

FOR COURT USE ONLY

Erickson Ret. Comm. LLC



00198

# PRESS EXPRESS

7483-C Candlewood Road  
Hanover, Maryland 21076  
www.pressexpress.com  
p 410 850 4403 | f 410 859 3719

## Invoice

Date	Invoice #
10/5/2009	31707

**Bill To:**

ERICKSON RETIREMENT COMMUNITIES  
701 MAIDEN CHOICE LANE  
BALTIMORE, MD 21228

**P.O. Number:**

6114600

**Ordered By:**

THERESA

Quantity	Description	Amount
1,000	BROCHURE - EH 2009 TRADITIONAL CATERED LIVING	399.00
	Freight	24.00

Sales Tax (0.0%) \$0.00

Total \$423.00

Payments/Credits \$0.00

**Balance Due \$423.00**



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Jonathan Lebowitz  
Press Express

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**EH 2009 TRADITIONAL/CATERED LIVING/LIVE-IN (6114600)**

December 24, 2009 8:20:02 AM

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<b>Project Menu</b>
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<b>Messages</b> List Post...
<b>Files</b> List Attach... Attach Remote... Create Folder...
<b>Events</b> List Enter...
<b>Tasks</b> List Create...
<b>Specs</b> List Create... Find & Copy...
<b>Estimates</b> List Create RFE... Create Open Bid...
<b>Orders</b> List Create...
<b>Invoices</b> List Create...
<b>Shipments</b>

**View Order with Changes**

**Original Order**

**Accepted Changes**

**Final Cost**

Order title: EH 2009 TRADITIONAL/CATERED LIVING/LIVE-IN  
 Order number: 5567728-2  
 Supplier Tracking:  
 Completion Date: 10/5/09 5:00 PM  
 Buyer workgroup: Erickson Communities  
 Buyer person: Theresa DiPaula  
 Supplier workgroup: Press Express  
 Supplier person: Trish Creel  
 Comments:  
 Allowed Overs: 99.00 %  
 Allowed Unders: 99.00 %

Misc: \$0.00 \$0.00 \$0.00

[Traditional/Catered Living/Live-In Brochure \(OU:1000\)](#)

(5892041) [ Job Id: 5764358 ]

Requested Shipments: 1,000  
 Delivered: 0  
 Received: 0

	Original	With Changes
Quantity:	1,000	1,000
Completion Date:	10/5/09	10/5/09

Cost: \$399.00 \$0.00 \$399.00

Comments:

Discounts/Surcharges<sup>††</sup> @ 0.00%:

Order Total:	\$399.00	\$0.00	\$399.00
Tax:	\$0.00	\$0.00	\$0.00
Shipping:	\$0.00	\$24.00	\$24.00
<b>Grand Total:</b>	<b>\$399.00</b>	<b>\$24.00</b>	<b>\$423.00</b>

Discounts/Surcharges Total:  
 Additional Discount/Surcharge: \$0.00

Discounts/Surcharges<sup>††</sup> GrandTotal: \$0.00

<sup>††</sup> A negative amount denotes a discount while the positive amount means surcharge. Discounts/Surcharges are not be included in the order's total. It will be applied in the final invoice.

**Terms & Conditions**

**Erickson Communities Purchase Terms and Conditions**

No overs or unders unless approved via a change order

**Press Express Sales Terms and Conditions**

Press Express has not entered any Terms & Conditions.

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