


B 10 (Official Form 10) (12/08)

UNITED STATES BANKRUPTCY COURT Northern District of Texas		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): Qwest Corporation		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known)
Name and address where notices should be sent: Qwest Corporation Attn: Jane Frey 1801 California St Rm 900 Denver, CO 80202-2658		
Telephone number: (303) 383-6480		Filed on: _____
Name and address where payment should be sent (if different from above): Qwest Attn: Bankruptcy 220 N 5th St Bismarck, ND 58501		<input type="checkbox"/> 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. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Telephone number: (866) 817-6779 ext. 1304903 or 1304924 or 1304917		
1. Amount of Claim as of Date Case Filed: \$ 3,197.58		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. <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)(____). 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.
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. <input 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: Telecommunications Services (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: See Attached 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
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: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ 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. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain: _____		
Date: 12/15/2009	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. Linda Hintz/Qwest Business Market 	
		FOR COURT USE ONLY

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

DEC 31 2009

BMC 6801

Erickson Ret. Comm. LLC



00213

Attachment to Proof of Claim filed by Qwest Corporation

Account Name	Last Four Digits of Account Number	Claim Amount
ERICKSON RETIREMENT	0223	\$55.44
ERICKSON RETIREMENT	0400	\$59.98
ERICKSON RETIREMENT	9133	\$886.82
WINDCREST	1995	\$170.16
WINDCREST	7600	\$2,025.18
	TOTAL	\$ 3,197.58

Invoice copies too voluminous to attach, but may be provided upon request.

Northern District of Texas Claims Register

09-37010-sgj11 Erickson Retirement Communities, LLC

Judge: Stacey G. Jernigan **Chapter:** 11
Office: Dallas **Last Date to file claims:** 02/28/2010
Trustee: **Last Date to file (Govt):**

Creditor: (12896937) Qwest Corporation 1801 California St Rm 900 Attn: Bankruptcy Denver CO 80202	Claim No: 12 <i>Original Filed</i> Date: 12/28/2009 <i>Original Entered</i> Date: 12/28/2009	Status: <i>Filed by:</i> CR <i>Entered by:</i> Stamps, Kristine <i>Modified:</i>
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Unsecured claimed: \$3197.58
Total claimed: \$3197.58

<i>History:</i>
<u>Details</u> 12-1 12/28/2009 Claim #12 filed by Qwest Corporation, total amount claimed: \$3197.58 (Stamps, Kristine)
<i>Description:</i>
<i>Remarks:</i>

Claims Register Summary

Case Name: Erickson Retirement Communities, LLC
Case Number: 09-37010-sgj11
Chapter: 11
Date Filed: 10/19/2009
Total Number Of Claims: 1

	Total Amount Claimed	Total Amount Allowed
Unsecured	\$3197.58	
Secured		
Priority		
Unknown		
Administrative		
Total	\$3197.58	\$0.00