


UNITED STATES BANKRUPTCY COURT Northern District of Texas		PROOF OF CLAIM
Name of Debtor: ERICKSON RETIREMENT COMMUNITIES, LLC		Case Number: 09 B 37010
NOTE: <i>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.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property): ILLINI HARDWARE CORPORATION		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.
Nam Illini Hardware Corporation Attn: John F. Konrath, Controller 42 E. Lake Street Crystal Lake, IL 60014 815-444-0155 (phone)		Court Claim Number: _____ (If known)
Nam Telephone number: _____		Filed on: _____
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> RECEIVED JAN 11 2010 BMC GROUP </div>		<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.
1. Amount of Claim as of Date Case Filed: \$ <u>28,131.00</u>		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.
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.		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).
2. Basis for Claim: <u>Mechanics Lien</u> (See instruction #2 on reverse side.)		<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).
3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5).
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 checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: <u>Sedqebrook Renaissance Gardens, Lincolnshire, Illinois</u> 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: \$ <u>28,131.00</u> Amount Unsecured: \$ _____		<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).
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		<input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).
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:		<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(____). Amount entitled to priority: \$ _____
Date: 01/07/2010		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.
/s/ Raymond J. Ostler, attorney. 208 S. LaSalle, Suite 1410, Chicago, IL 60604 (312) 332-6194		FOR COURT USE ONLY Erickson Ret. Comm. LLC  00343

**SUBCONTRACTOR'S
CLAIM FOR LIEN**

RECEIVED
SEP 18 2009
Illini Hardware Corp.

Image# 045237400005 Type: LNM
Recorded: 09/09/2009 at 08:39:13 AM
Receipt#: 2009-00042782
Total Amt: \$40.00 Page 1 of 5
IL Rental Housing Fund: \$10.00
Lake County IL Recorder
Mary Ellen Vanderventer Recorder
File **6519197**

RECORDER'S STAMP

STATE OF ILLINOIS)
) ss
COUNTY OF LAKE)

The claimant, **Illini Hardware Corporation**, of **Crystal Lake**,
County of **McHenry**, State of **Illinois**, hereby files notice and claim for lien against **Erickson Construction, LLC**,
20 Riverside Road, Lincolnshire, IL 60069, contractor, of **20 Riverside Road**, City of **Lincolnshire**, County of
Lake, State of **Illinois**, and **Lincolnshire Campus, LLC**, **701 Maiden Choice Lane** (hereinafter referred to as
"owner"), City of **Baltimore**, State of **Maryland**, and states:

That on **August 28, 2008** the owner owned the following described land in the County of **Lake**,
State of **Illinois**, to wit:

SEE ATTACHED "EXHIBIT A"

Commonly known as: **901 Milwaukee Avenue, Lincolnshire, Illinois 60069**
(20 Riverside Road, Lincolnshire, IL 60069
960 Audubon Way, Lincolnshire, IL 60069)

PIN: **15-23-302-001** and **15-22-406-001** and **Erickson Construction, LLC** was owner's contractor for the
improvement thereof.

That on **August 28, 2008**, said contractor made a subcontract with the claimant to furnish **Doors, Frames,**
and Hardware for and in said improvement and that on **June 9, 2009**, the claimant completed thereunder delivery
of materials to the value of **\$398,631.00**.

That at the special instance and request of said contractor the claimant furnished extra and additional
materials at and extra and additional labor on said premises of the value of \$ **N/A** and completed same
on **N/A** **,200**__.

That said owner, or the agent, architect or superintendent of owner cannot, [a] upon reasonable diligence,
be found in said County, [b] or do not reside in said County. **N/A**

That said contractor is entitled to credits on account thereof as follows: **Total Payments of \$370,500.00 to date**, leaving due, unpaid and owing to the claimant, after allowing all credits, the sum of **Twenty-Eight Thousand One Hundred Thirty-One and 00/100 (\$28,131.00)** dollars, for which, with 10% interest and \$40.00 filing fee the claimant claims a lien on said land and improvements and on the moneys or other considerations due or to become due from the owner under said contract against said contractor and owner.


ILLINI HARDWARE CORPORATION

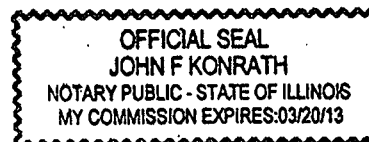
By 

STATE OF ILLINOIS) ss
COUNTY OF MCHENRY)

The affiant, **Roger Rosenthal**, being first duly sworn, on oath deposes and says that he is the claimant; that he has read the foregoing claim for lien and knows the contents thereof; and that all the statements therein contained are true.

SUBSCRIBED and SWORN to before me
this 8th day of September, 2009


Notary Public



PREPARED BY AND MAIL TO:

John F. Konrath
Illini Hardware Corporation
42 East Street
Crystal Lake, IL 60014

EXHIBIT "A"

Legal Description

Lot 1 in Sedgebrook Subdivision, being a subdivision of part of the Southeast $\frac{1}{4}$ of Section 22 and of the Southwest $\frac{1}{4}$ of Section 23 and of the Northwest $\frac{1}{4}$ of Section 26 and of the Northeast $\frac{1}{4}$ of Section 27, all in Township 43 North, Range 11 East of the Third Principal Meridian, Lake County, Illinois, according to the Plat thereof recorded October 5, 2005 as document number 5870940

LAW OFFICES OF
GOMBERG, SHARFMAN, GOLD & OSTLER P.C.

208 SOUTH LASALLE - SUITE 1410

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Established in 1969

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January 7, 2010

BMC Group, Inc.
Attn: Erickson Retirement Communities, LLC
Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

Re: Proof of Claim (\$28,131) for Illini Hardware Corporation
Erickson Retirement Communities, LLC
Case No. 09 B 37010
Our File No. 42826

Dear Sir or Madam,

Please find enclosed an original and two copies of the Proof of Claim referenced above. In accordance with the instructions received with the Notice of Chapter 11 Bankruptcy Case I have also enclosed a self-addressed stamped return envelope. Please return a file stamped copy of the filed Proofs of Claim in the enclosed envelope.

Please call with any questions.

Very truly yours,

GOMBERG, SHARFMAN, GOLD & OSTLER, P.C.

A handwritten signature in black ink that reads "Raymond J. Ostler".
Raymond J. Ostler

RJO/bt
cc. John F. Konrath, Controller
Illini Hardware Corporation