

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):

JAMES W. AMATO

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

Name and address where notices should be sent:

20835747006394 AMATO, JAMES W 113 ROLLING ACRE DR GLASSBORO, NJ 08028

YOUR CLAIM IS SCHEDULED AS: Schedule/Claim ID: s2598 AMOUNT/CLASSIFICATION \$51,287.00 UNSECURED

Court Claim Number: (If known)

Filed on:

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

DO NOT DUPLICATE THIS CLAIM WITH MY FILING DATED 11/24/09

Telephone number: 856 863 8373

+9% INTEREST = 54,822.83 I SUBMITTED MY CLAIM ON 11/24/09 FOR THIS AMOUNT. SEE COPY ATTACHED

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: \$ 54,822.83

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.

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: \$

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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: 1/14/10

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.

James W Amato

FOR COURT USE ONLY

Erickson Ret. Comm. LLC



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(Copy To Be Returned)

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 name of the creditor to whom the debtor owes money or property): JAMES W. AMATO

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

Name and address where claims should be mailed: JAMES W. AMATO 113 ROLLING ACE DRIVE GLASSBORO, NJ 08028

Creditor's claim is secured (if known)

Telephone number: 826-863-8373

filed on

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

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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.

File your claim:

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

1. Amount of claim in U.S. dollars: \$54,822.83

2. An amount of claim is secured to priority under 11 U.S.C. §507(a). If any portion of your claim is in lieu of the following categories, check the box next to the category.

2. Will you pay the claim in full, or a portion of it, however, if all of your claim is unsecured, do not complete item 4.

3. If all or part of your claim is to be paid in priority, explain item 2.

Specify the priority of the claim.

4. Check this box if claim is under federal estate claims in addition to the principal amount of claim. Attach itemized statement of itemized charges.

Domestic support obligation under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

5. Provide details of CLAIM PARTICIPATION PLAN PAYOUT (See Item 11(a) on reverse side.)

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).

6. List Real Estate owned by debtor or debtor's individual life insurance.

Contributions to an employer benefit plan - 11 U.S.C. §507 (a)(5).

7. Has debtor any form of intellectual property (See instructions 7(a) on reverse side.)

Up to \$2,250 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).

8. Secured Claim (See instructions 8 on reverse side.) Check the type of collateral. If your claim is secured by a lien on property or a right of setoff and provide the requested information.

Taxes or penalties owed to governmental unit - 11 U.S.C. §507 (a)(8).

History of property or right of setoff: (Check one)  Real estate  Motor Vehicle  Other

Other - Specify applicable paragraph of 11 U.S.C. §507 (a) ( )

Value of new supply: Amount of setoff: %

Amount of setoff: Amount of setoff: %

Amount of secured claim: Amount of unsecured claim:

9. Creditors' Allowance: Amount of any payments on this claim has been credited for the purpose of making this proof of claim.

Amount awarded to priority:

10. Describe all attachments to your claim that support the claim, such as promissory notes, purchase orders, invoices, book orders, contracts of leasing, contracts, judgments, mortgages, and security agreements. You may also attach a copy of documents providing evidence of perfection of a security interest. You may also attach a copy of "indexing" or "redaction" on reverse side.)

Amounts are subject to adjustment on 11/10 and every 3 years thereafter with respect to cases commenced on or after the date

11. DO NOT SIGN THIS FORM. IT IS SUBJECT TO FEDERAL JUDICIAL REVIEW AND MAY BE DESTROYED AFTER SCANNING.

If you are unable to sign this form, please explain:

Date: 11/24/09 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 attached here. Attach copy of power of attorney, if any.

Erickson Ret. Comm. LLC 00089