

United States Bankruptcy Court Northern District Of Texas **PROOF OF CLAIM**

Name of Debtor
Erickson Retirement Communities

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): **Waste Management**

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.

Name and address where notices should be sent:
Waste Management - RMC
2625 W. Grandview Rd. Ste. 150
Phoenix, AZ 85023

Telephone number: 866-962-2287 x7415

Check box if you have never received any notices from the bankruptcy court in this case.

Check box if the address differs from the address on the envelope sent to you by the court.

FILED
FEB 08 2010

TAWANA C. MARSHALL, CLERK
U.S. BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS

This space is for Court Use Only

Account or other number by which creditor identifies debtor:
420-48376, 420-48377, 420-48375, 420-48575, 099-69268

Check here If this claim Replace a previously filed claim, dated: Amends

1. Basis for Claim

Goods sold
 Services performed
 Money loaned
 Personal injury/wrongful death
 Taxes
 Other

RECEIVED
FEB 11 2010
RMC GROUP

Retiree benefits as defined in 11 U.S.C. § 1114(a)
 Wages, salaries, and compensation (Fill out below)

Last four digits of SS #: _____
Unpaid compensation for services performed from _____ to _____ (date)

2. Date debt was incurred: 08/01/2009

3. If court judgment, date obtained:

4. Total Amount of Claim at Time Case Filed: \$ 884.62 (unsecured) _____ (secured) _____ (priority) \$ 884.62 (Total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.
 Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

5. Secured Claim.
 Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:
 Real Estate Motor Vehicle
 Other

Value of Collateral: \$ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____

6. Unsecured Nonpriority Claim \$ 884.62

Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.

7. Unsecured Priority Claim.
 Check this box if you have an unsecured priority claim

Amount entitled to priority \$ _____
Specify the priority of the claim:
 Wages, salaries, or commissions (up to \$4,925)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
 Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
 Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
 Alimony, maintenance, or support owed to a spouse, former spouse, or child - 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 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.


8. CREDITS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

9. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

10. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

This Space Is for Court Use Only

Erickson Ret. Comm. LLC



00841

Date
02/02/2010

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):
Judith Torres /Bankruptcy Specialist

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
08/01/2009

Invoice #
1551617

Acct # 420-48575

Billing Location:
 ERICKSON COMMUNITY
 PO BOX 22000
 CATONSVILLE MD / 21228

Service Location:
 ERICKSON COMMUNITY
 991 CORPORATE BLVD
 LINTHICUM HEIGHTS MD / 21090

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1551617

Invoice Date: 08/01/2009

Acct # 420-48575

Date	Service Description	Weekday	Qty.	Extended
08/01/2009	AFM-ADMINISTRATIVE FEE	TUE	1.00	3.00
08/01/2009	ENC-ENVIRONMENTAL FEE CM	TUESDAY	1.00	5.62
08/01/2009	FSC-FUEL/ENVIRONMENTAL C	TUESDAY	1.00	6.74
08/01/2009	RMO-RECYCLABLE MATERIAL	MISC	69.00	20.70
08/01/2009	8FY-8 YD FEL RCY	TUESDAY	1.00	87.00
Adjustment				(\$26.13)
TOTAL THIS INVOICE				\$96.93
BALANCE FROM PREVIOUS BILLING				\$0.00
Total Due				\$96.93

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
10/01/2009

Invoice #
1586105

Acct # 420-48376

Billing Location:
 ERICKSON COMMUNITY
 PO BOX 22000
 CATONSVILLE MD / 21228

Service Location:
 ERICKSON COMMUNITY
 5525 RESEARCH PARK DR
 CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1586105

Invoice Date:

10/01/2009

Acct # 420-48376

Date	Service Description	Weekday	Qty	Extended
10/01/2009	AFM-ADMINISTRATIVE FEE	THU	1.00	3.00
10/01/2009	ENC-ENVIRONMENTAL FEE CM	MONDAY	1.00	8.99
10/01/2009	ENC-ENVIRONMENTAL FEE CM	WEDNESDAY	1.00	8.99
10/01/2009	ENC-ENVIRONMENTAL FEE CM	FRIDAY	1.00	8.99
10/01/2009	ENC-ENVIRONMENTAL FEE CM	TUESDAY	1.00	5.66
10/01/2009	ENC-ENVIRONMENTAL FEE CM	THURSDAY	1.00	5.66
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	MONDAY	1.00	11.55
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	WEDNESDAY	1.00	11.55
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	FRIDAY	1.00	11.55
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	TUESDAY	1.00	7.26
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	THURSDAY	1.00	7.26
10/01/2009	RMO-RECYCLABLE MATERIAL	MISC	1.39	41.70
10/01/2009	8FL-8 YD FEL	MONDAY	1.00	138.33
10/01/2009	8FL-8 YD FEL	WEDNESDAY	1.00	138.33
10/01/2009	8FL-8 YD FEL	FRIDAY	1.00	138.34
10/01/2009	8FY-8 YD FEL RCY	TUESDAY	1.00	87.00
10/01/2009	8FY-8 YD FEL RCY	THURSDAY	1.00	87.00
	Post-Petition Adjustment			(\$279.03)
	TOTAL THIS INVOICE			\$442.13
	BALANCE FROM PREVIOUS BILLING			\$0.00
Total Due				\$442.13

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
2625 W Grandview Rd Ste 150
Phoenix, AZ 85023
(866) 962-2287 fax (866) 281-9229

Invoice Date
12/01/2009

Invoice #
1604612

Acct # 420-48376

Billing Location:
ERICKSON COMMUNITY
PO BOX 22000
CATONSVILLE MD / 21228

Service Location:
KUNSTLER STONE
5525 RESEARCH PARK DR
CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
(866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1604612

Invoice Date: 12/01/2009

Acct # 420-48376

Date	Service Description	Weekday	Qty.	Extended
12/01/2009	C-Finance charge			10.82
TOTAL THIS INVOICE				\$10.82
BALANCE FROM PREVIOUS BILLING				\$442.13
Total Due				\$452.95

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date

10/01/2009

Invoice #

1586106

Acct # 420-48377

Billing Location:
 ERICKSON COMMUNITY
 PO BOX 22000
 CATONSVILLE MD / 21228

Service Location:
 ERICKSON COMMUNITY
 705 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1586106

Invoice Date:

10/01/2009

Acct # 420-48377

Date	Service Description	Weekday	Qty.	Extended
10/01/2009	AFM-ADMINISTRATIVE FEE	TUE	1.00	3.00
10/01/2009	ENC-ENVIRONMENTAL FEE CM	TUESDAY	1.00	5.66
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	TUESDAY	1.00	7.26
10/01/2009	RMO-RECYCLABLE MATERIAL	MISC	0.69	20.70
10/01/2009	8FY-8 YD FEL RCY	TUESDAY	1.00	87.00
	Post-Petition Adjustment			(\$47.81)
	TOTAL THIS INVOICE			\$75.81
	BALANCE FROM PREVIOUS BILLING			\$0.00
Total Due				\$75.81

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
12/01/2009

Invoice #
1604613

Acct # 420-48377

Billing Location:
 ERICKSON COMMUNITY
 PO BOX 22000
 CATONSVILLE MD / 21228

Service Location:
 KUNSTLER STONE
 705 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1604613

Invoice Date: 12/01/2009

Acct # 420-48377

Date	Service Description	Weekday	Qty	Extended
12/01/2009	C-Finance charge			3.00
TOTAL THIS INVOICE				\$3.00
BALANCE FROM PREVIOUS BILLING				\$75.81
Total Due				\$78.81

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
2625 W Grandview Rd Ste 150
Phoenix, AZ 85023
(866) 962-2287 fax (866) 281-9229

Invoice Date

10/01/2009

Invoice #

1586107

Acct # 420-48575

Billing Location:
ERICKSON COMMUNITY
705 MAIDEN CHOICE LN
CATONSVILLE MD / 21228

Service Location:
ERICKSON COMMUNITY
813 MAIDEN CHOICE LN
CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
(866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1586107

Invoice Date: 10/01/2009

Acct #: 420-48575

Date	Service Description	Weekday	Qty.	Extended
10/01/2009	AFM-ADMINISTRATIVE FEE	MON	1.00	3.00
10/01/2009	ENC-ENVIRONMENTAL FEE CM	MONDAY	1.00	10.27
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	MONDAY	1.00	13.19
10/01/2009	8FL-8 YD FEL	MONDAY	1.00	158.00
	Post-Petition Adjustment			(\$71.38)
	TOTAL THIS INVOICE			\$113.08
	BALANCE FROM PREVIOUS BILLING			\$0.00
Total Due				\$113.08

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
12/01/2009

Invoice #
1604614

Acct # 420-48575

Billing Location:
 ERICKSON COMMUNITY
 705 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Service Location:
 KUNSTLER STONE
 813 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1604614

Invoice Date: 12/01/2009

Acct # 420-48575

Date	Service Description	Weekday	Qty	Extended
12/01/2009	C-Finance charge			3.00
TOTAL THIS INVOICE				\$3.00
BALANCE FROM PREVIOUS BILLING				\$113.08
Total Due				\$116.08

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
10/01/2009

Invoice #
1586107

Acct # 420-48575

Billing Location:
 ERICKSON COMMUNITY
 705 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Service Location:
 ERICKSON COMMUNITY
 813 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1586107

Invoice Date:

10/01/2009

Acct # 420-48575

Date	Service Description	Weekday	Qty.	Extended
10/01/2009	AFM-ADMINISTRATIVE FEE	MON	1.00	3.00
10/01/2009	ENC-ENVIRONMENTAL FEE CM	MONDAY	1.00	10.27
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	MONDAY	1.00	13.19
10/01/2009	8FL-8 YD FEL	MONDAY	1.00	158.00
Post-Petition Adjustment				(\$71.38)
TOTAL THIS INVOICE				\$113.08
BALANCE FROM PREVIOUS BILLING				\$0.00
Total Due				\$113.08

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
12/01/2009

Invoice #
1604614

Acct # 420-48575

Billing Location:
 ERICKSON COMMUNITY
 705 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Service Location:
 KUNSTLER STONE
 813 MAIDEN CHOICE LN
 CATONSVILLE MD / 21228

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 1604614

Invoice Date: 12/01/2009

Acct # 420-48575

Date	Service Description	Weekday	Qty.	Extended
12/01/2009	C-Finance charge			3.00
TOTAL THIS INVOICE				\$3.00
BALANCE FROM PREVIOUS BILLING				\$113.08
Total Due				\$116.08

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days

INVOICE



WASTE MANAGEMENT
 2625 W Grandview Rd Ste 150
 Phoenix, AZ 85023
 (866) 962-2287 fax (866) 281-9229

Invoice Date
10/01/2009

Invoice #
2003158

Acct # 099-69268

Billing Location:
 WINDSOR RUN

Service Location:
 WINDSOR RUN

PO BOX 310 MAIL STOP 103

2010 MCKEE RD

LINTHICUM HEIGHTS MD / 21090

MATTHEWS NC / 28105

Amount Paid

TO RECEIVE PROPER CREDIT, RETURN THIS PORTION WITH YOUR PAYMENT

WASTE MANAGEMENT 2625 W Grandview Rd Ste 150 Phoenix, AZ 85023
 (866) 962-2287 FAX (866) 272-6859

PO #

Invoice #: 2003158

Invoice Date:

10/01/2009

Acct # 099-69268

Date	Service Description	Weekday	Qty	Extended
10/01/2009	AFM-ADMINISTRATIVE FEE	WED	1.00	3.00
10/01/2009	ENC-ENVIRONMENTAL FEE CM	WEDNESDAY	1.00	9.51
10/01/2009	FSC-FUEL/ENVIRONMENTAL C	WEDNESDAY	1.00	12.28
10/01/2009	8FL-8 YD FEL	WEDNESDAY	1.00	146.20
10/23/2009	Return Check			35.00
	Post-Petition Adjustment			(\$66.11)
	TOTAL THIS INVOICE			\$205.99
	BALANCE FROM PREVIOUS BILLING			\$0.00
Total Due				\$139.88

Please Pay From This Invoice. No Other Billing Will Be Sent.

TERMS: Net 10 Days