

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):

LORRAINE E. HENDERSON

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

Name and address where notices should be sent:

20835747008385 HENDERSON, LORRAINE 1406 SECOND RD BALTIMORE, MD 21220

YOUR CLAIM IS SCHEDULED AS: Schedule/Claim ID: s3404 AMOUNT/CLASSIFICATION \$1,750.00 UNSECURED

Court Claim Number: (If known)

Filed on:

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

RECEIVED

FEB 19 2010

BMC GROUP

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.

Telephone number:

410-391-2913

1. Amount of Claim as of Date Case Filed: \$ 1,750.00

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: SERVICES PERFORMED (See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: 3375

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: 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. 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: 2/1/10

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.

Lorraine E Henderson Lorraine E Henderson

FOR COURT USE ONLY

Erickson Ret. Comm. LLC



00912



June 15, 2007  
Lorraine Henderson  
CSL

**Dear Lorraine,**

Over the past year, the Growth Participation Plan (GPP) has undergone significant changes. Undoubtedly, you have heard about the Plan and wonder how it affects you. We have now completed all of the necessary updates to the Plan document and collateral materials, and we are able to provide information on your personal position in the plan.

**New Plan Information:**

As we announced last year, we have converted the GPP from a long-term deferred compensation plan to a more current annual profit sharing arrangement. To that end, we enclose the amended GPP Plan Document along with an overview of the changes made to the plan and your grant of units. These changes are consistent with the communication received last year.

Due to your hire or promotion in 2006, you are now eligible to receive the total New Participation Unit grant associated with your position. The total unit grant is 100 units. This grant will be issued in four installments of 25 units each over a four year period. The installments are similar to "rolling" options, and each will have a four year growth cycle. Any value that has accumulated over the four years for the installment will be paid per the terms of the restated Plan document.

The first installment for your New Participation Unit grant is issued in 2007 as evidenced by this letter. We will not be issuing separate certificates.

If you have any other questions regarding the GPP, please contact your Human Resources Department.

Sincerely,

The Plan Administrators



Lorraine Henderson  
1406 Second Avenue  
Baltimore, MD 21220

Dear Lorraine,

The following is in answer to your request for information regarding your Erickson Growth Participation Plan. Your promotion on 6/5/2006 to a grade 30 job made you eligible to receive your first grant of units in 2007. Grant eligibility is based on and employee's full time status and job grade level as of December 31<sup>st</sup> the prior year.

Year of Grant	Units Granted	Last Announced Value per Unit	Total Value
2007	25	\$70	\$1,750
2008	25	no value	0
Total			\$1,750

You completed the four years of full time employment necessary to vest in the plan. Please let me know if you have any additional questions about your GPP account.

Sincerely,

A handwritten signature in cursive script that reads "Mary Ann H. Lambrechts".

Mary Ann H. Lambrechts  
Sr. Compensation Analyst  
410-402-2108