

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

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT TEXAS (DALLAS DIVISION)		PROOF OF CLAIM
Name of Debtor: Erickson Retirement Communities, LLC		Case Number 09-37010-sgj11
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): Ober, Kaler, Grimes & Shriver		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (if known) Filed on: _____
Name and address where notices should be sent: Howard L. Sollins, Esq. Ober, Kaler, Grimes & Shriver 120 E. Baltimore Street Baltimore, MD 21202-1643 Telephone number: 410-685-1120		
Name and address where payment should be sent (if different from above): Telephone number: _____		<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.
1. Amount of Claim as of Date Case Filed: \$ <u>9,592.50</u> 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.		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: \$ _____
2. Basis for Claim: <u>Legal Services</u> (see instruction #2 on reverse side.)		
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.)		
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.		*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.
Date: <u>2/2/10</u>	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. <u>[Signature]</u> S. Craig Holden, President and Chief Operating Officer	

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.

Erickson Ret. Comm. LLC



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OBER | KALER
A Professional Corporation

COPY

Ober, Kaler, Grimes & Shriver
Attorneys at Law

120 East Baltimore Street
Baltimore, Maryland 21202-1643
410-685-1120 FAX 410-547-0699
Federal ID No. 52-1908497

Wire Transfer to:
Bank of America
10 Light Street
Baltimore, Maryland 21202
ABA Number: 026009593
Account Number: 00-200-901-749-2
Account Name: Ober, Kaler, Grimes & Shriver Attorney Escrow

January 19, 2010

Erickson Retirement Centers
Attn: Gerald F. Doherty, Esq., Executive Vice President
and General Counsel
BUI 101 90160
Mail Stop 101 P.O. Box 22000
Catonsville, MD 21228

REMINDER STATEMENT OF ACCOUNT

Client Matter Name: 020713.082694

Billing Attorney: H.L. SOLLINS

Matter Name: Chesapeake Regional Information System

Our records indicate that the following invoices are unpaid as of January 19, 2010:

INVOICE DATE	INVOICE NUMBER	INVOICE AMOUNT	PAYMENT / CREDIT	AMOUNT DUE
06/19/09	420523	9,592.50	0.00	9,592.50
TOTAL		\$9,592.50	\$0.00	\$9,592.50

Please contact H.L. SOLLINS, at 410-685-1120, if you have any questions concerning this statement.

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: (13013770) Ober Kaler Grimes & Shriver 120 E. Baltimore St. Baltimore, MD 21202-1643 Attn: Howard L. Sollins, Esq.	Claim No: 23 <i>Original Filed</i> Date: 02/17/2010 <i>Original Entered</i> Date: 02/17/2010	Status: Filed by: CR Entered by: Musgrave, David Modified:
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Unsecured claimed: \$9592.50
Total claimed: \$9592.50

History:
Details 23-1 02/17/2010 Claim #23 filed by Ober Kaler Grimes & Shriver, total amount claimed:
\$9592.5 (Musgrave, David)

Description: (23-1) legal services

Remarks:

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	\$9592.50	
Secured		
Priority		
Unknown		
Administrative		
Total	\$9592.50	\$0.00