

UNITED STATES BANKRUPTCY COURT Northern District of Texas (Dallas Division) PROOF OF CLAIM

Name of Debtor: Case Number: 69 370 10

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): THE CARD BOUTIQUE 5207 EAST DRIVE BALTO. MD 21227 410-242-8515 FAX 410-242-4449

Name and address where payment should be sent (if different from above): RECEIVED JAMES AS ABOVE MAR 02 2010 BMC GROUP

1. Amount of Claim as of Date Case Filed: \$ 101.59 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.

2. Basis for Claim: CHARGED CARD SUPPLY (See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: A 2038 3a. Debtor may have scheduled account as: Erickson Retire. Comm. (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 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:

Date: 2/27/10 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. Erickson Ret. Comm. LLC 01667

Mail original proof of claim form and copies of supporting documentation to:

If by regular mail:

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

If by messenger or overnight delivery:

BMC Group Inc
Attn: Erickson Retirement Communities, LLC
Claims Processing
18750 Lake Drive East
Chanhassen, MN 55317

<u>Debtors</u>	<u>Case Number</u>
Erickson Retirement Communities, LLC	09-37010
Ashburn Campus, LLC	09-37018
Columbus Campus, LLC	09-37019
Concord Campus GP, LLC	09-27021
Concord Campus, LP	09-37020
Dallas Campus GP, LLC	09-37013
Dallas Campus, LP	09-37012
Erickson Construction, LLC	09-37016
Erickson Group, LLC	09-37015
Houston Campus, LP	09-37022
Kansas Campus, LLC	09-37024
Littleton Campus, LLC	09-37023
Novi Campus, LLC	09-37025
Senior Campus Services, LLC	09-37017
Warminster Campus GP, LLC	09-37027
Warminster Campus, LP	09-37026

Once filed, a "**Filed**" stamped copy of the proof of claim will be returned to the claimant within three (3) business days of docketing **if** the claimant encloses a stamped, self-addressed envelope with a copy of the proof of claim.



February 23, 2010

The Card Boutique & Office Supply, Inc.
5207 East Drive Shopping Center
Baltimore, MD 21227

Attn: Accounts Receivable

RE: Invoice No. 000688
Amount: \$101.59

To Whom It May Concern:

Please be advised that Erickson Retirement Communities, LLC filed Chapter 11 bankruptcy on October 19, 2009. It is our understanding that the above-referenced invoice is past due. You must file a claim for this invoice with the United States Bankruptcy Court, Northern District of Texas (Dallas). The case number is 09-37010. I have attached a claim form. Please call me if you have any questions.

Thank you.

Sincerely,

A handwritten signature in black ink that reads "Shelley L. Baer". The signature is written in a cursive style with a large, sweeping flourish at the end.

Shelley L. Baer
Executive Legal Assistant
(410) 402-2357

Enclosures (claim form and copy of invoice)

SLB