

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): IKON Financial Services (IFS)

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

Name and address where notices should be sent: IKON FINANCIAL SERVICES ATTN DONNA TANNER SPECIAL ASSETS DEPT PO BOX 6338 MACON, GA 31208-6338

FILED FEB 11 2010

Court Claim Number: (If known) Filed on:

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

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

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.

Telephone number:

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

1. Amount of Claim as of Date Case Filed: \$ 39,989.69

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.

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.

Specify the priority of the claim. Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

2. Basis for Claim: Executory contracts / unexpired leases

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).

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

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

3a. Debtor may have scheduled account as:

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).

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.

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

Nature of property or right of setoff: Real Estate Motor Vehicle Other

RECEIVED

Value of Property: \$ Annual Interest Rate %

MAR 02 2010

Amount of arrearage and other charges as of time case filed included in secured claim if any: \$ Basis for perfection:

BMC GROUP

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.

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

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.)

Amount entitled to priority:

\$

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

\*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.

If the documents are not available, please explain:

Date: 2/8/2010

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.

Donna F. Tanner

FOR COURT USE ONLY

Erickson Ret. Comm. LLC 01733

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIREMENT COMMUNITIES

ATTN ACCOUNTS

Address PO BOX 310

City LINTHICUM

State MD

Zip 21090

Date Due 30-Jul-09

Customer No. 1000523

Contract No. 710000B1

Total Due \$5,942.56

**BUYTOUT TO RETURN**

BUYOUT \$ 5,942.56  
STATE TAX \$ -  
COUNTY TAX \$ -  
CITY TAX \$ -

Equipment Description

CA IR5020 JCT17558  
RI 780FW H8741000032  
CA 2060P ZKM39983  
CA 2060P ZKM37513

*Loc: 411 Whiting St, Hingham, MA 02043*

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

Adjusted Invoice Number 71000B1BTR

Please return this portion with payment.

**REMIT** IKON Financial Services - Special Assets  
**TO** Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number 71000B1BTR

Customer No. 1000523  
Contract No. 710000B1  
Total Due: \$5,942.56

**BILL** ERICKSON RETIREMENT COMMUNITIES  
**TO** PO BOX 310  
LINTHICUM, MD 21090

*- James W. Pryde ?*

*Erickson Construction @ Linden Ponds  
GL 516CRG5. 48700.612111*

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833 ✓  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIRMENT COMMUNITIES  
ATTN LIZA BONSELL  
Address PO BOX 310  
City LINTHICUM State MD  
Zip 21090

Date Due 25-Aug-09

Customer No. 1000523  
Contract No. 71000F1  
**Total Due** \$1,770.16

PAYOFF/BUYOUT	\$	1,770.16
STATE TAX	\$	-
COUNTY TAX	\$	-
CITY TAX	\$	-

**FINAL INVOICE**

Equipment Description

CA 2060P ZKM39973 1919 Ferry Rd, Naperville, IL.  
Development @ Monarch Landing GL012111.561410

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

Adjusted Invoice Number dt71000F1-bto

Please return this portion with payment.

**REMIT** IKON Financial Services - Special Assets  
**TO** Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number dt71000F1-bto

Customer No. 1000523  
Contract No. 71000F1  
**Total Due:** \$1,770.16

**BILL** ERICKSON RETIRMENT COMMUNITIES  
**TO** PO BOX 310  
LINTHICUM, MD 21090

GL: 556-CRG5.48700.01-2111.

56140

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641



<b>Customer</b>	
Name	ERICKSON RETIREMENT COMMUNITIES
ATTN LIZA BONSELL	
Address	PO BOX 310
City	LINTHICUM
State	MD
Zip	21090

Date Due	25-Aug-09
Customer No.	1000523
Contract No.	71000J1
<b>Total Due</b>	<b>\$6,270.87</b>

**FINAL INVOICE**

BUYOUT	\$	6,270.87
STATE TAX	\$	-
COUNTY TAX	\$	-
CITY TAX	\$	-

Equipment Description

CA IR5020	JCT19234	17900 Coit Rd
CA 2060P	ZKM40750	Dallas, Tx

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

Adjusted Invoice Number DT71000J1BTO

Please return this portion with payment.

**REMIT TO** IKON Financial Services - Special Assets  
Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number DT71000J1BTO

Customer No. 1000523  
Contract No. 71000J1  
**Total Due: \$6,270.87**

**BILL TO** ERICKSON RETIREMENT COMMUNITIES  
PO BOX 310  
LINTHICUM, MD 21090

Marketing @ High Springs

GL 25080145.56140

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIREMENT COMMUNITIES  
ATTN LIZA BONSELL  
Address PO BOX 310  
City LINTHICUM State MD  
Zip 21090

Date Due 25-Aug-09

Customer No. 1000523  
Contract No. 71000J5  
Total Due \$5,201.36

**FINAL INVOICE**

BUYOUT \$ 5,201.36  
STATE TAX \$ -  
COUNTY TAX \$ -  
CITY TAX \$ -

Equipment Description

CA IR5570 KHT00581 8484 Frankford Rd  
CA ECOY SCAN N/A Dallas, Tx

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

Adjusted Invoice Number DT71000J5BTO

Please return this portion with payment.

**REMIT TO** IKON Financial Services - Special Assets  
Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number DT71000J5BTO

Customer No. 1000523  
Contract No. 71000J5  
Total Due: \$5,201.36

**BILL TO** ERICKSON RETIREMENT COMMUNITIES  
PO BOX 310  
LINTHICUM, MD 21090

Highland  
Erickson Construction © High Springs

550CRG5-48700.01211

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIREMENT COMMUNITIES  
ATTN LIZA BONSELL  
Address PO BOX 310  
City LINTHICUM State MD  
Zip 21090

Date Due 25-Aug-09

Customer No. 1000523  
Contract No. 71000KK  
Total Due \$1,588.44

**FINAL INVOICE**

BUYOUT \$ 1,588.44  
STATE TAX \$ -  
COUNTY TAX \$ -  
CITY TAX \$ -

Equipment Description

CA IR5000 MPL74732 1919 Ferry Rd  
CA 710 KAG00780 Naperville, IL

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

*Rec'd 6/2/08*

Adjusted Invoice Number DT71000KKBTR

Please return this portion with payment.

**REMIT TO** IKON Financial Services - Special Assets  
Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number DT71000KKBTR

Customer No. 1000523  
Contract No. 71000KK  
Total Due: \$1,588.44

**BILL TO** ERICKSON RETIREMENT COMMUNITIES  
PO BOX 310  
LINTHICUM, MD 21090

*Monarch Landing Marketing VB0365*

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIREMENT COMMUNITIES  
ATTN LIZA BONSELL  
Address PO BOX 310  
City LINTHICUM State MD  
Zip 21090

Date Due 25-Aug-09

Customer No. 1000523  
Contract No. 7100000  
Total Due \$2,221.30

**FINAL INVOICE**

BUYOUT \$ 2,221.30  
STATE TAX \$ -  
COUNTY TAX \$ -  
CITY TAX \$ -

Equipment Description

CA IR5020 JCT14592 4100 Thirteen Mile Rd  
Novi, Mi

8/08

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR  
ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

Adjusted Invoice Number DT710000OBTR

Please return this portion with payment.

**REMIT TO** IKON Financial Services - Special Assets  
Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number DT710000OBTR

Customer No. 1000523  
Contract No. 7100000  
Total Due: \$2,221.30

**BILL TO** ERICKSON RETIREMENT COMMUNITIES  
PO BOX 310  
LINTHICUM, MD 21090

Fox Run Marketing # 42980145.56140

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

<b>Customer</b>	
Name	ERICKSON RETIREMENT COMMUNITIES
	ATTN LIZA BONSELL
Address	PO BOX 310
City	LINTHICUM
State	MD
Zip	21090

Date Due	25-Aug-09
Customer No.	1000523
Contract No.	71000SS
<b>Total Due</b>	<b>\$1,259.80</b>

**FINAL INVOICE**

BUYOUT	\$	1,259.80
STATE TAX	\$	-
COUNTY TAX	\$	-
CITY TAX	\$	-

Equipment Description  
 RI 780FW      H8740800073      2 Brooksby Village Dr  
 CA 2060P      ZKM39953              Peabody, MA

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

1/07

Adjusted Invoice Number DT71000SSBTR

Please return this portion with payment.

**REMIT TO** IKON Financial Services - Special Assets  
 Attn: Donna F. Tanner  
 P.O. Box 6338  
 Macon, GA 31208-6338

Invoice Number DT71000SSBTR

Customer No. 1000523  
 Contract No. 71000SS  
**Total Due: \$1,259.80**

**BILL TO** ERICKSON RETIREMENT COMMUNITIES  
 PO BOX 310  
 LINTHICUM, MD 21090

Ericksen Construction @ Brooksby Village  
 GL 516CGR-48700-012111



**IKON Financial Services**

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Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIREMENT COMMUNITIES  
ATTN LIZA BONSELL  
Address PO BOX 310  
City LINTHICUM State MD  
Zip 21090

Date Due 25-Aug-09

Customer No. 1000523  
Contract No. 71000Z  
Total Due \$2,944.00

**FINAL INVOICE**

BUYOUT \$ 2,944.00  
STATE TAX \$ -  
COUNTY TAX \$ -  
CITY TAX \$ -

Equipment Description

CA IR5000 MPL46827 *250 Parkway Dr  
Lincolnshire, IL 60069*

**FOR QUICKER PAYMENT PROCESSING YOU MAY PREFER ONE OF OUR  
ELECTRONIC PAYMENT OPTIONS:**

- 1) CREDIT CARD
- 2) ELECTRONIC FUNDS TRANSFER
- 3) CHECK BY PHONE

*12/08*

Adjusted Invoice Number DT71000ZBTR

Please return this portion with payment.

**REMIT** IKON Financial Services - Special Assets  
**TO** Attn: Donna F. Tanner  
P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number DT71000ZBTR

Customer No. 1000523  
Contract No. 71000Z  
Total Due: \$2,944.00

**BILL** ERICKSON RETIREMENT COMMUNITIES  
**TO** PO BOX 310  
LINTHICUM, MD 21090

*Marketing Dept. for Eagles Crossing*

**IKON Financial Services**

**IKON Financial Services**

P.O. Box 6338  
Macon, GA 31208-6338  
Phone: 1-800-743-6459 ext 2833  
Fax: 866-471-9641

**Customer**

Name ERICKSON RETIREMENT COMMUNITIES  
ATTN ACCOUNTS  
Address PO BOX 310  
City LINTHICUM State MD  
Zip 21090

Date Due 30-Jul-09

Customer No. 1000523  
Contract No. 710000ZA  
Total Due \$12,791.20

BUYOUT \$ 12,791.20  
STATE TAX \$ -  
COUNTY TAX \$ -  
CITY TAX \$ -

**BUYTOUT TO RETURN**

Equipment Description

CA 710 KAG05475 *901 Milwaukee Ave  
Lincolnshire, IL.*

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- 3) CHECK BY PHONE

Adjusted Invoice Number 71000ZABTR

Please return this portion with payment.

**IKON Financial Services - Special Assets**

REMIT Attn: Donna F. Tanner  
TO P.O. Box 6338  
Macon, GA 31208-6338

Invoice Number 71000ZABTR

Customer No. 1000523  
Contract No. 710000ZA  
Total Due: \$12,791.20

BILL ERICKSON RETIREMENT COMMUNITIES  
TO PO BOX 310  
LINTHICUM, MD 21090

*Marketing for Eagles Crossing ✓*

*41780145.56140*