
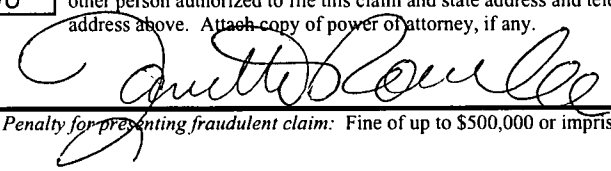



<b>UNITED STATES BANKRUPTCY COURT      Northern District of Texas (Dallas Division)</b>		<b>PROOF OF CLAIM</b>
Name of Debtor: <u>Erickson Retirement Communities, LLC</u>		Case Number: <u>09-37010-sqj 11</u>
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property):		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent:  20836525002915 Harris Kocher Smith 1391 Speer Blvd, Suite 390 Denver, CO 80204		Court Claim Number: _____ (If known)
Name and address where payment should be sent (if different from above):  Telephone number: <u>303-623-6300</u>		Filed on: _____
		<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>1,155.00</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: \$ _____  <i>*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.</i>
2. Basis for Claim: <u>SERVICES PERFORMED</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>1105</u>  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: \$ _____		<b>RECEIVED</b> <b>MAR 02 2010</b> <b>BMC GROUP</b>
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: <u>2/11/10</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.  	<b>FOR COURT USE ONLY</b>  Erickson Ret. Comm. LLC  01736

**HARRIS KOCHER SMITH**  
engineers • land surveyors

1391 Speer Boulevard, Suite 390  
Denver, Colorado 80204

Invoice Number: 061105 . 37  
October 21, 2009

**Invoice**

To: Erickson Retirement Communities  
  
Mail Stop 454, PO Box 22000  
Linthicum, MD 21228-002  
Attention: Steve Montgomery

Project #: 061105 Wind Crest Phase 2

**Total Invoice: \$1,155.00**

Professional Services for the Period: 9/19/2009 to 10/16/2009

**Phase: 1**

**Schematic Design Phase - Lump Sum  
Community Two - 254SW20.16040.13110**

<u>Task</u>	<u>Task Fee</u>	<u>% Complete</u>	<u>Fee Earned</u>	<u>Prior Billing</u>	<u>Current Fee</u>
Site Improvement Plan (SIP)	\$20,050.00	100.00	\$20,050.00	\$20,050.00	\$0.00
Schematic Design Submittal	\$4,350.00	100.00	\$4,350.00	\$4,350.00	\$0.00
<b>Task Billing Totals:</b>	<b>\$24,400.00</b>		<b>\$24,400.00</b>		<b>\$0.00</b>

Contract Amount: \$24,400.00

**Subtotal: \$0.00**

**Phase: 2**

**Schematic Design Phase Meetings & PM-Community Two  
254SW20.16040.13110**

Contract Amount:	\$12,800.00
Previous Billings:	\$12,792.50
Current Billings:	\$0.00

**Subtotal: \$0.00**

**Phase: 3**

**Construction Contract Documents - Community Two  
254SW20.16040.13110**

Contract Amount: \$126,950.00

Project: 061105 Bill Group: 3

<u>Task</u>	<u>Task Fee</u>	<u>% Complete</u>	<u>Fee Earned</u>	<u>Prior Billing</u>	<u>Current Fee</u>
Overlot Grading Analysis	\$4,100.00	100.00	\$4,100.00	\$4,100.00	\$0.00
Overall Site Plan	\$900.00	100.00	\$900.00	\$900.00	\$0.00
Final Grading Plan	\$25,800.00	100.00	\$25,800.00	\$25,800.00	\$0.00
Final Drainage Study	\$14,400.00	100.00	\$14,400.00	\$14,400.00	\$0.00
Private Roadway Plans	\$11,000.00	100.00	\$11,000.00	\$11,000.00	\$0.00
Water System Plans	\$9,500.00	100.00	\$9,500.00	\$9,500.00	\$0.00
Water System & Sanitary Sewer Easements	\$2,850.00	100.00	\$2,850.00	\$2,850.00	\$0.00
Denver Water Dept License Agreement	\$700.00	100.00	\$700.00	\$700.00	\$0.00
Sanitary Sewer Study (Neighborhoods 2&3)	\$2,650.00	100.00	\$2,650.00	\$2,650.00	\$0.00
Sanitary Sewer Plans	\$10,100.00	100.00	\$10,100.00	\$10,100.00	\$0.00
Storm Sewer Plans	\$15,950.00	100.00	\$15,950.00	\$15,950.00	\$0.00
Grading Erosion & Sediment Control Plan	\$8,500.00	100.00	\$8,500.00	\$8,500.00	\$0.00
Overall Utility Plan	\$7,800.00	100.00	\$7,800.00	\$7,800.00	\$0.00
Horizontal Control	\$3,050.00	100.00	\$3,050.00	\$3,050.00	\$0.00
Paving Plan	\$3,800.00	100.00	\$3,800.00	\$3,800.00	\$0.00
Specifications & Quantity/Cost Estimates	\$5,850.00	100.00	\$5,850.00	\$5,850.00	\$0.00
<b>Task Billing Totals:</b>	<b>\$126,950.00</b>		<b>\$126,950.00</b>		<b>\$0.00</b>

**Subtotal: \$0.00**

**Phase: 4**

**Construction Contract Document Phase Meetings & PM (Hourly) 254SW20.16040.13110**

Contract Amount:	\$30,300.00
Previous Billings:	\$30,287.50
Current Billings:	\$0.00

**Subtotal: \$0.00**

**Phase: 5**

**Change Order - #12 254SW20.16040.13210**

Contract Amount:	\$2,025.00
Previous Billings:	\$2,025.00
Current Billings:	\$0.00

**Subtotal: \$0.00**

**Phase: 6**

**Sanitary Sewer Redesign-CO#16**

Contract Amount:	\$3,800.00
Percent Complete:	100.00%
Fee Earned:	\$3,800.00
Prior Fee Billings:	\$3,800.00

**Current Fee Totals: \$0.00**

**Subtotal: \$0.00**

**Phase: 7**

**Construction Administration Phase**

Contract Amount: \$38,247.50  
 Previous Billings: \$37,092.50  
 Current Billings: \$1,155.00

**Professional Services**

<u>Construction Administration</u>	<u>Bill Hours</u>	<u>Bill Rate</u>	<u>Charge</u>
Project Engineer	10.50	110.00	1,155.00
Construction Administration Total:	10.50		\$1,155.00
<b>Professional Services Totals:</b>			<b>\$1,155.00</b>
<b>Subtotal:</b>			<b>\$1,155.00</b>

**Phase: 8**

**Littleton Erosion Control Report & Plan**

Contract Amount: \$6,500.00  
 Percent Complete: 100.00%  
 Fee Earned: \$6,500.00  
 Prior Fee Billings: \$6,500.00

**Current Fee Totals: \$0.00**  
**Subtotal: \$0.00**

**Project # Totals:**

**\*\*\* Total Project # Invoice Amount** \$1,155.00

<b>Aged Receivables:</b>					
<u>Current</u>	<u>31-60 Days</u>	<u>61-90 Days</u>	<u>91-120 Days</u>	<u>&gt; 120 Days</u>	
\$1,155.00	\$0.00	\$0.00	\$0.00	\$0.00	

**Billing Message:**

Hourly Services this period include:  
 Erosion Control Revisions, meetings and coordination.