

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

Name of Debtor: ERICKSON RETIREMENT COMMUNITIES, LLC Case Number: 09-37010-59j11

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): Name and address where notices should be sent: DON'S JOHNS INC PO BOX 2007 MERRIFIELD, VA 22116-2007

FILED FEB 18 2010 TAWANA C. MARSHALL, CLERK U.S. BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS

Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: (If known) Filed on:

Name and address where payment should be sent (if different from above): Telephone number: (703)273-7100

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.

1. Amount of Claim as of Date Case Filed: \$134.06 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)().

2. Basis for Claim: Services (See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: ERICKSON 3a. Debtor may have scheduled account as: n/a (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: 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: BMC GROUP if any: \$ Basis for perfection: Amount of Secured Claim: \$ Amount Unsecured: \$134.06

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:

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.

Date: 2/12/10 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. FOR COURT USE ONLY Erickson Ret. Comm. LLC 01750

DON'S JOHNS, INC.

P.O BOX 2007
MERRIFIELD, VA 22116-2007



Ph: 703.273.7100

Fax: 703.991.3002

Statement

Billing Address
ERICKSON CONSTRUCTION MAIL STOP 501 P.O. BOX 22000 BALTIMORE, MD 21228

Service Address
ERICKSON CONSTRUCTION CONSTRUCTION TRAILER 21059 LOUDOUN COUNTY PKWY ASHBURN, VA20147

Phone: (410) 402-2200

Fax: (410) 204-7227

Cust #	Site #	Terms	Date	Page
ERICKSON	21756	NET15	2/8/2010	Page 1 / 1

Inv Date	Inv #	Amount	Paid	Balance
9/4/2009	235003	134.06	0.00	134.06
Site: 21756: ERICKSON CONSTRUCTION Total Balance				134.06

2/8/2010

Statement as of 2/8/2010

Future	Current	30 Day	60 Day	90 Day	Total Due
0.00	0.00	0.00	0.00	134.06	134.06

Please detach here and return the bottom portion with your payment.

Cust #: ERICKSON Site #: 21756

From ERICKSON CONSTRUCTION
MAIL STOP 501
P.O. BOX 22000
BALTIMORE, MD 21228

Statement as of 2/8/2010

Future	Current	30 Day	60 Day	90 Day	Total Due
0.00	0.00	0.00	0.00	134.06	134.06

Payment Amount

To DON'S JOHNS, INC.
P.O BOX 2007
MERRIFIELD, VA 22116-2007

Please provide your email address below.



DON'S JOHNS, INC.
 P.O BOX 2007
 MERRIFIELD, VA 22116-2007

Ph: 703.273.7100
 Fax: 703.991.3002

Email: customerservice@donsjohns.com

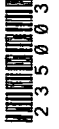
Invoice

Cust #	ERICKSON
Site #	21756
Date	9/4/2009
Clerk	HF
Terms	NET15
P.O.#	557-CRG7
Invoice #	A-235003
Due Date	9/19/2009

Page 1 / 1

Billing Address
ERICKSON CONSTRUCTION MAIL STOP 501 P.O. BOX 22000 BALTIMORE, MD 21228

Service Address
ERICKSON CONSTRUCTION CONSTRUCTION TRAILER 21059 LOUDOUN COUNTY PKWY ASHBURN, VA 20147



Phone: (410) 402-2200

Fax: (410) 204-7227

Rental & Service Completed Through **9/4/2009 TEAM A**

DESCRIPTION	RATE	QTY	TAX%	TAX	AMOUNT
INTERIOR RESTROOM ONE TIME SVC	125.00 /EACH	1	5.0	6.25	131.25
REDUCED ENVIRONMENTAL, ENERGY & WASTE	2.81 /EACH	1			2.81
Total Tax 6.25					134.06
Paid Amt					0.00
Adjustment Amt					0.00
Balance					134.06

Statement as of 2/8/2010	Future: 0.00	Current: 0.00	30 Day: 0.00	60 Day: 0.00	90 Day: 134.06	Total Due: 134.06
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Please detach here and return the bottom portion with your payment.

Div:A Cust #: ERICKSON Site #:21756 Invoice #: A-235003

From ERICKSON CONSTRUCTION
 MAIL STOP 501
 P.O. BOX 22000
 BALTIMORE, MD 21228



Please provide your email address below.

To DON'S JOHNS, INC.
 P.O BOX 2007
 MERRIFIELD, VA 22116-2007

_ AMEX _ VISA _ M/C _ Discover		_ Check Enclosed	
If paying by Credit Card, please fill out below		Invoice Balance	134.06
Card Number		Previous Balance	0.00
Exp. Date	CVC Code	Total Due	134.06
Choose One: <input type="checkbox"/> 1 Time Charge <input type="checkbox"/> Charge Monthly		Signature	
Signature		Amount Paid	

If credit card address different from billing address above, please write in below.

All invoices over 30 days late incur a finance charge of 18.00 %/yr or a minimum charge of 15.00 per invoice.