

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

PROOF OF CLAIM

Name of Debtor: Erickson

Case Number: _____

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:

20835749003324
DG FASTCHANNEL, INC
PO BOX 951392
DALLAS, TX 75395-1392

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: _____

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: \$ 19.00

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)(____).

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.

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

3. Last four digits of any number by which creditor identifies debtor: 108725

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: 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: \$ _____

RECEIVED

MAR 02 2010

BMC GROUP

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: 2-15-10

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.

9725812068

Pattinson Cash A/S Patti Vinson

FOR COURT USE ONLY

Erickson Ret. Comm. LLC



01752

DG FastChannel, Inc.
 PO Box 951392
 Dallas, TX 75395-1392

Statement Date 12/29/2009	TERMS NET 30	Page: 1
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ACCOUNT NO

108725 - ERICKSON RETIREMENT COMMUNITIES, LLC
 ATTN: GENE DIPAULA
 MAIL STOP 101
 P O BOX 310
 Linthicum, MD 21090-0310 USA

Please Direct Inquiries to : David Bilton (972-581-2135)

INV = Invoice
PAY = Payment
CM = Credit Memo

Document No	Type	PO Number	Tran Date	Due Date	Original Amount	Net Amount	Brand
110829901	INV		10/2/2009	11/1/2009		\$9.00	Erickson Retirement Communities
		45480140					JOB NO:NA
110832152	INV		10/2/2009	11/1/2009		\$9.00	Erickson Retirement Communities
		NA					JOB NO:41980140/41280140
Total Due						\$18.00	USD

Total due	Current	1 to 30 Days	31 to 60 Days	61 to 90 Days	91 to 120 Days	Over 120 Days
\$18.00	\$0.00	\$0.00	\$18.00	\$0.00	\$0.00	\$0.00

Please remit to:

DG FastChannel
PO Box 951392
Dallas , TX 75395-1392

Credit Card Authorization information :

Visa, Master Card or American Express

\$

Card Number	Exp Date	Signature	Amount
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Contact Phone Number

Please fax this authorization to : 972-536-0338