

Name of Debtor:  
Erickson Construction LLC

Case Number:  
09-37010-sgj11

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): Williams Scotsman, Inc

Check 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 box if you have never received any notices from the bankruptcy court in this case.  
 Check box if the address differs from the address on the envelop sent to you by the court.

**FILED**  
DEC 13 2010  
TAMMIE C. MARCHALL, CLERK  
U.S. BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS

THIS SPACE IF FOR COURT USE ONLY

Name and address where notices should be sent:  
Williams Scotsman, Inc  
8211 Town Center Dr Baltimore, MD 21236

Telephone Number: 410-931-6000

Account or other number by which creditor identifies debtor:  
9431819 / 11657569

Check here  replaces  
If this claim  amends a previously filed claim, dated: \_\_\_\_\_

1. Basis for Claim  
 Goods sold  
 Services performed  
 Money loaned  
 Personal injury/wrongful death  
 Taxes  
 Other Trailer Rental

Retiree benefits as defined in 11 U.S.C. 1114(a)  
 Wages, salaries, and compensation (fill out below)  
 Your SS # \_\_\_\_\_  
 Unpaid compensation for services performed  
 from \_\_\_\_\_ to \_\_\_\_\_  
 (date) (date)

**RECEIVED**  
**JAN 19 2011**  
**BMC GROUP**

2. Date debt was incurred: 10/20/2009 THRU 11/30/2010

3. If court judgment, date obtained:

4. Total Amount of Claim at Time Case Filed: **\$ 18,945.02**  
 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.  
 Check this box if claim includes interest or other charges in addition to the principal amount of the claim Attach itemized statement of all interest or additional charges.

5. Secured Claim.  
 Check this box if your claim is secured by collateral (including a right of setoff)  
 Brief Description of Collateral:  
 Real Estate  Motor Vehicle  
 Other \_\_\_\_\_  
 Value of Collateral: \$ \_\_\_\_\_

6. Unsecured Priority Claim.  
 Check this box if you have an unsecured priority claim  
 Amount entitled to priority \$ \_\_\_\_\_  
 Specify the priority of the claim:  
 Wages, salaries, or commissions (up to \$4,650),\* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, which ever is earlier - 11 U.S.C. 507(a)(3).  
 Contributions to an employee benefit plan - 11 U.S.C. 507(a)(4).  
 Up to \$2,100\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. 507(a)(6).  
 Alimony, maintenance, or support owed to a spouse, former spouse, or child - 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)(\_\_\_\_)  
 \* Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter With respect to cases commenced on or after the date of adjustment.

7. Credits: The amount of all payment on this claim has been credited and deducted for the purpose of making this proof of claim

8. Support Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statement of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien DONOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

THIS SPACE IS FOR COURT USE ONLY

Date: 12/7/2010  
  
 Aimee Dubon, Loss Mitigation Analyst

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

Erickson Ret. Comm. LLC  
  
 01859



Mobile Offices - Storage Products  
And More

Corporate Operations  
8211 Town Center Drive  
Baltimore, MD 21236

# INVOICE

Invoice #	Amount Due	Due Date
93853722B	99.51	10/14/2009
PLEASE INCLUDE INVOICE NUMBER ON YOUR CHECK PAYABLE TO WILLIAMS SCOTSMAN, INC.		<b>Amount Enclosed</b>

Only Corporate correspondence should be mailed to the address above.

Please remit payment to:

Billed to:

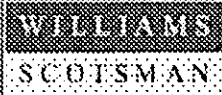
**WILLIAMS SCOTSMAN, INC.**  
**PO BOX 91975**  
**CHICAGO IL 60693-1975**

ERICKSON CONSTRUCTION LLC  
701 MAIDEN CHOICE LN  
CATONSVILLE, MD 21228  
| | | | |



▲ Please detach and return top portion with your payment to issue proper credit to your account. Thank you. ▲

## INVOICE



Mobile Offices - Storage Products  
And More

[www.willscot.com](http://www.willscot.com)

Question regarding your account should be directed to:

**Williams Scotsman**  
**12019 Livingston Road**  
**Manassas, VA 20109-2779**  
**888-378-9084**

Invoice Date:	10/14/2009	Unit Location
Invoice #:	93853722B	ERICKSON CONSTRUCTION Erickson Construction - Ashby Ponds 21222 ASHBY PONDS BLVD ASHBURN, VA 20147
Due Date	10/14/2009	
Customer #	11657569	<b>Purchasing Agent</b>
P.O. #		Michael Horrell

Federal ID NO 52-0665775 The buyer agrees to pay all applicable state and municipal taxes on this transaction

UNIT NO.	BILLING TERM	DESCRIPTION	AMOUNT
<b>When paying multiple invoices, please enclose all remittance forms or a list of all dollar amounts paid on each Invoice Number to assure accurate and timely application of payment.</b>			
CPX-75299	10/20/09 THRU 11/13/09	RENT MULTI-SECTIONAL VA PERSONAL PROPERTY TAX SALES TAX Pre-Petition Adjustment Payment	715.00 28.60 35.75 -129.90 -549.94
<b>CURRENT INVOICE AMOUNT DUE:</b>			<b>99.51</b>

B/O  
W-O  
602210-100  
DEC # 510

Late fees of 1 1/2% per month on all past due accounts. A \$30.00 fee will be charged for any returned checks.



Corporate Operations  
8211 Town Center Drive  
Baltimore, MD 21236

# INVOICE

Invoice #	Amount Due	Due Date
95169338	3,400.00	08/14/2010
PLEASE INCLUDE INVOICE NUMBER ON YOUR CHECK MADE PAYABLE TO WILLIAMS SCOTSMAN, INC.		Amount Enclosed

Do not include correspondence with your remittance. Correspondence should be directed to the Williams Scotsman Branch address indicated below.

Billed to:

Please remit payment to:

ERICKSON CONSTRUCTION LLC  
MAIL STOP 501  
PO BOX 22000  
CATONSVILLE, MD 21228-0002

WILLIAMS SCOTSMAN, INC.  
PO BOX 91975  
CHICAGO, IL 60693-1975

C. 2. 1

9431819

322147

▲ Please detach and return top portion with your payment to insure proper credit to your account. Thank you: ▲

Page 1 of 1

C. 2. 1

## INVOICE



Questions regarding your account should be directed to:

**Williams Scotsman**  
79 River Road  
Uxbridge, MA 01569-2246  
888-378-9084

<b>Invoice Date:</b>	08/14/2010	<b>Unit Location</b>
<b>Invoice #:</b>	95169338	ERICKSON CONSTRUCTION LLC Lindon Pond 411 Whiting Street HINGHAM, MA 02043
<b>Due Date:</b>	08/14/2010	<b>Purchasing Agent</b>
<b>Customer #:</b>	9431819	Peter Sherrill

www.willscot.com

Federal ID NO. 52-0665775. The buyer agrees to pay all applicable state and municipal taxes on this transaction.

UNIT NO.	BILLING TERM	DESCRIPTION	AMOUNT															
<p><b>When paying multiple invoices, please enclose all remittance forms or a list of all dollar amounts paid on each Invoice Number to assure accurate and timely application of payment. Invoices may be paid on-line at: <a href="http://www.willscot.com">www.willscot.com</a>. Billing questions may be emailed to: <a href="mailto:CustomerAssistance@Willscot.com">CustomerAssistance@Willscot.com</a>.</b></p>																		
CPX-71293	08/14/10 THRU 09/13/10	RENT MULTI-SECTIONAL	2750.00															
		EXPIRED PROP DAMAGE CERT FEE	360.00															
		EXPIRED LIABILITY CERT FEE	90.00															
		SALES TAX	200.00															
		<b>CURRENT INVOICE AMOUNT DUE:</b>	<b>3,400.00</b>															
<p><b>OPEN INVOICE(S) as of 08/14/2010</b></p> <table border="1"> <thead> <tr> <th>Due Date</th> <th>Invoice #</th> <th>Open Amount</th> </tr> </thead> <tbody> <tr> <td>08/14/2010</td> <td>95169338</td> <td>3400.00</td> </tr> <tr> <td>09/14/2010</td> <td>95229828</td> <td>3400.00</td> </tr> <tr> <td>10/14/2010</td> <td>95289462</td> <td>3400.00</td> </tr> <tr> <td>12/01/2010</td> <td>95383482</td> <td>8645.51</td> </tr> </tbody> </table>				Due Date	Invoice #	Open Amount	08/14/2010	95169338	3400.00	09/14/2010	95229828	3400.00	10/14/2010	95289462	3400.00	12/01/2010	95383482	8645.51
Due Date	Invoice #	Open Amount																
08/14/2010	95169338	3400.00																
09/14/2010	95229828	3400.00																
10/14/2010	95289462	3400.00																
12/01/2010	95383482	8645.51																

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#02010-100

REC 3 2010

Late fees of 1 1/2% per month on all past due accounts. A \$30.00 fee will be charged for any returned checks.



Corporate Operations  
8211 Town Center Drive  
Baltimore, MD 21236

# INVOICE

Invoice #	Amount Due	Due Date
95229828	3,400.00	09/14/2010
PLEASE INCLUDE INVOICE NUMBER ON YOUR CHECK MADE PAYABLE TO WILLIAMS SCOTSMAN, INC.		Amount Enclosed

Do not include correspondence with your remittance. Correspondence should be directed to the Williams Scotsman Branch address indicated below.

Billed to:

Please remit payment to:

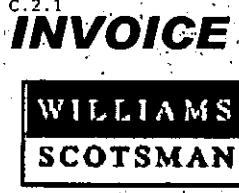
ERICKSON CONSTRUCTION LLC  
MAIL STOP 501  
PO BOX 22000  
CATONSVILLE, MD 21228-0002

WILLIAMS SCOTSMAN, INC.  
PO BOX 91975  
CHICAGO, IL 60693-1975

C.2.1 9431819 322147

▲ Please detach and return top portion with your payment to insure proper credit to your account. Thank you. ▲

Page 1 of 1



Questions regarding your account should be directed to:  
**Williams Scotsman**  
79 River Road  
Uxbridge, MA 01569-2246  
888-378-9084

<b>Invoice Date:</b>	09/14/2010	<b>Unit Location</b>
<b>Invoice #:</b>	95229828	ERICKSON CONSTRUCTION LLC Lindon Pond 411 Whiting Street HINGHAM, MA 02043
<b>Due Date:</b>	09/14/2010	
<b>Customer #:</b>	9431819	<b>Purchasing Agent</b>
		Peter Sherrill

www.willscot.com

Federal ID. NO. 52-0665775 The buyer agrees to pay all applicable state and municipal taxes on this transaction.

UNIT NO.	BILLING TERM	DESCRIPTION	AMOUNT
When paying multiple invoices, please enclose all remittance forms or a list of all dollar amounts paid on each Invoice Number to assure accurate and timely application of payment. Invoices may be paid on-line at: <a href="http://www.willscot.com">www.willscot.com</a> . Billing questions may be emailed to: <a href="mailto:CustomerAssistance@Willscot.com">CustomerAssistance@Willscot.com</a> .			
CPX-71293	09/14/10 THRU 10/13/10	RENT MULTI-SECTIONAL	2750.00
		EXPIRED PROP DAMAGE CERT FEE	360.00
		EXPIRED LIABILITY CERT FEE	90.00
		SALES TAX	200.00
		<b>CURRENT INVOICE AMOUNT DUE:</b>	<b>3,400.00</b>
<b>OPEN INVOICE(S) as of 09/14/2010</b>			
<b>Due Date</b>	<b>Invoice #</b>	<b>Open Amount</b>	
08/14/2010	95169338	3400.00	
09/14/2010	95229828	3400.00	
10/14/2010	95289462	3400.00	
12/01/2010	95383482	8645.51	

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Late fees of 1 1/2% per month on all past due accounts. A \$30.00 fee will be charged for any returned checks.



Corporate Operations  
8211 Town Center Drive  
Baltimore, MD 21236

# INVOICE

Invoice #	Amount Due	Due Date
95289462	3,400.00	10/14/2010
PLEASE INCLUDE INVOICE NUMBER ON YOUR CHECK MADE PAYABLE TO WILLIAMS SCOTSMAN, INC.		Amount Enclosed

Do not include correspondence with your remittance. Correspondence should be directed to the Williams Scotsman Branch address indicated below.

Billed to:

Please remit payment to:

ERICKSON CONSTRUCTION LLC  
MAIL STOP 501  
PO BOX 22000  
CATONSVILLE, MD 21228-0002

WILLIAMS SCOTSMAN, INC.  
PO BOX 91975  
CHICAGO, IL 60693-1975

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9431819

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Page 1 of 1

## INVOICE



Questions regarding your account should be directed to:

**Williams Scotsman**  
79 River Road  
Uxbridge, MA 01569-2246  
888-378-9084

<b>Invoice Date:</b>	10/14/2010	<b>Unit Location</b>
<b>Invoice #:</b>	95289462	ERICKSON CONSTRUCTION LLC Lindon Pond 411 Whiting Street HINGHAM, MA 02043
<b>Due Date:</b>	10/14/2010	<b>Purchasing Agent</b>
<b>Customer #:</b>	9431819	Peter Sherrill

www.willscot.com

Federal ID NO. 52-0665775. The buyer agrees to pay all applicable state and municipal taxes on this transaction.

UNIT NO.	BILLING TERM	DESCRIPTION	AMOUNT
<b>Effective with your next Invoice, the Rental Rate for your Equipment will increase by the Consumer Price Index and Return Charges may be at the current prevailing rate as defined in your Lease Agreement.</b>			
CPX-71293	10/14/10 THRU 11/13/10	RENT MULTI-SECTIONAL	2750.00
		EXPIRED PROP DAMAGE CERT FEE	360.00
		EXPIRED LIABILITY CERT FEE	90.00
		SALES TAX	200.00
		<b>CURRENT INVOICE AMOUNT DUE:</b>	<b>3,400.00</b>
<b>OPEN INVOICE(S) as of 10/14/2010</b>			
<b>Due Date</b>	<b>Invoice #</b>	<b>Open Amount</b>	
08/14/2010	95169338	3400.00	
09/14/2010	95229828	3400.00	
10/14/2010	95289462	3400.00	
12/01/2010	95383482	8645.51	

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Late fees of 1 1/2% per month on all past due accounts. A \$30.00 fee will be charged for any returned checks.



Corporate Operations  
8211 Town Center Drive  
Baltimore, MD 21236

# INVOICE

Invoice #	Amount Due	Due Date
95383482	8,645.51	12/01/2010
PLEASE INCLUDE INVOICE NUMBER ON YOUR CHECK MADE PAYABLE TO WILLIAMS SCOTSMAN, INC.		Amount Enclosed

Do not include correspondence with your remittance. Correspondence should be directed to the Williams Scotsman Branch address indicated below.

Billed to:

Please remit payment to:

ERICKSON CONSTRUCTION LLC  
MAIL STOP 501  
PO BOX 22000  
CATONSVILLE, MD 21228-0002

WILLIAMS SCOTSMAN, INC.  
PO BOX 91975  
CHICAGO, IL 60693-1975

C.2.1 9431819 322147

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Page 1 of 1

## INVOICE



Questions regarding your account should be directed to:  
  
**Williams Scotsman**  
79 River Road  
Uxbridge, MA 01569-2246  
888-378-9084

<b>Invoice Date:</b>	11/30/2010	<b>Unit Location</b>
<b>Invoice #:</b>	95383482	ERICKSON CONSTRUCTION LLC Lindon Pond 411 Whiting Street HINGHAM, MA 02043
<b>Due Date:</b>	12/01/2010	<b>Purchasing Agent</b>
<b>Customer #:</b>	9431819	Peter Sherrill

www.willscot.com

Federal ID NO. 52-0665775 The buyer agrees to pay all applicable state and municipal taxes on this transaction.

UNIT NO.	BILLING TERM	DESCRIPTION	AMOUNT
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CPX-71293		RETURN FREIGHT	2694.00
		DAMAGES -CARPET/FLOOR TILES	2221.02
		CEILING PLUMBING	
		DAMAGES - LABOR	3591.68
		SALES TAX	138.81
		<b>CURRENT INVOICE AMOUNT DUE:</b>	<b>8,645.51</b>
<b>OPEN INVOICE(S) as of 11/30/2010</b>			
<b>Due Date</b>	<b>Invoice #</b>	<b>Open Amount</b>	
08/14/2010	95169338	3400.00	
09/14/2010	95229828	3400.00	
10/14/2010	95289462	3400.00	
12/01/2010	95383482	8645.51	

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Late fees of 1 1/2% per month on all past due accounts. A \$30.00 fee will be charged for any returned checks.