


UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF TEXAS		PROOF OF CLAIM
<b>Name of Debtor: (Check Only One):</b> <input type="checkbox"/> Opus West Corporation <input checked="" type="checkbox"/> Opus West Construction Corporation <input type="checkbox"/> O.W. Commercial, Inc. <input type="checkbox"/> Opus West LP <input type="checkbox"/> Opus West Partners, Inc.		<b>Case Number:</b>  <p style="font-size: 24pt; text-align: center;">09-34360</p>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. All other requests for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
<b>Name of Creditor (the person or other entity to whom the debtor owes money or property):</b>  <p style="font-size: 24pt; text-align: center;">Cynthia D. Olsen</p>		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  <b>Court Claim Number:</b> <i>(if known)</i>  Filed on:
<b>Name and address where notices should be sent:</b> <p style="font-size: 24pt; text-align: center;">Cynthia D. Olsen 6033 Great Basin Dr, Roseville, CA 95678</p> <b>Telephone number:</b> 916-899-1535 <b>Email Address:</b> cindy@surewest.net		<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.
<b>Name and address where payment should be sent (if different from above):</b>  <p style="font-size: 24pt; text-align: center;">Same as above</p>		
<b>Telephone number:</b>		
<b>1. Amount of Claim as of Date Case Filed:</b> \$ _____ 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.		<b>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.</b>  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 checked="" 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). <b>16,433.50</b> <input checked="" type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5). <b>18,353.06</b> <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) ( ).  <b>Amount entitled to priority:</b>  <p style="font-size: 24pt; text-align: center;">\$ 34,786.50</p>
<b>2. Basis for Claim:</b> <u>services performed</u> (See instruction #2 on reverse side.)		
<b>3. Last four digits of any number by which creditor identifies debtor:</b> <u>0463</u> <b>3a. Debtor may have scheduled account as:</b> _____ (See instruction §3a on reverse side.)		
<b>4. Secured Claim (See instruction #4 on reverse side.)</b> Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. <b>Nature of property or right of setoff:</b> <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Equipment <input type="checkbox"/> Other <b>Value of Property:</b> \$ _____ <b>Annual Interest Rate</b> _____ % <b>Amount of arrearage and other charges as of time case filed included in secured claim, if any:</b> \$ _____ <b>Basis for perfection:</b> _____ <b>Amount Unsecured:</b> \$ _____		
<b>6. Credits:</b> The amount of all payments on this claim has been credited for the purpose of making this proof of claim. <b>7. Documents:</b> Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or 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.) <b>DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.</b> If the documents are not available, please explain: _____		
<b>Date:</b> <p style="font-size: 24pt;">11/04/09</p>	<b>Signature:</b> 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.  <p style="font-size: 24pt; text-align: center;">Cynthia D. Olsen</p>	<b>FOR COURT USE ONLY</b> OPUS WEST  00385

Cynthia D Olsen  
6033 Great Basin Drive  
Roseville, CA 95678

**Opus West Construction Corporation Bankruptcy Case Number 09-34360**  
**Breakdown of Claim Amount**

<b>Wages, Salaries or Commissions</b>	<b>Amount</b>
<b>Incentive Compensation</b>	
Earned and due 3/15/09 per 3/10/09 OWCC Worksheet	\$24,791.00
Less Paid Amount by OWCC on 3/13/09 see Earnings Statement	(\$12,395.50)
<b>Severance</b>	
2 weeks severance package not paid \$2,019/week wages x 2 wks.	\$4,038.00
<b>Total Wages, Salaries and Commissions Claim Amount</b>	<b>\$16,433.50</b>

<b>Contributions to an Employee Benefit Plan</b>	<b>Amount</b>
15% Contribution of Base Salary Amount = \$105,000 x 15%	\$15,750.00
15% Contribution of 70% Incentive Compensation = \$24,791 x 70%	
= \$17,353.70 x 15% Contribution =	\$2,603.06
<b>Total Contribution to Employee Benefit Plan Claim =</b>	<b>\$18,353.06</b>

<b>Total Claim Amount</b>	<b>\$34,786.56</b>
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THE OPUS GROUP  
ARCHITECTS  
CONTRACTORS  
DEVELOPERS

OPUS WEST CORPORATION

*A member of The Opus Group*

2555 East Camelback Road, Suite 800 • Phoenix, AZ 85016

Phone: 602-468-7000 • Fax: 602-468-7045

www.opuscorp.com

## Memo

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**To:** Opus West Employees  
**From:** Tom Roberts  
**Date:** March 10, 2009  
**Re:** 2008 Incentive Compensation

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Attached is the summary of your 2008 Incentive Compensation.

The ROE and bottom line portions of your Incentive Compensation will be delayed until finalization of the 2008 Audit. In addition, fifty percent (50%) of the Subjective portion will be paid in cash on March 13, 2009, with the balance being delayed due to Company cash flow. This will apply to both existing and laid off employees.

Opus is committed to making all payments due to employees. Our goal is to have all payments made by year-end 2009.

Thank you for your patience and understanding.

Olsen, Cynthia D.  
6033 Great Basin Dr  
Roseville, CA 95678

Opus West Construction Corporation  
Year End Incentive Worksheet

Location: Northern California  
Title: SPM

cindy olsen

Incentive Target:		\$ 22,500
	<u>weight</u>	<u>factor</u>
Opus West Corporation vs. Business Plan	25%	TBD
OWCC regional net revenue vs. plan	25%	238%
Safety Accountability Program	5%	115%
Individual Performance Modifier	45%	100%
Incentive Total:		\$ 24,791
Other:		\$ -
<b>Total</b>		<b>\$ 24,791</b>

*Paid #12,395.5  
on 3/13/09  
Balance Due  
#12,395.5*

Please contact your local Sr. Director or VP of Construction with any questions. 2008 ROE calculations for Opus West Corporation are not yet finalized. As a result, ROE related amounts are not currently included in above.

**Opus West Construction Corp**

2555 East Camelback Road  
Suite 800  
Phoenix AZ 85016

**Earnings Statement**

Pay Period: 3/1/2009 to 3/15/2009  
Route: 1-ONLINE Pay Date: 3/13/2009

Employee# 1018315  
Olsen, Cynthia D.  
6033 Great Basin Dr  
Roseville, CA 95678

Earnings	Hours	Rate	This Period	Year to Date	Deductions -		This Period	Year to Date
					Statutory and Other			
Regular Pay				19,956.71	Gross Wages		12395.50	38,223.50
PTO Taken				1,918.29	FIT		3098.88	5,777.22
Incen-NonDis			12,395.50	12,395.50	FICA-EE		768.52	2,309.58
GTL				13.75	Medi - EE		179.73	540.14
Auto Allow				275.00	CA SIT		743.73	1,671.88
Auto Expense				3,678.00	CA SDI - EE		136.35	409.61
					EE-Med-S		0.00	643.75
					EE-Dental-S		0.00	175.00
					EE-Vision-S		0.00	42.20
					ChldLife		0.00	4.75
					EEAddl LTD-S		0.00	36.55
					Flex Med		0.00	125.00

Total Gross Pay 12,395.50  
PTO Balance: 94.00 hrs

Total Deductions 4,927.21  
\* Net Pay 7,468.29

*Incentive comp. paid*



Opus West Construction Corp  
2555 East Camelback Road  
Suite 800  
Phoenix AZ 85016

Payment Distribution	Advice/Check #	Bank Name	Account #	Transit #	Amount
Auto Deposit	33989	S A F E CREDIT UNION	XXXXXXXX0092	321173742	7,468.29

Mail To: Olsen, Cynthia D.  
6033 Great Basin Dr  
Roseville, CA 95678

**Non-Negotiable**

**Opus West Construction Corp**

2555 East Camelback Road  
 Suite 800  
 Phoenix AZ 85016

# Earnings Statement

Pay Period: 5/16/2009 to 5/31/2009  
 Route: I-ONLINE Pay Date: 5/29/2009

Employee# 1018315

Olsen, Cynthia D.  
 6033 Great Basin Dr  
 Roseville, CA 95678

Earnings	Hours	Rate	This Period	Year to Date	Deductions -			
					Statutory and Other	This Period	Year to Date	
Regular Pay	86.67	50.481	4,375.00	41,427.86	Gross Wages	4375.00	65,853.33	
PTO Taken				1,918.29	FIT	499.31	9,905.22	
PTO Term Adj				5,754.83	FICA-EE	259.19	3,962.35	
Jury Duty				403.85	Medi - EE	60.62	926.68	
Incen-NonDis				12,395.50	CA SIT	106.90	2,740.95	
GTL			2.75	27.50	CA SDI - EE	45.96	702.70	
Auto Allow				275.00	EE-Med-S	128.75	1,287.50	
Auto Expense				3,678.00	EE-Dental-S	35.00	350.00	
					EE-Vision-S	8.44	84.40	
					ChldLife	.95	9.50	
					EEAddl LTD-S	7.31	73.10	
					Flex Med	25.00	250.00	
<b>Total Gross Pay</b>				<b>4,375.00</b>	<b>Total Deductions</b>			<b>1,177.43</b>
<b>PTO Balance:</b>				<b>5.00 hrs</b>	<b>* Net Pay</b>			<b>3,197.57</b>

*Handwritten:* 1/2 month Salary.  
 \$4,375 x 2 = 8,750/month



Opus West Construction Corp  
 2555 East Camelback Road  
 Suite 800  
 Phoenix AZ 85016

Payment Distribution	Advice/Check #	Bank Name	Account #	Transit #	Amount
Auto Deposit	35249	S A F E CREDIT UNION	XXXXXX0092	321173742	3,197.57

Mail To: Olsen, Cynthia D.  
 6033 Great Basin Dr  
 Roseville, CA 95678

**Non-Negotiable**



The Opus Group  
www.opuscorp.com

**OPUS WEST CORPORATION**

2555 E. Camelback Road, Suite 580, Phoenix, AZ 85016  
Phone 602-468-7000 Fax 602-468-7045

October 15, 2009

Cynthia D. Olsen  
6033 Great Basin Dr  
Roseville, CA 95678

Re: *2008 Opus Compensation Plan Statements*

Dear Cynthia:

The attached statement(s) summarize the activity for the 2008 Opus incentive compensation plan(s) in which you were a participant. Please review them thoroughly.

These statements are intended to inform you of the balance of your Compensation Accounts as of June 30, 2009. They are not intended to be a summary of the Plans, nor an amendment or modification thereof. You must consult the Plan Documents for an interpretation of your rights under the Plans.

The aggregate amounts on the statements have been submitted on schedules to the U.S. Bankruptcy Court. If you disagree with the numbers, you may file a proof of claim with the Court. You may also choose to file a proof of claim even if you agree with these numbers. Please note that the claim must be received no later than November 9, 2009.

If you have any questions on these statements, please call Vickie Sixta at 602-468-7095.

Sincerely,

Claire C. Janssen  
Chief Financial Officer

Attachments

**2008 Incentive**

Attached is the final calculation of your 2008 incentive incorporating final company results for 2008. Since the company recorded a loss for 2008, the return on equity component (if applicable) is zero. In most cases, employees received approximately 50% of the 2008 incentive on March 13, 2009.



Opus West Construction Corporation  
Year End Incentive Worksheet

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Title: SPM

cindy olsen

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<b>Total</b>		<b>\$ 24,791</b>

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3/10/2009