

<b>UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF TEXAS</b>	<b>PROOF OF CLAIM</b>
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Name of Debtor: (Check Only One):  
 Opus West Corporation  
 Opus West Construction Corporation  
 O.W. Commercial, Inc.  
 Opus West LP  
 Opus West Partners, Inc.

Case Number:

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.

Name of Creditor (the person or other entity to whom the debtor owes money or property):  
Tiffany A. Christensen

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

Name and address where notices should be sent:  
Tiffany A. Christensen  
 13221 W. 38th St.  
 Phoenix, AZ 85032  
 Telephone number: 602-708-7067  
 Email Address: tiffanychristensen21@yahoo.com

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.

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

1. Amount of Claim as of Date Case Filed: \$ 750.00  
 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.

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

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:  
 \$

3. Last four digits of any number by which creditor identifies debtor: \_\_\_\_\_  
 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     Equipment     Other  
 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 Unsecured: \$ \_\_\_\_\_

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 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.)  
 DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.  
 If the documents are not available, please explain: \_\_\_\_\_

Date: 11/3/09

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.  
Tiffany A. Christensen    Tiffany A. Christensen

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 OPUS WEST  
  
 00414



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

Tiffany A. Christensen  
13221 N 38th Street  
Phoenix, AZ 85032

Re: *2008 Opus Compensation Plan Statements*

Dear Tiffany:

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,

A handwritten signature in cursive script that reads "Claire C. Janssen".

Claire C. Janssen  
Chief Financial Officer

Attachments



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**MEMORANDUM**

**TO:** John Greer  
Vickie Sixta

**FROM:** Jeff Roberts

**RE:** Tiffany Christensen

**DATE:** June 5, 2009

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Following is the incentive compensation applicable for 2008:

	<u>Earned</u>
Spot Bonus	\$ 1,500.00
<b>TOTAL EARNED</b>	<u>1,500.00</u>
<b>50% PAID ON 3/13/09</b>	750.00
<b>BALANCE DUE</b>	<u><u>\$ 750.00</u></u>