

**UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS**

**PROOF OF CLAIM**

Name of Debtor: **Opus West Corporation** Case Number: **09-34356-11**

**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): **Interior Scapes By the Black Iris, Inc.**

Name and address where notices should be sent:  
**Interior Scapes By the Black Iris, Inc.  
 2950 S. Coast Hwy  
 Laguna Beach, CA 92651**

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 envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

Account or other number by which creditor identifies debtor: \_\_\_\_\_ Check here  replaces if this claim  amends a previously filed claim, dated: \_\_\_\_\_

**1. Basis for Claim**  
 Goods sold / Services performed  
 Customer Claim  
 Taxes  
 Money Loaned  
 Personal Injury  
 Other

**RECEIVED  
 SEP 28 2009  
 BMC GROUP**

Retiree benefits as defined in 11 U.S.C. § 1114(a)  
 Wages, salaries, and compensation (Fill out below)  
 Last four digits of Social Security number: \_\_\_\_\_  
 Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_  
 (date) (date)

**2. Date debt was incurred:** 4/09 – 5/09 **3. If court judgment, date obtained:** N/A

**4. Total Amount of Claim at Time Case Filed:** \$ 450 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (priority) \$ 450 (Total)

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: \$ \_\_\_\_\_  
 Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ \_\_\_\_\_

**6. Unsecured Non-Priority Claim.** \$ \_\_\_\_\_  
 Check this box if (a) there is no collateral or lien securing your claim or (b) your claim exceed the value of the property securing it or (c) none or only part of your claim is entitled to priority.

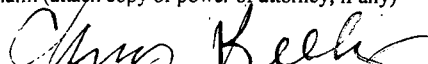
**7. Unsecured Priority Claim.**  
 Check this box if you have an unsecured priority claim  
 Amount entitled to priority \$ \_\_\_\_\_  
 Specify the priority of the claim.  
 Wages, salaries, or commissions (up to \$4,925)\* earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier -- 11 U.S.C. § 507(a)(7)  
 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 of governmental units -- 11 U.S.C. § 507(a)(8)  
 Other -- Specify applicable paragraph of 11 U.S.C. §§ 507(a)(1) and 546(c)  
 \* Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after date of adjustment.

**8. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.  
**9. Supporting Documents:** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.  
**10. 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.

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**OPUS WEST**  
  
 00639

Date: September 23 2009

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)  
  
 Chris Kelly

Interior-Scapes by The Black Iris, Inc.

2950 S. Coast Highway  
Laguna Beach, CA 92651

# Invoice

Date	Invoice #
5/26/2009	52827

Bill To
OPUS West 2050 Main Street #800 Irvine, CA 92614

Description	Amount
May Plant Maintenance	225.00
CA Sales Tax	0.00
Thank you for your business. Invoices are due upon receipt.	
<b>Total</b>	<b>\$225.00</b>

Interior-Scapes by The Black Iris, Inc.

2950 S. Coast Highway  
Laguna Beach, CA 92651

# Invoice

Date	Invoice #
4/27/2009	52790

Bill To
OPUS West 2050 Main Street #800 Irvine, CA 92614

Description	Amount
April Plant Maintenance	225.00
CA Sales Tax	0.00
Thank you for your business. Invoices are due upon receipt.	<b>Total</b> \$225.00

### CERTIFICATE OF SERVICE

I, Viann Corbin, declare as follows:

I am employed in the County of Orange, State of California; I am over the age of eighteen years and am not a party to this action; my business address is 660 Newport Center Drive, Fourth Floor, Newport Beach, California 92660, in said County and State.

On September 26, 2009, I served the following document: **PROOF OF CLAIM** on each of the interested parties stated below, as follows:

Clifton Jessup Jr. Greenberg Traurig, LLP 2200 Ross Avenue, Suite 5200 Dallas, TX 75201.	Bankruptcy Clerk's Office 1100 Commerce Street Room 1254 Dallas, TX 75242
BMC Group, Inc. Attn: Tinamarié Fell 600 1 <sup>st</sup> Avenue, Suite 300 Seattle, WA 98104	Opus West Corporation, et al. c/o BMC Group P.O. Box 3020 Chanhassen, MN 55317-3020

by the following means of service:

- BY MAIL:** I placed a true copy in a sealed envelope addressed as indicated above, on the above-mentioned date. I am familiar with the firm's practice of collection and processing correspondence for mailing. It is deposited with the U.S. Postal Service on that same day in the ordinary course of business. Under that practice it would be deposited with the U.S. Postal Service on that same date with postage thereon fully prepaid at Newport Beach, California in the ordinary course of business I am aware that on motion of party served, service is presumed invalid if postal cancellation date or postage meter date is more than one day after date of deposit for mailing in affidavit.
- I am employed in the office of Winthrop Couchot Professional Corporation; Peter W. Lianides is a member of the bar of this court.
- (FEDERAL)** I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 25, 2009, at Newport Beach, California.

/s/ Viann Corbin  
Viann Corbin