

UNITED STATES BANKRUPTCY COURT		Southern District of New York		PROOF OF CLAIM	
Name of Debtor: Residential Capital, LLC		Case Number: 12-12020		<div style="text-align: center;"> RECEIVED JAN 09 2013 KURTZMAN CARSON CONSULTANTS </div> <div style="text-align: center;"> COURT USE ONLY <input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ <i>(If known)</i> Filed on: _____ </div>	
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.					
Name of Creditor (the person or other entity to whom the debtor owes money or property): 1650 Corporate Circle, LLC					
Name and address where notices should be sent: Matthew J. Williams c/o Gibson Dunn & Crutcher 200 Park Avenue #47 NY, NY 10166-0193 Telephone number: (212) 351-2322 email: MJWilliams@gibsondunn.com				<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.	
Name and address where payment should be sent (if different from above): Juliana Priest, c/o Investcorp International, Inc. 280 Park Avenue 36th Floor NY, NY 10017 Telephone number: (212) 599-4700 email: jpriest@Investcorp.com				<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.	
1. Amount of Claim as of Date Case Filed: \$ 2,054,416.00 If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.				<input checked="" type="checkbox"/> Date Stamped Copy Returned <input type="checkbox"/> No self addressed stamped envelope <input type="checkbox"/> No copy to return	
2. Basis for Claim: Real property lease. (See instruction #2)					
3. Last four digits of any number by which creditor identifies debtor:		3a. Debtor may have scheduled account as: PVP Holdings JV, LLC (See instruction #3a)		3b. Uniform Claim Identifier (optional): (See instruction #3b)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ Annual Interest Rate % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)				Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ Basis for perfection: Amount of Secured Claim: \$ Amount Unsecured: \$	
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying priority and state the amount.					
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).		<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).		<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).	
<input type="checkbox"/> \$2,600* of deposits toward lease, or rental of property or for personal, family, or household – 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)().	
				Amount entitled to priority: \$	
Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.					
Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)					



1212020130109000000000008