SAND CASTLE TOA 19-02764

Fill in this infor	mation to identify the case:	
Debtor 1	Sand Castle South Timeshare Ov	vners Association, Inc.
Debtor 2 (Spouse, if filing)		
United States Ba	ankruptcy Court for the	District of South Carolina
Case number: 19-02764-jw		

C1.	- i m	1005	

Claim 1005



2019 AUG -8 A 10: 24

U.S BANKRUPTCY COURT DISTRICT OF SOUTH CAROLINA

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 306) that you received.

Par	t 1: Identify the Claim	9	
1.	Who is the current creditor?	Shelly Mercer-Jamison Name of the current creditor (the person or entity to be paid for Other names the creditor used with the debtor	·
2.	Has this claim been acquired from someone else?	⊠ No □ Yes. From whom?	
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (If different)
×	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Shelly Mercer-Jamison Name 30 Plains Road Number Street Hamden CT 06514 City State ZIP Code Contact phone (203) 676-4262 Contact email ladysjamison@gmail.com Uniform claim identifier for electronic payments in chapter 13 (if	
4.	Does this claim amend one already filed?	 ☑ No ☐ Yes, Claim number on court claims registry (if known) 	Filed on MM / DD / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?	

Part 2: Give Information About the Claim as of the Date the Case Was Filed Do you have any number ☐ No you use to identify the Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ___ debtor? 7. How much is the claim? \$ 11,900.00 _. Does this amount include interest or other charges? ⊠ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A). Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. What is the basis of the claim? Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Paid in full ownership in one vacation timeshare week. Is all or part of the claim 9. □ No secured? Yes. The claim is secured by a lien on property. Nature of property: 🛛 Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. ☐ Motor vehicle ☐ Other. Describe: Basis for perfection: Warranty Deed Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: Amount of the claim that is secured: (The sum of the secured and unsecured Amount of the claim that is unsecured: amounts should match the amount in line 7.) Amount necessary to cure any default as of the date of the petition: Annual Interest Rate (when case was filed) ______% □ Variable 10. Is this claim based on a ⊠ No ☐ Yes. Amount necessary to cure any default as of the date of the petition.

Proof of Claim

lease?

11. Is this claim subject to a

right of setoff?

⋈ No

☐ Yes. Identify the property: ___

12.	Is all or part of the claim		No					
	entitled to priority under 11 U.S.C. § 507(a)?		Yes. Check one:				An	nount entitled to priority
	A claim may be partly priority and partly nonpriority. For example,			port obligations (including a 07(a)(1)(A) or (a)(1)(B).	alimony and child	support) under	\$	
	in some categories, the law limits the amount entitled to priority.			of deposits toward purchas ily, or household use.	e, lease, or rental	of property or ser	vices for \$	
		 Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). 				2		
			☐ Taxes or pena	alties owed to governmenta	ul units. 11 U.S.C	. § 507(a)(8).	\$	
			☐ Contributions	to an employee benefit pla	n. 11 U.S.C. § 50	07(a)(5).	\$, , , , , , , , , , , , , , , , , , ,
			☐ Other, Specif	fy subsection of 11 U.S.C. §	§ 507(a)() that	t applies.	\$	
			* Amounts are subject	ct to adjustment on 4/01/22 and	every 3 years after t	hat for cases begun	on or after the date	e of adjustment
Par	t 3: Sign Below							202500020000000000000000000000000000000
	person completing	Ch	eck the appropriate	box:			8:	
sign	proof of claim must and date it.	\boxtimes	I am the creditor					
FRE	3TP 9011 (b).	☐ I am the creditor's attorney or authorized agent.						
	ou file this claim etronically, FRBP		I am the trustee,	or the debtor, or their author	orized agent. Bar	nkruptcy Rule 300)4.	
5005(a)(2) authorized courts to establish local rules specifying what a signature		☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
is.			I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and			ave examined the indicate of t	nformation in this <i>Proof of</i> C	Claim and have a	reasonable belief	that the informa	ation is true
		I declare under penalty of perjury that the foregoing is true and correct.						
357	1.	Ex	ecuted on date	08/05/2019 MM / DD //YYYY				
		7	Signature Signature	1				
03								
				the person who is comple	eting and signing	g this claim:	Massas Innie	
			Name	Shelly First name	Middle name	e	Mercer-Jamis Last name	on
			Title	Timeshare owner				
			Company	Identify the corporate se	rvicer as the com	pany if the author	ized agent is a	servicer.
			Address	30 Plains Road Number Street				olionilii siisolii lota seeta s
				<u>Hamden</u> City		CT State	06514 ZIP Code	
			Contact phone	(203) 676-4262			nison@gmail.com	n

THIS INSTRUMENT PREPARED ON BEHALF OF GRANTOR BY: BELLAMY, RUTENBERG, COPELAND, EPPS, GRAVELY & BOWERS, P.A. P.O. Box 357 Myrtle Beach, SC 29578

STATE OF SOUTH CAROLINA)	WARRANTY DEED
)	
COUNTY OF HORRY)	ANNUAL TIMESHARE INTEREST

KNOW ALL MEN BY THESE PRESENTS, THAT in the State aforesaid for and in consideration of the sum of Ten and No/100 Dollars (\$10.00) and other good and valuable consideration in hand paid by Grantee, the receipt whereof is hereby acknowledged, SAND CASTLE SOUTH CONDO, LLC, a limited liability company organized and existing under the laws of the State of South Carolina, the address of which is 406 North Kings Highway, Myrtle Beach, South Carolina 29577 ("Grantor") has granted, bargained, sold and released, and by these Presents does grant, bargain, sell and release unto Shelly Mercer-Jamison and Michael Jamison whose address is _________30 Plains Road, Hamden, CT_06514 _______ ("Grantee") as Joint Tenants with rights of survivorship and not us tenants in common. _______, in fee simple, the following described property:

Timeshare Interest(s) consisting of an undivided 1/52nd interest(s) in fee simple as tenant in common in each of the belowdescribed Timeshare Unit(s) of Sand Castle South Horizontal Property Regime (the "Condominium"), together with the corresponding undivided interest in the Common Elements which are appurtenant to such Timeshare Interest, as well as the recurring (i) exclusive right of Grantee in every calendar year, commencing with the calendar year identified as the date of this instrument, to reserve, use and occupy an Assigned Unit within the Sand Castle South Timeshare Ownership Plan of the Condominium; (ii) exclusive right to use and enjoy the Common Furnishings located within or otherwise appurtenant to such Assigned Unit; and (iii) the non-exclusive rights to use and enjoy the Common Elements of the Condominium, for their intended purposes, all during the Vacation Week(s) as shall properly have been reserved in accordance with the provisions of the then-current Rules and Regulations of Sand Castle South Timeshare Owners Association, Inc., and all pursuant to the Supplemental Declaration for Sand Castle South Timeshare Ownership Plan recorded at Deed Book 3255 , Page 567 , et seq., of the records of the R.O.D. Office for Horry County, South Carolina, as amended or supplemented (the "Supplemental Declaration"), and the Master Deed for Sand Castle South Horizontal Property Regime recorded at Deed Book 3114, Page 478, et seq., of the records of the R.O.D. Office for Horry County, South Carolina, as amended or supplemented, to which such Supplemental Declaration and Master Deed the Timeshare Interest(s) is subject. Unless the context otherwise requires, the terms used herein shall have the same meanings as those set forth in the Supplemental Declaration. Said Property being a portion of the property conveyed to Sand Castle South Condo, LLC by Cherokee Motels, Inc., by deed recorded on June 16, 2006 in the R.O.D. Office for Horry County in Deed Book 3114, Page 462.

TIMESHARE UNIT NUMBER: 918/919 INITIAL USE YEAR: 2009	UNIT TYPE: 1 BEDROOM /1BEDROOM	DESIGNATED SEASON: CHOICE GOLD
VACATION WEEK NUMBER: 6 A/6A	_ltogether with "A" (Annual Timeshare Interest)]	

The aforesaid Vacation Week is designated an Annual Vacation Week. An Annual Vacation Week allows occupancy and use of a Timeshare Unit each and every year. An Annual Vacation Week is designated with an "A," indicating a full Timeshare Interest.

TOGETHER with all and singular, the Rights, Members, Hereditaments and Appurtenances to the said Timeshare Interests belonging, or in anywise incident or appertaining.

TO HAVE AND TO HOLD, all and singular, the said Timeshare Interests before mentioned unto the said Grantee subject, however, to the rights, conditions and restrictions that constitute covenants running with the land, all as set forth herein.

AND Grantor does hereby bind itself and its Successors and Assigns to warrant and forever defend, all and singular, the said Timeshare Interests unto the said Grantee, and its successors and assigns, against all persons whomsoever lawfully claiming, or to claim the same or any part thereof.

INSTRUMENTS 1010000109051, DEED BY 1483 PG 996 DCCTYPE 001 1026 3 10 1 1113 53 PW 1 10 4 COUNTY STAMPS 813 10 STATE STAMPS 331 20 BALLER SAMPER HORRY COUNTY SC PEGISTRAP DA DEEDS IN WITNESS WHEREOF, Grantor has caused this instrument to be signed and sealed this 22nd day of October , 2008.

Signed, sealed and delivered

in the presence of:

Unofficial Witness Print Name:

Unofficial Witness Print Name: **GRANTOR:**

SAND CASTLE SOUTH CONDO, LLC,

a South Carolina limited liability sumpany,

By: WWW Shroff A

Print Title: Authorized Agent

STATE OF SOUTH CAROLINA COUNTY OF HORRY

l, the undersigned Notary Public for South Carolina, do hereby certify that Sand Castle South Condo, LLC, a South Carolina limited liability company, by Shroff, its Authorized Agent, personally appeared before me this day, and in the presence of the two witnesses above named, acknowledged the execution of the foregoing instrument on behalf of Sand Castle South Condo, LLC.

Witness my hand and seal this 22nd day of October, 2008.

Notary Public

My Commission Expires:

DOR Form Rev. 05/19/06
STATE OF SOUTH CAROLINA)
COUNTY OF HORRY) AFFIDAVIT FOR TAXABLE OR EXEMPT TRANSFERS
PERSONALLY appeared before me the undersigned, who being duly sworn, deposes and says:
1. I have read the information on this affidavit and I understand such information.
2. The property being transferred is located at 2007 South Ocean Blvd, Myrtle Beach, S.C. 29577 bearing County Tax Map Number 187-01-02-194, was transferred by Sand Castle South Condo, LLC. To Shelly Mercer-Jamison and Michael Jamison on Octobert 22, 2008. 3. Check one of the following: The deed is
(a) subject to the deed recording fee as a transfer for consideration paid or to be paid in money or money's worth. (b) subject to the deed recording fee as a transfer between a corporation, a partnership, or other entity and a stockholder, partner, or owner of the entity, or is a transfer to a trust or as a distribution to a trust beneficiary. (c) exempt from the deed recording fee because (See Information section of affidavit): (If exempt, please skip items 4 - 7, and go to item 8 of this affidavit.)
If exempt under exemption #14 as described in the Information section of this affidavit, did the agent and principal relationship exist at the time of the original sale and was the purpose of this relationship to purchase the realty? Check Yes or No
4. Check one of the following if either item 3(a) or item 3(b) above has been checked (See Information section of this affidavit.):
(a) The fee is computed on the consideration paid or to be paid in money or money's worth in the amount of \$11,900.00 (b) The fee is computed on the fair market value of the realty which is (c) The fee is computed on the fair market value of the realty as established for property tax purposes which is
5. Check Yes or NoX to the following: A lien or encumbrance existed on the land, tenement, or realty before the transfer and remained on the land, tenement, or realty after the transfer. If "Yes," the amount of the outstanding balance of this lien or encumbrance is:
6. The deed recording fee is computed as follows:
(a) Place the amount listed in item 4 above here:\$11,900.00 (b) Place the amount listed in item 5 above here:0 (If no amount is listed, place zero here.) (c) Subtract Line 6(b) from Line 6(a) and place result here:\$11,900.00 7. The deed recording fee due is based on the amount listed on Line 6(c) above and the deed recording fee due is:
8. As required by Code Section 12-24-70. I state that I am a responsible person who was connected with the transaction as:
9. I understand that a person required to furnish this affidavit who willfully furnishes a false or fraudulent affidavit is guilty of a misdemeanor and upon conviction, must be fined not more than one thousand dollars or imprisoned not more than one year, or both. Responsible Person Connected with the Transaction
Print or Type Name Here
SWORN to before me this 22, day of October, 2008

Notary Public for SC My Commission Expires:

Shelly Mercer-Jamison Hamden, CT 06514 30 Plains Road

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J. Bratton Davis United States Columbia, SC 29201-2423 Bankruptcy Courthouse 1100 Laurel Street

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American Legal Claims

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OFFICE OF THE CLERK
UNITED STATES BANKRUPTCY COURT
District of South Carolina
J. Bratton Davis U.S. Bankruptcy Courthouse
1100 Laurel Street
Columbia, SC 29201-2423

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