**UNITED STATES DISTRICT COURT  
DISTRICT OF NEW JERSEY**

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| SECURITIES AND EXCHANGE COMMISSION,  Plaintiff,  v.  DWAYNE EDWARDS; TODD BARKER; SENIOR SOLUTIONS OF SOCIAL CIRCLE, LLC; OXTON PLACE OF DOUGLAS, LLC, d/b/a OXTON REAL ESTATE OF DOUGLAS, LLC; ROME ALF, LLC; SAVANNAH ALF, LLC; WATERFORD PLACE ALF, LLC; MONTGOMERY ALF, LLC; COLUMBUS ALF, LLC; and OPELIKA ALF, LLC,  Defendants,  -and-  OXTON SENIOR LIVING, LLC; MANOR HOUSE SENIOR LIVING, LLC; SUSAN EDWARDS, a/k/a SUSAN ROGERS; SHARON NUNAMAKER, a/k/a SHARON HADDEN; and SDH DESIGN, LLC,  Relief Defendants. | Case No. 2:17-cv-393-ES-SCM |

# NOTICE OF CLAIMS PROCESS AND CLAIMS BAR DATES

To all potential holders of Claims (as defined below) against Rome ALF, LLC (the “***Receivership Entity***”) that arose from or related to the assisted living facility commonly known as Oxton Place of Rome, d/b/a Manor House of Rome and located at 1168 Chulio Road SE, Rome, Georgia:

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| **YOU ARE RECEIVING THIS NOTICE BECAUSE YOU MAY HAVE OR ASSERT A CLAIM AGAINST THE RECEIVERSHIP ESTATE. THEREFORE, YOU SHOULD READ THIS NOTICE CAREFULLY AND DISCUSS IT WITH YOUR ATTORNEY. IF YOU DO NOT HAVE AN ATTORNEY, YOU MAY WISH TO CONSULT ONE.** |

Please take notice that on January 20, 2017 (the “***Appointment Date***”), the United States District Court for the District of New Jersey (the “***Court***”) entered an order (the “***Receivership Order***”) appointing Derek Pierce (the “***Receiver***”) as receiver over certain assets owned by or in the possession or control of the Receivership Entity (such assets, the “***Receivership Estate***”). Having exclusive jurisdiction over the Receivership Estate, the Court entered an order dated August 9, 2017, establishing a process and procedure for the determination and allowance of all claims against the Receivership Estate (the “***Claims Order***”), which is enclosed and incorporated here by reference.

Pursuant to the Claims Order, **October, 30 2017 at 5:00 p.m. (prevailing Central time)** (the “***General Claims Bar Date***”) is the last date and time for each person or entity to file a claim against the Receivership Estate based upon any claim against the Receivership Entity arising before the Appointment Date (the “***General Claims***”).

Pursuant to the Claims Order, all claims against the Receivership Estate and Receiver based on claims against the Receivership Entity or the Receiver arising on or after the Appointment Date, excluding any claims of the Receiver and any professionals retained by the Receiver (the “***Admin Claims***”, and together with the General Claims, the “***Claims***”), must be submitted by the later of the General Claims Bar Date or thirty (30) days after the date on which such Claim became due and owing by the Receivership Estate (the “***Admin Claims Bar Date***” and together with the General Claims Bar Date, the “***Bar Dates***”).

The Claims Order, the Bar Dates, and the procedures set forth in the Claims Order for the filing of Claims apply to all Claims against the Receivership Estate and Receiver.

**A CLAIMANT SHOULD CONSULT AN ATTORNEY IF THE CLAIMANT HAS ANY QUESTIONS, INCLUDING WHETHER SUCH CLAIMANT SHOULD FILE A CLAIM.**

1. **Persons or Entities Who Must File a Claim.** Any person or entity that has or asserts a Claim against the Receivership Entity, Receivership Estate, or Receiver, except as otherwise set forth in the Receiver Order or Claims Order, must file a Claim on or before the applicable Bar Date to share in any distributions from the Receivership Estate.

Acts or omissions of the Receivership Entity and Receiver may give rise to Claims against the Receivership Estate that must be filed by the applicable Claims Bar Date, notwithstanding that such Claims may not have matured or become fixed or liquidated prior to such Bar Date.

As used in this notice and the Claims Order, the word “Claim” includes both General Claims and Admin Claims and means a: (i) right to payment, whether or not such right is reduced to judgment, liquidated, unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal, equitable, secured, or unsecured; or (ii) right to an equitable remedy for breach or performance if such breach gives rise to a right to payment, whether or not such right to an equitable remedy is reduced to judgment, fixed, contingent, matured, unmatured, disputed, undisputed, secured, or unsecured.

THE FACT THAT YOU RECEIVED THIS NOTICE DOES NOT MEAN THAT YOU HAVE A CLAIM OR THAT THE RECEIVERSHIP ENTITY, RECEIVER, OR COURT BELIEVE THAT YOU HAVE A CLAIM. YOU SHOULD NOT FILE A CLAIM IF YOU DO NOT HAVE A CLAIM AGAINST the RECEIVERSHIP ENTITY, THE RECEIVER, OR THE RECEIVERSHIP ESTATE.

1. **When and Where to File.** All Claims must be filed so as to be actually received no later than 5:00 p.m. (prevailing Central time) on or before the applicable Bar Date at the following address:

**Healthcare Management Partners, LLC**c/o Waller Lansden Dortch & Davis, LLP  
Attn: Chris Cronk  
511 Union Street, Suite 2700  
Nashville, Tennessee 37219  
chris.cronk@wallerlaw.com

Claim Forms will be deemed timely filed only if actually received on or before the applicable Bar Date. Claims may be delivered by electronic mail transmission using the e-mail address set forth above.

1. **Contents of a Claim Form.** If you intend to file a Claim, you must complete and submit the court-approved Claim Form enclosed with this notice (the “***Claim Form***”).

Your Claim Form must: (i) be signed and notarized; (b) be written in the English language; (c) be denominated in lawful currency of the United States; and (d) be submitted with copies of any supporting documentation or an explanation of why any such documentation is not available.

1. **Consequence of Failure to Timely File Claim Form.** Any claimant who fails to file a Claim in the form and manner set forth in the Claims Order and this notice, or that fails to do so on or before the applicable Bar Date, will forever be barred, estopped, and enjoined from asserting such Claim against the Receivership Estate or Receiver, and shall not be treated as a creditor with respect to such Claim for the purposes of any distributions from the Receivership Estate, and the Receiver and Receivership Estate shall be forever discharged from any and all indebtedness or other liability with respect to such Claim.
2. **Contingent Claims.** Acts or omissions of the Receivership Entity, if any, that occurred prior to the Appointment Date, including, without limitation, acts or omissions related to any indemnity agreement guarantee, services provided to or rendered by the Receivership Entity, or goods provided to or by the Receivership Entity, may give rise to Claims against the Receivership Entity or the Receivership Estate, notwithstanding the fact that such Claims (or any injuries on which they may be based) may be contingent or may not have matured or become fixed or liquidated prior to the Appointment Date. Therefore, any person or entity that holds a Claim or potential Claim against the Receivership Entity, no matter how remote, contingent, or unliquidated must file a Claim on or before the applicable Bar Date.
3. **Reservation of Rights.** Nothing contained in this notice is intended or should be construed as a waiver of any of the Receiver’s rights, including without limitation, his rights to dispute, or assert offsets or defenses against, any Claim as to the nature, amount, liability, or classification of such Claim.
4. **Additional Information.** If you have questions concerning the submission or processing of Claims, you may contact Chris Cronk, via phone at 615-244-6380, via e-mail at chris.cronk@wallerlaw.com or via mail at the following address:

**Healthcare Management Partners, LLC**c/o Waller Lansden Dortch & Davis, LLP  
Attn: Chris Cronk  
511 Union Street, Suite 2700  
Nashville, Tennessee 37219

# Claim Form

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| **UNITED STATES DISTRICT COURT FOR THE DISTRICT OF NEW JERSEY** | **PROOF OF CLAIM** |
| *Securities and Exchange Commission v. Edwards et al.* | Case No. 2:17-cv-393-ES-SCM |
| Name of Creditor (the person or other entity to whom Rome ALF, LLC owes money or property): | Received |
| Name and address where notices should be sent:  Telephone Number: Email: | Check this box if this claim amends a previously filed claim.  Claim # \_\_\_\_\_\_\_\_\_ |
| Name and address where payment should be sent (if different from above):  Telephone Number: Email: | Check this box if you are aware that anyone else has filed a proof of claim relating to this claim and attach a copy of such claim. |
| **1. Amount of Claim:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If all or part of the claim is secured, complete item 3.  If all or part of the claim is based upon taxes, complete item 4. | |
| **2. Basis for Claim:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 3. **Secured Claim.**  Basis for perfection: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount of Secured Claim: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Annual Interest Rate: \_\_\_\_\_\_\_\_\_\_ | |
| 4. **Tax Claims.**  Taxing Entity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Basis for Tax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Taxes Owed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Penalties Owed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Annual Interest Rate: \_\_\_\_\_\_\_\_\_\_\_ | |

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| 5. **Documents**. Attached are **redacted** copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, etc. If the claim is secured, box 3 has been completed, and **redacted** copies of documents providing evidence of perfection of a security interest are attached.  DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED.  If the documents are not available, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 6. **Signature.**  I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information and reasonable belief.  Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_  (Signature) (Date)  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# Publication Notice

# NOTICE TO FILE CLAIMS

Derek Pierce (the “***Receiver***”), acting solely in its capacity as the court-appointed receiver for certain assets owned by or in the possession or control of Rome ALF, LLC (the “***Receivership Entity***”) that arose from or related to the assisted living facility commonly known as Oxton Place of Rome, d/b/a Manor House of Rome and located at 1168 Chulio Road SE, Rome, Georgia (such assets, the “***Receivership Estate***”), hereby provides notice to any person having a claim against the Receivership Estate based on claims against the Receivership Entity or the Receiver to present such claim in accordance with the procedures established by the United States District Court for the District of New Jersey (the “***Court***”). Pursuant to the Court’s order dated August 9, 2017 (the “***Claims Order***”), any claimant with an actual, potential, or contingent claim arising on or before January 20, 2017 (the “***Appointment Date***”) must file a Claim Form on or before October 30, 2017 at 5:00 p.m. (prevailing Central time) and any claims arising on or after the Appointment Date must be submitted by the later of October 30, 2017 at 5:00 p.m. (prevailing Central time) and thirty (30) days after the day on which such claim became due and owing by the Receivership Estate. The Court has established a procedure for the allowance of claims against the Receivership Estate (the “***Claims Process***”), including without limitation, the submission of claims using a court-approved “Claim Form.” Any claim that is not timely submitted in the form and manner set forth by the Claims Order will forever be barred as provided in the Claims Order. For a copy of the Claims Order and Claims Form, or for other additional information regarding the Claims Process, please submit a written request to Chris Cronk, at 511 Union Street, Suite 2700, Nashville, Tennessee 37219 or via e-mail at chris.cronk@wallerlaw.com.

Dated: , 2017

Derek Pierce, as receiver

**Waller Lansden Dortch & Davis, LLP**

511 Union Street, Suite 2700

Nashville, Tennessee 37219

(615) 244-6380

To be published in the [\_\_\_\_\_\_] in its issue of [\_\_\_\_\_\_] [\_\_\_], [\_\_\_], and [\_\_\_], 2017.