

**ONTARIO
SUPERIOR COURT OF JUSTICE
COMMERCIAL LIST**

**IN THE MATTER OF THE LIQUIDATION OF
OWEN SOUND GOLF AND COUNTRY CLUB, LIMITED
AND KENNETH W. ROWE LIMITED
(collectively referred to hereinafter as "OSGCC")**

PROOF OF SHAREHOLDER CLAIM

Please read carefully the instructions accompanying this Proof of Claim. Please print legibly.

Full Name of Shareholder/Claimant _____ (the "Claimant")

Full Mailing Address of Claimant _____
(All Notices and correspondence _____
regarding your Claim will be _____
forwarded to this address)

Telephone No. _____

Fax No. _____

E-Mail Address _____

Attention: _____

THE UNDERSIGNED HEREBY CERTIFIES AS FOLLOWS:

1. That I am the Shareholder (or that I hold the position of _____ of the Shareholder):

2. That I have personal knowledge of all the circumstance connected with the Claim against OSGCC hereafter referred to.
3. Attached hereto is a schedule for the Claim that the Claimant has against OSGCC. The schedule sets out the amount of the Claim against OSGCC together with the share certificate or supporting documents.
4. As at the Filing Date, the Claimant had a Claim against OSGCC.

DATED at _____, this _____ day of _____, 2012.

(Signature of Witness)

(Claimant Signature)

(Please print name)

(Please print name)

The duly completed Proof of Claim together with the schedule and accompanying documents, must be returned to and received by the Liquidator c/o BDO Canada Limited by registered mail, courier, facsimile, e-mail message or personal delivery by no later than 5:00 p.m. Toronto, Ontario Time on May 31, 2012 at the following address:

BDO Canada Limited
Liquidator of OSGCC
1717 2nd Avenue East, Suite 200
P.O. Box 725
Owen Sound, Ontario N4K 5W9
Attention: William A. Courage CA-CIRP, FCIRP
Telephone: 519-372-0188 x2251
Fax: 519-372-0189
E-mail: bcourage@bdo.ca

SCHEDULE TO PROOF OF CLAIM

In support of my Claim I have attached the following:

_____ Share certificate(s) in my name with a value of \$100.00 each: Total: \$ _____

_____ Share certificate(s) owned by me, pursuant to a transfer as documented, with a value of \$100.00 each: Total: \$ _____

Other (*Please describe nature of claim fully*):

Description:

Amount: \$ _____

TOTAL CLAIM: \$ _____