

United States Bankruptcy Court _____ District of Delaware **PROOF OF CLAIM**

Name of Debtor ALC HOLDINGS LLC	Case Number 11-13853-MFW
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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. sec. 503.

Name of Creditor (The person or other entity to whom the debtor owes money or property): KeySpan Gas East Corp dba National Grid	<input type="checkbox"/> 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 <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.
Name and Address Where Notices Should Be Sent Suzanne Brienza, Esq. 15 Park Drive Melville, NY 11747	
Telephone No. 631-844-3823	

This Space Is For Court Use Only

Account or other number by which creditor identifies debtor: VARIOUS	Check box <input type="checkbox"/> replaces a previously filed claim, dated: _____ if this claim <input type="checkbox"/> amends
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1. BASIS FOR CLAIM

<input type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other:	<p>RECEIVED</p> <p>JAN 19 2012</p> <p>BMC GROUP</p>
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Retiree benefits as defined in 11 U.S.C. sec. 1114(a)
 Wages, salaries, and compensation (Fill out below)
 Last four digits of SS#: **0**
 Unpaid compensation for \$ _____ from _____ to _____

2. Date debt was incurred: 12/08/2011	3. If court judgement, date obtained:
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4. Total Amount of Claim at Time Case Filed:	<u>\$433.41</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$433.41</u>
	(Unsecured)	(Secured)	(Priority)	(Total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 and 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.

<p>5. Secured Claim.</p> <p><input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other</p> <p>Value of Collateral: \$0.00 Amount of arrearage and other charges at the time case filed included in secured claim, if any \$ \$0.00</p> <p>6. Unsecured Nonpriority Claim \$ <u>\$433.41</u></p> <p><input checked="" type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or of c) none or only part of your claim is entitled to priority.</p>	<p>7. Unsecured Priority Claim.</p> <p><input type="checkbox"/> Check this box if you have an unsecured priority claim. Amount entitled to priority. \$ \$0.00 Specify the priority of the claim.</p> <p><input type="checkbox"/> Wages, salaries, or commissions (up to \$4,650),* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier--11 U.S.C. sec. 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan--11 U.S.C. sec. 507(a)(4) <input type="checkbox"/> 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. sec. 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. sec. 507(a)(7) <input type="checkbox"/> Taxes or penalties of governmental units--11 U.S.C. sec. 507(a)(8) <input type="checkbox"/> Other--Specify applicable paragraph of 11 USC sec 507(a)</p> <p><small>*Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small></p>
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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 judgements mortgages, security agreements, and evidence of perfection of lien. **DO NOT SEND ORIGINAL DOCUMENTS.** If the documents are not available, explain. If documents are voluminous, attach a summary.

10. Date Stamped Copy: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date 1-6-12	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): Suzanne Brienza, Collection Operations Supervisor	This Space Is For Court Use Only CLEAR DISTRICT OF DELAWARE BANKRUPTCY COURT JAN 12 AM 9:15 ALC Holdings 00060
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BMC

STATEMENT OF ENERGY CHARGES

For additional information contact:

Your Customer Representative

Telephone Number

A240 DATE=12/30/11 TIME= 2:21 P.M.

ALC GREAT NECK LLC ;:BANKRUPTCY 15-561-60-0150-22
15 BARSTOW RD GREAT NECK NY 11024
MAIL: 15 PARK DR MELVILLE NY 11747

DEPOSIT	AMT DUE	CURRENT	30 DAY	60 DAY	90 DAY	TOT ARREARS
00	141.50	141.50	.00	.00	.00	.00

#BUDGETS BILLED BB/BAL

CASH-DTE TE	CASH-AMT *	BB/AMT BILL-TOTAL	BILL-DTE	ELEC-AMT-RD	GAS-AMT-RD
12-16-11 89	1066.66- *	.00	12-08-11	.00 F	
10-01-11 89	8.92- *	318.15	12-08-11	318.15 E	
10-19-11 11	658.85- *	393.18	11-18-11	393.18 A	
09-22-11 11	607.05- *	505.75	10-25-11	505.75 A	
08-24-11 11	708.05- *	658.85	09-26-11	658.85 A	
08-23-11 96	10.62 *	596.43	08-22-11	596.43 A	
07-27-11 11	786.02- *	696.26	07-25-11	696.26 A	
07-26-11 96	11.79 *	786.02	06-23-11	786.02 A	
06-14-11 11	433.79- *	433.79	05-20-11	433.79 A	
05-17-11 11	556.18- *	556.18	04-25-11	556.18 A	
04-12-11 11	606.11- *	606.11	03-24-11	606.11 A	
03-15-11 11	492.91- *	492.91	02-22-11	492.91 A	
02-22-11 11	916.21- *	916.21	01-27-11	916.21 A	
01-13-11 11	653.31- *	653.31	12-21-10	653.31 A	

CSH2 *

MOR SCNS

Company : BMC GROUP Date : 12/03/2010
Name: ULTIMATE ESCAPE Weight : 1.0
Add : 18750 LAKE DRIV State : MN
City : CHANHASSEN Zip : 55317

Refs: ULTIMATE ESCAPE

Svcs: STANDARD OVERNIGHT
TRACK: 4383 5335 2090

ORIGIN ID: HHRA (302) 252-2900
RENEE KUESEL/DOCKET CONTROL CLERK
USBC DISTRICT OF DELAWARE
824 MARKET STREET

Ship Date: 03DEC10
ActWgt: 1.0 LB MAN
System#: 462272/CAFE235
Account: S *****

WILMINGTON, DE 19801
UNITED STATES US

TO ULTIMATE ESCAPES CLAIMS
BMC GROUP
18750 LAKE DRIVE EAST

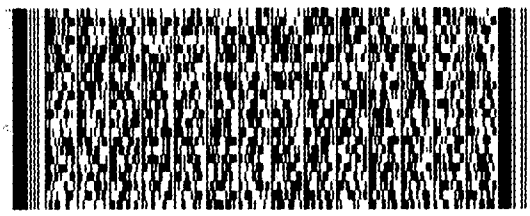
CHANHASSEN , MN 55317

RECEIVED
JAN 19 2012
BMC GROUP

(310) 321-5555
FedEx
Express



Ref: ULTIMATE ESCAPES CLAIMS



Delivery Address
Barcode

BILL SENDER

STANDARD OVERNIGHT

FedEx Returns

TRK# 4383 5335 2090

THU - 19 JAN A1
STANDARD OVERNIGHT

FedEx
TRK# 4383 5335 2090
0221

55317
MN-US
MSP

XH FBLA



Emp# 230090 18JAN12 ILGA 50FC1/61C1/F5F4