

UNITED STATES BANKRUPTCY COURT

District of Delaware

PROOF OF CLAIM

Name of Debtor: ALC Holdings LLC

Case Number: 11-13853

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. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property): Pacific Gas and Electric Company Tax ID 94-0742640

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent: Yvonne Naranjo, Bankruptcy Representative P.O. Box 8329 Stockton, CA 95208 Telephone number: 209-955-7207

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Court Claim Number: (If known)

Filed on:

Name and address where payment should be sent (if different from above):

Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. Check this box if you are the debtor or trustee in this case.

Telephone number:

1. Amount of Claim as of Date Case Filed: \$ 1,726.19

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Specify the priority of the claim.

2. Basis for Claim: Utility Services (See instruction #2 on reverse side.)

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

3. Last four digits of any number by which creditor identifies debtor: 9450

3a. Debtor may have scheduled account as: See Attached Bills (See instruction #3a on reverse side.)

Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).

4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:

Value of Property: \$ Annual Interest Rate %

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

Amount of arrearage and other charges as of time case filed included in secured claim,

if any: \$ Basis for perfection:

Amount of Secured Claim: \$ Amount Unsecured: \$ 1,726.19

Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).

Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. 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. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

Other - Specify applicable paragraph of 11 U.S.C. §507 (a)().

Amount entitled to priority:

\$

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

*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.

Date: 1-26-2012

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

Yvonne Naranjo

Yvonne Naranjo, Bankruptcy Representative

FOR COURT USE ONLY

31 AM 11: ALC Holdings

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C.



BMC



99904224097239000000203700000052864

Account Number	Bill Date	Amount Due	Amount Enclosed
4224097239-0	12/21/2011	\$528.64	

8982.6.124.23994 1 FP 0.414



ALC FRESNO LLC BANKRUPTCY 11-13853
C/O BANKRUPTCY / Y NARANJO
PO BOX 8329
STOCKTON CA 95208

PG&E
BOX 997300
SACRAMENTO CA
95899-7300

200.0299

Please return this portion with your payment. Thank you.

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Telephone Assistance

1-800-468-4743
Assistance is available by telephone: Monday - Friday, 7:00 a.m.-7:30 p.m. and Saturday, 7:00 a.m.-4:30 p.m.

Local Office Address

705 P ST
FRESNO CA 93760

Account Number

4224097239-0

December 2011

ACCOUNT SUMMARY

Service	Service Dates	Amount
Gas	11/15/2011 To 12/08/2011	\$36.67
Electric	11/15/2011 To 12/08/2011	164.60
Energy Commission Tax		0.30
Gas PPP Surcharge		1.77
Fresno Recovery Fee *see note*		0.36
Current Charges Due 01/09/2012		\$203.70
Previous Balance		576.73
No Payment Received by 12/21/2011		
Total Bill Corrections		251.79-
TOTAL AMOUNT DUE		\$528.64

Winter Gas Savings is here. Save gas & earn credit

Your bill includes a Gas Public Purpose Program (PPP) Surcharge, which is used to fund state-mandated gas assistance programs for low-income customers, energy efficiency programs, and public-interest research and development.

*Information on the Fresno Recovery Fee is available at www.fresno.gov/pge.

Your electricity is being billed on a non-residential (commercial or industrial) rate. If this account supplies a single-family residence or a multi-family complex (including common-use areas), please call PG&E 1-800-743-5000 for a free rate analysis.

For all of your account, billing and service needs, please contact our Business Customer Service Center at 1-800-468-4743.



999053196101959000015634000035089

Account Number	Bill Date	Amount Due	Amount Enclosed
5319610195-9	12/21/2011	\$350.89	

8978.4.87.16155 1 FP 0.414



AMERICAN LASER CENTERS BANKRUPTCY 11-13853
 C/O BANKRUPTCY / Y NARANJO
 PO BOX 8329
 STOCKTON CA 95208

PG&E
 BOX 997300
 SACRAMENTO CA
 95899-7300

200.0298

Please return this portion with your payment. Thank you.

Telephone Assistance

1-800-468-4743
 Assistance is available by
 telephone: Monday - Friday,
 7:00 a.m.-7:30 p.m. and
 Saturday, 7:00 a.m.-4:30 p.m.

Local Office Address

406 HIGUERA ST
 SAN LUIS OBISPO CA 93401

Account Number

5319610195-9

December 2011

ACCOUNT SUMMARY

Service	Service Dates	Amount
Electric	11/09/2011 To 12/08/2011	\$156.06
Energy Commission Tax		0.28
Current Charges Due 01/09/2012		\$156.34
Previous Balance		347.19
No Payment Received by 12/21/2011		
Total Bill Corrections		152.64-
TOTAL AMOUNT DUE		\$350.89

Your electricity is being billed on a non-residential (commercial or industrial) rate. If this account supplies a single-family residence or a multi-family complex (including common-use areas), please call PG&E 1-800-743-5000 for a free rate analysis.

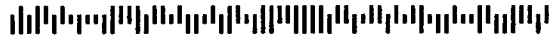
For all of your account, billing and service needs, please contact our Business Customer Service Center at 1-800-468-4743.



99905300407372100000232960000041095

Account Number	Bill Date	Amount Due	Amount Enclosed
5300407372-1	12/21/2011	\$410.95	

8983.4.92.16997 1 FP 0.414



AMERICAN LASER CENTERS LLC BANKRUPTCY 11-13853
C/O BANKRUPTCY / Y NARANJO
PO BOX 8329
STOCKTON CA 95208

PG&E
BOX 997300
SACRAMENTO CA
95899-7300

200.0299

Please return this portion with your payment. Thank you.

Telephone Assistance

1-800-468-4743
Assistance is available by
telephone: Monday - Friday,
7:00 a.m.-7:30 p.m. and
Saturday, 7:00 a.m.-4:30 p.m.

Local Office Address

1030 DETROIT AVE
CONCORD CA 94518

Account Number

5300407372-1

December 2011

ACCOUNT SUMMARY

<u>Service</u>	<u>Service Dates</u>	<u>Amount</u>
Gas	11/18/2011 To 12/08/2011	\$220.62
Gas PPP Surcharge		12.34
Current Charges Due 01/09/2012		\$232.96
Previous Balance		504.37
No Payment Received by 12/21/2011		
Total Bill Corrections		326.38-
TOTAL AMOUNT DUE		\$410.95

Winter Gas Savings is here. Save gas & earn credit

Your bill includes a Gas Public Purpose Program (PPP) Surcharge, which is used to fund state-mandated gas assistance programs for low-income customers, energy efficiency programs, and public-interest research and development.

For all of your account, billing and service needs, please contact our Business Customer Service Center at 1-800-468-4743.

For the last 12 months, you had an excellent payment record and received no delinquent notices. If you need to establish credit at another utility, you may use this message as a credit reference. On service since 01/22/2009.



99908504942456800000036410000032065

Account Number	Bill Date	Amount Due	Amount Enclosed
8504942456-8	12/22/2011	\$320.65	

8982.20.433.84668 1 AV 0.340

AMERICA LAZER CENTERS BANKRUPTCY 11-13853
 C/O BANKRUPTCY / Y NARANJO
 PO BOX 8329
 STOCKTON CA 95208-0329

PG&E
 BOX 997300
 SACRAMENTO CA
 95899-7300

200.0299

Please return this portion with your payment. Thank you.

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Telephone Assistance:

1-800-468-4743
 Assistance is available by
 telephone: Monday - Friday,
 7:00 a.m.-7:30 p.m. and
 Saturday, 7:00 a.m.-4:30 p.m.

Local Office Address:

111 ALMADEN BLVD
 SAN JOSE CA 95113

Account Number:

8504942456-8

December 2011

ACCOUNT SUMMARY

Service	Service Dates	Amount
Electric	12/06/2011 To 12/08/2011	\$34.51
Energy Commission Tax		0.07
Utility Users' Tax		1.73
San Jose Franchise Surcharge *see note*		0.10
Current Charges Due 01/09/2012		\$36.41
Previous Balance		696.43
12/06 Payment - Thank You		412.19
TOTAL AMOUNT DUE		\$320.65

*Information on the San Jose Franchise Surcharge is available by contacting the City of San Jose-Customer Service at (408) 535-3500.

For all of your account, billing and service needs, please contact our Business Customer Service Center at 1-800-468-4743.





99908829884178900000020030000011506

Account Number	Bill Date	Amount Due	Amount Enclosed
8829884178-9	12/22/2011	\$115.06	

8988.19.428.95961 1 AT 0.365

ALC ROSEVILLE LLC BANKRUPTCY 11-13853
 C/O BANKRUPTCY / Y NARANJO
 PO BOX 8329
 STOCKTON CA 95208-0329

PG&E
 BOX 997300
 SACRAMENTO CA
 95899-7300

200.0300

Please return this portion with your payment. Thank you.



Telephone Assistance

1-800-468-4743
 Assistance is available by
 telephone: Monday - Friday,
 7:00 a.m.-7:30 p.m. and
 Saturday, 7:00 a.m.-4:30 p.m.

Local Office Address

151 N SUNRISE AVE
 ROSEVILLE CA 95661

Account Number

8829884178-9

December 2011

ACCOUNT SUMMARY

Service	Service Dates	Amount
Gas	12/03/2011 To 12/08/2011	\$19.01
Gas PPP Surcharge		1.02
Current Charges Due 01/09/2012		\$20.03
Previous Balance		95.03
No Payment Received by 12/22/2011		
TOTAL AMOUNT DUE		\$115.06

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For all of your account, billing and service needs, please contact our Business Customer Service Center at 1-800-468-4743.

For the last 12 months, you had an excellent payment record and received no delinquent notices. If you need to establish credit at another utility, you may use this message as a credit reference. On service since 05/04/2004.



FedEx® US Airbill

Express

FedEx
Tracking
Number

8726 8134 8872

Form
10 No.

FedEx Retrieval Copy

1 From Date 2/1/12 Sender's FedEx Account Number 97A178780

Sender's Name BMC Phone _____

Company BMC

Address 18150 Lake Dr East

City Yonkers State NY ZIP 10551

2 Your Internal Billing Reference _____

3 To Recipient's Name BMC Phone _____

Company 18150 Lake Dr East

Address _____

City _____ State NY ZIP _____



8726 8134 8872

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BMC GROUP

4a Express Package Service **01** **05** **06** **06** **01**

03 **20** **20** **01**

4b Express Freight Service **01** **02** **03** **04** **01**

70 **01** **02** **03** **04** **01**

80 **01** **02** **03** **04** **01**

5 **01** **02** **03** **04** **01**

6 Special Handling and Delivery Signature Options **01** **02** **03** **04** **01**

03 **01** **02** **03** **04** **01**

10 **01** **02** **03** **04** **01**

06 **01** **02** **03** **04** **01**

7 Payment Bill to: **01** **02** **03** **04** **01**

1 **01** **02** **03** **04** **01**

Total Packages _____ Total Weight _____

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