

REC'D JUL 21 2003

FORM B10 (Official Form 10) (4/01)

UNITED STATES BANKRUPTCY COURT <u>Southern</u> DISTRICT OF <u>New York</u>		PROOF OF CLAIM
Name of Debtor <u>Allegiance Telecom, Inc et al</u>	Case Number <u>03-13057 (RRD)</u>	U.S.B.C. SOUTHERN DISTRICT OF NEW YORK ALLEGIANCE TELECOM, INC <u>03-13057 (RRD)</u> 204 THIS SPACE IS FOR COURT USE ONLY
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 USC § 503.		
Name of Creditor (The person or other entity to whom the debtor owes money or property) <u>L. Cannon Communications LLC</u>	<input type="checkbox"/> Check box if anyone else has filed a claim relating to your claim. Attach copy of statement giving particulars.	U.S.B.C. SOUTHERN DISTRICT OF NEW YORK ALLEGIANCE TELECOM, INC <u>03-13057 (RRD)</u> 204 THIS SPACE IS FOR COURT USE ONLY
Name and address where notices should be sent <u>L. Cannon Communications LLC 1515 Main Street + Pittsburgh, PA. 15215 Telephone number <u>412-782-2300</u></u>	<input checked="" 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.	
Account or other number by which creditor identifies debtor	Check here if this claim <input type="checkbox"/> replaces a previously filed claim dated <u>6/30/03</u> <input checked="" type="checkbox"/> amends it.	
1 Basis for Claim <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____ <input type="checkbox"/> Retiree benefits as defined in 11 USC § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your SS # _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
2 Date debt was incurred: <u>5/8/03</u>		3 If court judgment, date obtained:
4 Total Amount of Claim at Time Case Filed: \$ <u>395.00</u> If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> 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.		
5 Secured Claim. <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 _____ Value of Collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____		6 Unsecured Priority Claim. <input checked="" type="checkbox"/> Check this box if you have an unsecured priority claim. Amount entitled to priority \$ <u>395.00</u> Specify the priority of the claim: <input type="checkbox"/> Wages, salary 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 USC § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan. 11 USC § 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 USC § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child. 11 USC § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 USC § 507(a)(8) <input type="checkbox"/> Other. Specify applicable paragraph of 11 USC § 507(a)() _____ *Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary. 9 Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		THIS SPACE IS FOR COURT USE ONLY
Date <u>7/7/03</u>	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) <u>Leo J. Cannon CEO Cannon-Owner</u>	RECEIVED JUL - 9 2003 CLAIMS PROCESSING CENTER USBC SDNY
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years or both.		





1515 Main Street
Pittsburgh, PA 15215
412-782-2300
Fax: 412-782-2588

Invoice

DATE	INVOICE
5/8/2003	03-0181

TO
Allegiance Telecom, Inc 9201 North Central Expressway Building B, 5th Floor Dallas, Texas 75231 Attn Julie Nance

P.O. NO.	TERMS	VIA
#2096602		

ITEM	QUANTITY	DESCRIPTION	AMOUNT
Labor		Weinsteim Imaging Association Extend T-1 Circuit, terminated, grounded and labeled	132 50T
Material		Material supplied by L Cannon Communications, LLC 100' of T-1 plenum rated cable 2 RJ48X jacks 10' ground wire - N/C	54 00T
			Sales Tax (0 00) \$0 00
			Total \$186 50

Thank You

copy

FAX Cover Page

TO: Stan
FAX Number: (412) 782-2588

From: Anthony Hidalgo
FAX Number: 201-604-9149
Phone Number: 201-605-5158

Description : The following page contains info for a demarc extension in Pittsburgh. The equipment is installed . The demarc is on the right side of building, outside entry (go down the railroad tie steps). You will need to get the key from the Cancer Center, first floor. Needs to be extended to customer equipment cabinet on 2nd floor. Once demarc has been extended, have tech call 1-866-656-7822 for equipment turn up. If you have any questions give me a call.
Thanks

Detail for Order#. 2096602

[Back to Ops Dispatch Summary](#)

Customer WEINSTEIN IMAGING ASSOCIA

Customer Address

Room. **Floor**

Street 1145 BOWER HILL RD

City PITTSBURGH

State PA **Zip Code** 15243

Contacts

LCON NANCY PRITCHARD **LCON#** 412 535 7232

LCON2 SANDY FORMOSA **LCON2#** 412 429 0429

Circuit Info

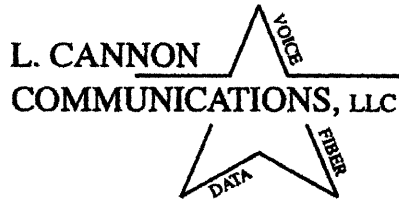
ALGX Circuit ID PT/HCGS/209660/2 /AFYT/

Bell Circuit ID 15/HCFU/543695//PA/

Bell Order #. C0FQ99151

Demarc Info
T1 has been accepted from
LEC VERIZON
LEC CONTACT ADRAINNE
LEC CONTACT 410 856 2073

T1 has been accepted by
NAME ? Alden J Gibbs
TITLE ? NTTC- TECH



**L. CANNON
COMMUNICATIONS, LLC**

1515 Main Street
Pittsburgh, PA 15215
412-782-2300
Fax: 412-782-2588

Invoice

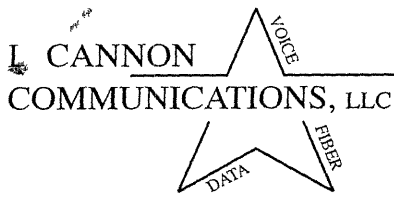
DATE	INVOICE
5/8/2003	03-0186

TO
Allegiance Telecom, Inc 9201 North Central Expressway Building B, 5th Floor Dallas, Texas 75231 Attn Julie Nance

P.O. NO.	TERMS	VIA
#2114883		

ITEM	QUANTITY	DESCRIPTION	AMOUNT
Labor		Gilson Engineering Sales Install cable to extend T-1 circuit, terminated and test	132 50T
Material		Material supplied by L Cannon Communications, LLC 150' T-1 plenum cable 2 RJ48X jacks 10' ground wire - N/C	76 00T
			Sales Tax (0 00) \$0 00
			Total \$208 50

Thank You



CANNON COMMUNICATIONS, LLC

1515 Main Street
Pittsburgh PA 15215
412-782-2300
Fax 412-782-2588

SERVICE WORK ORDER

ORDER FORM
 WORK FORM

PAGE 0 OF 0

JOB NO	-	-	-	-	-	0	0	-	-	-	-
SYSTEM TYPE							WORK ORDER NO				

CUSTOMER: ALLEGHENIE

SERVICE REQUESTED BY: ANTHONY HIDALGO DATE: 5-2-03

CUSTOMER TELEPHONE: _____ CUSTOMER PURCHASE ORDER: _____

BILL TO: 2114383

DEPARTMENT: _____ BUILDING: _____ FLOOR/ROOM: _____

REQUESTED SERVICE DATE/TIME: _____ TELEPHONE COMPANY DATE/TIME: _____ SCHEDULE DATE/TIME: _____

WORK ADDRESS: GILSON ENGINEERING SALES
525 ROCHESTER RD.
PITTSBURGH PA 15237

- WARRANTY
 MAINTENANCE
 ADD/MOVE/CHANGE
 CONTRACT
 TIME AND MATERIAL
 QUOTE

REQUESTED SERVICE: T-1 EXTENSION

QUANTITY	PARTS NUMBER AND DESCRIPTION	EACH	TOTAL	PARTS AND LABOR		
150'	T-1 PLENUM RATED CABLE			TRAVEL		
2	48k JACKS			SITE		
10'	GROUND WIRE			ENGINEERING		
				OTHER		
				PARTS		
				TOTAL		
				LABOR PREMIUM	YES	NO

WORK PERFORMED: PULLED CABLE TO EXTEND THE T-1 CIRCUIT
TERMINATED
TESTED WITH MIKE AT 1866 652 7822

COMPLETE		SERVICE DATE	TIME IN	TIME OUT	TOTAL SITE HOURS
YES	NO	<u>MAY 2, 2003</u>	<u>9AM</u>	<u>11:30 pm</u>	<u>2 1/2</u>
TECHNICIAN(S): <u>STAN VUCKOVIC</u>			CUSTOMER SIGNATURE: <u>Tony Lichtel</u>		

FAX Cover Page

T0: Stan
FAX Number: (412) 782-2588

From: Anthony Hidalgo
FAX Number: 201-604-9149
Phone Number: 201-605-5158

Description : The following page contains info for a demark extension in Pittsburgh. The equipment is installed. Once demark has been extended, have tech Call 1-866-656-7822 for equipment turn up. If you have any questions give me a call. Thanks

Detail for Order# 2114883

Back to Ops Dispatch Summary

Customer GILSON ENGINEERING SALES,

Customer Address

Room **Floor.**

Street 525 ROCHESTER RD

City PITTSBURGH **State.** PA **Zip Code.** 15237

Contacts

LCON NANCY PRITCHARD **LCON#** 412-535-7232

GREG 7246

LCON2 TERRY LEICHTENBERGER **LCON2#** 412-369-0100

Circuit Info

ALGX Circuit ID PT/HCGS/211488/3 /AFYT/

Bell Circuit ID 15/HCFU/543899//PA/

Bell Order # C0FQ99560

Demarc Info EC1T1 64-22
PITBPAMAK04
address/cli/cfa match
ILEC order C0FQ99560
ILEC CID 15/HCFU/543899//PA
T1 has been accepted from Adrienne/Vzn @ 410-856-2073
T1 has been accepted by David Dietrich NTTC Support Tech 201 604-9416
Demarc location is basement telco room pos 2 of 2 RJ48C tagged both CIDs Confirmation SKN9CE6