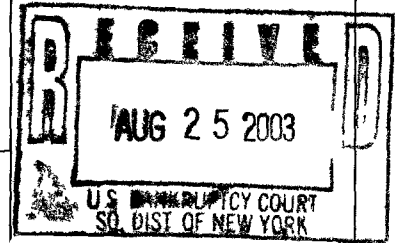


<b>UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK</b>		<b>PROOF OF CLAIM</b>
Name of Debtor <b>Allegiance Telecom Inc</b>		Case Number <b>03-13057</b>
NOTE this form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request of payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		<b>FILED</b> <b>SOUTHERN DISTRICT OF NEW YORK</b> <b>ALLEGIANCE TELECOM, INC</b> <b>03-13057 (RRD)</b> <b>354</b>
Name of Creditor (The person or other entity to whom the debtor owes money or property) <b>IKON Office Solutions</b>	<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 checked="" type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	<small>THIS SPACE IS FOR COURT USE ONLY</small>
Name and addresses where notices should be sent <b>IKON Office Solutions Northwest District c/o IOS Capital Bankruptcy Administration P O Box 13708 Macon GA 31208 3708</b>	Telephone Number <b>800-480 6513</b>	
Account or other number by which creditor identifies debtor <b>See Attached</b>	Check here if this claim <input type="checkbox"/> replaces a previously filed claim dated _____ <input type="checkbox"/> amends	
<b>1 Basis For Claim</b> <input checked="" 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 _____ <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages salaries and compensation (fill out below) Your SS# _____ Unpaid compensation for services performed From ___/___/___ to ___/___/___ (date) (date)		
<b>2 Date debt was incurred</b> See Attached	<b>3 If court judgment, date obtained</b>	
<b>4 Total Amount of Claim at Time Case Filed</b> \$ <u>771 05</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.		
<b>5 Secured Claim</b> <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		<b>6 Unsecured Priority Claim</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim <input type="checkbox"/> Wages salaries or commissions (up to \$4 300) * earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business whichever is earlier 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan 11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$1 950* of deposits toward purchase lease or rental of property or services for personal family or household use 11 U.S.C. § 507(a)(6) <input type="checkbox"/> Alimony maintenance or support owed to a spouse former spouse or child 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other Specify applicable paragraph of 11 U.S.C. § 507(a)(____) <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>
<b>7 Credits</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. <b>8 Supporting Documents</b> 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 <b>9 Date-Stamped Copy</b> To receive an acknowledgment of the filing of your claim enclose a stamped self addressed envelope and copy of this proof of claim		<small>THIS SPACE IS FOR COURT USE ONLY</small>
Date <b>8/18/03</b>	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) <b>Nicole Robbins</b> Nicole Robbins Bankruptcy Specialist	
<small>Penalty for presenting fraudulent claim Fine of up to \$500 000 or imprisonment for up to 5 years or both</small>		





The Way Business Gets Communicated™

Northwest District  
1550 Parkside Drive  
Walnut Creek, CA 94596  
800-388-3555

**Customer Number** A29624

ALLEGIANCE TELECOM INC  
2101 WEBSTER ST #1580  
OAKLAND CA 94612

**Invoice** 1684229A  
Invoice Date 03/26/2003  
Terms Net Due Upon Receipt  
Order Date 03/26/2003  
Ship Date 03/26/2003  
PO  
Rep Id FY7A04  
Federal Id 52-2119071  
Ship To ALLEGIANCE TELECOM INC  
DI 2101 WEBSTER ST #1580  
OAKLAND CA 94612

Ordered	Shipped	Item	Description	Unit Price	Total
CG317 UYP50751					
4	4	MGC0P	CANON FX-6 CTG 3170 OEM # 1559A002AA	122 0000	488 00

IKON CHARLES RELIFORD 800-388-3555 X4827  
THANK YOU FOR YOUR ORDER  
FEEL FREE TO CALL FOR ALL YOUR OFFICE SUPPLY NEEDS

<b>Sub Total</b>	.	488 00
<b>Prior Late Charge</b>	.	0 00
<b>Freight</b>		0.00
<b>Taxes</b>	.	40 26
<b>Total Amount Due</b>		528 26

1 24/2 01E/4/8j7695/SX//0 00 /40 26  
ALLEGIANCE TELECOM INC  
2101 WEBSTER ST #1580  
OAKLAND CA 94612

Inv # 1684229A  
Cust # A29624  
IR # 80J17695

IKON OFFICE SOLUTIONS  
NORTHWEST DISTRICT  
P O BOX 7414  
PASADENA CA 91109-7414

528.26

16 00001684229A6 0000A296244 00000528265 80J176951 000000000



Northwest District  
1550 Parkside Drive  
Walnut Creek CA 94596  
800-388-3555

**Customer Number** E26138

ACCOUNTS PAYABLE  
ALLEGIANCE TELECOM INC  
FLR 5B  
9201 N CENTRAL EXPWY  
DALLAS TX 75231

**Invoice** 16085014  
**Invoice Date** 05/08/2003  
**Terms** Net Due Upon Receipt  
**PO** ZZ1/OTB  
**Rep Id** 208P58  
  
**Federal Id** 52-2119071 **DI**

Model	Serial	Id	Cust#	Description	Meter	Date/Prod	Quan	Amount
C30F	NHX01319		20L435	CURRENT READING	110445	05/07/2003		
				CHARGEABLE LABOR		VB7410	5	187 50
				^UNIVERSAL WEB NP 3K/4/		3ACCN3	1	35 65
				FY1 1046 000/				
							Location Total	223 15

ALLEGIANCE TELECOM INC  
15500 SE 30TH PL #202  
BELLEVUE WA 98007  
8 5P

**Sub Total** 223.15  
**Prior Late Charge** · 0.00  
**Freight** 0 00  
**Taxes** · 19 64  
**Total Amount Due** · 242.79

1 24/2 01E/7/8x3198/LX/085014 /ZZ1/0 00 /19 64  
ACCOUNTS PAYABLE **Inv # 16085014**  
ALLEGIANCE TELECOM INC **Cust # E26138**  
FLR 5B **IR # 80X13198**  
9201 N CENTRAL EXPWY  
DALLAS TX 75231

**IKON OFFICE SOLUTIONS  
NORTHWEST DISTRICT  
P O BOX 7414  
PASADENA CA 91109-7414**

**242.79**