

UNITED STATES BANKRUPTCY COURT <u>SOUTHERN</u> DISTRICT OF <u>NEW YORK</u>		PROOF OF CLAIM
Name of Debtor ALLEGIANCE TELECOM	Case Number 03-13057	U.S.B.C. SOUTHERN DISTRICT OF NEW YORK ALLEGIANCE TELECOM, INC 03-13057 (RRD) ----- 458 REC'D SEP 26 2003 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) EQUIFAX INFORMATION SVCS	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach a 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 EQUIFAX INFORMATION SVCS P O BOX 4472 ATLANTA GA. 30302	Telephone number	
Account or other number by which creditor identifies debtor	Check here if this claim <input type="checkbox"/> replaces a previously filed claim, dated _____ <input type="checkbox"/> amends	
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 _____		
<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 _____ (date) to _____ (date)		
2 Date debt was incurred <u>5/6/03</u>	3 If court judgment, date obtained	
4 Total Amount of Claim at Time Case Filed \$ <u>12,734.93</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 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 \$4,650) * 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 _____	
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.		
Date 9/10/03	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). Althea Henderson, ACCTS RECEIVABLE, MGR.	RECEIVED SEP 26 2003 9/15/03

Equifax, Inc
Allegiance Telecom, Inc Bankruptcy Proof of Claim
List of Invoices

	<u>Account Number</u>	<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Unpaid Balance</u>	
Equifax Credit Information Services, LLC	910UT18445	6719421	5/6/2003	\$2,598 85	
		6834142	6/5/2003	\$1,520 08	
	Subtotal			<u>\$4,118 93</u>	
	910UT21789	6719449	5/6/2003	\$4,322 00	
		6834170	6/5/2003	\$4,294 00	
	Subtotal			<u>\$8,616 00</u>	
Total					
Equifax Credit Information Services, LLC					<u>\$12,734 93</u>
Total Equifax, Inc					<u>\$12,734 93</u>

**Equifax Proof of Claim for Allegiance Telecom, Inc , Bankruptcy
List of Invoices**

<u>Equifax Information Services, LLC</u>	<u>Account Number</u>	<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Unpaid Balance</u>
	910UT18445	6719421	5/6/2003	\$2,598 85
		6834142	6/5/2003	\$1,520 08
		Subtotal		<u>\$4,118 93</u>
		Total Equifax Information Services, LLC		<u>\$4,118 93</u>
Total Equifax				<u><u>4,118 93</u></u>

EQUIFAX INFORMATION SVCS LLC
P O BOX 4472
ATLANTA, GA 30302

04 / 910UT18445	6719421	INVOICE SUMMARY	(800) 944-6000
		05/06/03	2,598 85
		ALLEGIANCE TELECOM INC	
		1950 N STEMMONS FRWY	
		SUITE 3026	
		DALLAS TX 75207	

ALLEGIANCE TELECOM INC
EQUIFAX INFORMATION SVCS LLC
P O BOX 105835
ATLANTA GA 30348-5835

04	910UT18445	6719421	00000259885
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ALLEGIANCE TELECOM INC
 1950 N STEMMONS FRWY
 SUITE 3026
 DALLAS, TX 75207

INVOICE - PRODUCT / TAX SUMMARY

120104910910UT18445

(800) 944-6000

04 / 910UT18445 6719421 05/06/03

S E R V I C E S U M M A R Y

PRODUCT SUMMARY	PRODUCT CODE	ACCESS METHOD	INDV/ JOINT	HIT IND	QUANTITY	AMOUNT	
CSAS < 86 001	CS1				1	1575 75	
SUBTOTAL					1		1575 75
RECURRING CHARGES							
TELECOMM MTHLY	TEM				1	893 10	
SUBTOTAL					1		893 10
TOTAL BEFORE TAX							2468 85

T A X S U M M A R Y

JURISDICTION	TAX RATE	NON-TAXABLE AMOUNT	TAXABLE AMOUNT		
TEXAS	6 2500	893 10	1 575 75	98 48	001440000000
DALLAS	2 0000	893 10	1 575 75	31 52	001440850760

TOTAL TAX CHARGES 130 00

TOTAL CURRENT CHARGES 2 598 85

TOTAL # OF VERMONT CONSUMER CREDIT REPORTS ACCESSED 0

INVOICE - DETAIL PAGE

120104910910UT18445

(800) 944-6000

ALLEGIANCE TELECOM INC
1950 N STEMMONS FRWY
SUITE 3026
DALLAS, TX 75207

04/ 910UT18445 6719421 05/06/03 1

04/30 16 34 CS1 2101@ 75 CSA INQ MBR TOTAL=2101
05/06 TEM TELECOMM MTHLY

605 05/01 1575 75
910 893 10

TOTAL

2468 85 00

EQUIFAX INFORMATION SVCS LLC
P O BOX 4472
ATLANTA GA 30302

04 / 910UT18445	6834142	INVOICE SUMMARY	(800) 944-6000
		06/05/03	2,467.33
		ALLEGIANCE TELECOM INC	1520.88
		1950 N STEMMONS FRWY	
		SUITE 3026	
		DALLAS TX 75207	

ALLEGIANCE TELECOM INC
EQUIFAX INFORMATION SVCS LLC
P O BOX 105835
ATLANTA GA 30348-5835

04 910UT18445 6834142 00000246733

ALLEGIANCE TELECOM INC
 1950 N STEMMONS FRWY
 SUITE 3026
 DALLAS TX 75207

INVOICE - PRODUCT / TAX SUMMARY

120104910910UT18445

(800) 944-6000

04 / 910UT18445

6834142

06/05/03

S E R V I C E S U M M A R Y

PRODUCT SUMMARY	PRODUCT CODE	ACCESS METHOD	INDV/ JOINT	HIT IND	QUANTITY	AMOUNT
CSAS < 86,001	CS1				1	1454 25
SUBTOTAL						1454 25
RECURRING CHARGES						
TELECOMM MTHLY	TEM				1	893 10
SUBTOTAL						893 10
TOTAL BEFORE TAX						2347 35

T A X S U M M A R Y

JURISDICTION	TAX RATE	NON-TAXABLE AMOUNT	TAXABLE AMOUNT		
TEXAS	6 2500	893 10	1 454 25	90 89	001440000000
DALLAS	2 0000	893 10	1 454 25	29 09	001440850760

TOTAL TAX CHARGES 119 98

TOTAL CURRENT CHARGES 2 467 33

TOTAL # OF VERMONT CONSUMER CREDIT REPORTS ACCESSED 0

**Equifax Proof of Claim for Allegiance Telecom, Inc , Bankruptcy
List of Invoices**

	Account Number	Invoice Number	Invoice Date	Unpaid Balance
<u>Equifax Information Services, LLC</u>	910UT21789	6719449	5/6/2003	\$4,322 00
		6834170	6/5/2003	\$4,294 00
		Subtotal		<u>\$8,616 00</u>
		Total Equifax Information Services, LLC		<u>\$8,616 00</u>
Total Equifax				<u><u>8,616 00</u></u>

EQUIFAX INFORMATION SVCS LLC
P O BOX 4472
ATLANTA GA 30302

04 / 910UT21789	6834170	INVOICE SUMMARY	06/05/03	4,294 00	(800) 944-6000
		ALLEGIANCE TELECOM			
		ACCOUNTS PAYABLE FL 5B			
		9201 N CENTRAL EXPRESSWAY			
		DALLAS TX 75231			

			ALLEGIANCE TELECOM		
		EQUIFAX INFORMATION SVCS LLC			
		P O BOX 105835			
		ATLANTA GA 30348-5835			
04	910UT21789	6834170	00000429400		

INVOICE - PRODUCT / TAX SUMMARY

120104910910UT21789

ALLEGIANCE TELECOM
ACCOUNTS PAYABLE FL 5B
9201 N CENTRAL EXPRESSWAY
DALLAS, TX 75231

(800) 944-6000

04 / 910UT21789

6834170

06/05/03

S E R V I C E S U M M A R Y

PRODUCT SUMMARY	PRODUCT CODE	ACCESS METHOD	* INDV/ JOINT	* HIT IND	QUANTITY	AMOUNT
APPL PROCESSING	M14				1	4294 00
SUBTOTAL					1	4294 00
TOTAL BEFORE TAX						4294 00
TOTAL CURRENT CHARGES						4 294 00
TOTAL # OF VERMONT CONSUMER CREDIT REPORTS ACCESSED						0

INVOICE - DETAIL PAGE

120104910910UT21789

(800) 944-6000

ALLEGIANCE TELECOM
ACCOUNTS PAYABLE FL 5B
9201 N CENTRAL EXPRESSWAY
DALLAS, TX 75231

04/ 910UT21789 6834170 06/05/03 1

05/08 09 47 M14 APPLY PROCESSING FEES

910 05/28 4294 00

TOTAL

4294 00 00

EQUIFAX INFORMATION SVCS LLC
P O BOX 4472
ATLANTA, GA 30302

04 / 910UT21789	6719449	INVOICE SUMMARY		(800) 944-6000
		05/06/03	4 322 00	
		ALLEGIANCE TELECOM		
		ACCOUNTS PAYABLE FL 5B		
		9201 N CENTRAL EXPRESSWAY		
		DALLAS TX 75231		

ALLEGIANCE TELECOM
EQUIFAX INFORMATION SVCS LLC
P O BOX 105835
ATLANTA GA 30348-5835

04	910UT21789	6719449	00000432200
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INVOICE - DETAIL PAGE

120104910910UT21789

(800) 944-6000

ALLEGIANCE TELECOM
ACCOUNTS PAYABLE FL 5B
9201 N CENTRAL EXPRESSWAY
DALLAS TX 75231

04/ 910UT21789 6719449 05/06/03 1

04/11 10 38 M14 APPLY PROCESSING FEES

910 04/28 4322 00

TOTAL

4322 00 00