

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

PROOF OF CLAIM

s1704

In re Shared Technologies Allegiance, Inc

Case Number 03-13108

YOUR CLAIM IS SCHEDULED AS

NOTE This form should not be used to make a claim for an administrative expense arising after the commencement of the case...

Check box if you are aware that anyone else has filed a proof of claim relating to your claim...

FILED U.S.B.C. SOUTHERN DISTRICT OF NEW YORK ALLEGIANCE TELECOM, INC 03-13057 (RRD)

Name of Creditor and Address ACCESS SECURITY TECHNO 2274 ATLANTA RD SMYRNA GA 30080

Check box if you have never received any notices from the bankruptcy court in this case

The amounts reflected above constitute your claim as scheduled by the Debtor...

If the amounts shown above are listed as Contingent, Unliquidated or Disputed a proof of claim must be filed

Creditor Telephone Number () CREDITOR TAX ID # 58-2377943

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR SHATEC

Check here if this claim replaces or amends a previously filed claim dated

1 BASIS FOR CLAIM Goods sold, Services performed, Money loaned, Personal injury/wrongful death, Taxes, Other, Retiree benefits, Wages salaries and compensation

2 DATE DEBT WAS INCURRED 06-09-03 3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE \$ 117.00 (unsecured) \$ (secured) \$ (unsecured priority) \$ (total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below

5 SECURED CLAIM Check this box if your claim is secured by collateral (including a right of setoff) Brief description of collateral

6 UNSECURED PRIORITY CLAIM Check this box if you have an unsecured priority claim Specify the priority of the claim

REC'D OCT 17 2003

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

9 DATE-STAMPED COPY To receive an acknowledgment of your claim, please enclose a self-addressed stamped envelope and an additional copy of this proof of claim

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is received on or before 4 00 p m , October 1, 2003, Eastern Daylight Time

THIS SPACE FOR COURT USE ONLY

BY MAIL TO United States Bankruptcy Court re Allegiance Telecom Inc et al P O Box 95 Bowling Green Station New York NY 10274

BY HAND OR OVERNIGHT DELIVERY TO Clerk of the United States Bankruptcy Court re Allegiance Telecom Inc et al One Bowling Green, 6th Floor New York NY 10004-11408

RECEIVED OCT 14 2003 Allegiance Claim 00722

DATE SIGNED 10-8-03

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) Rhonda S Check

Penalty for presenting fraudulent claim is a fine of up to \$500 000 or imprisonment for up to 5 years or both 18 U S C §§ 152 AND 3571

See Other Side For Instructions

Access Security Technology, Inc
 2274 Atlanta Road
 Smyrna, GA 30080

Invoice
 Invoice Number
 0603-13

Invoice Date
 Jun 9, 2003

Voice (770) 792-3761
 Fax (770) 792-6016

Page
 1

Duplicate

Sold To
 Shared Technologies COD***COD
 1950 Stemmons Freeway
 Box 463
 Dallas, TX 75207

Ship To

Customer ID	Customer PO	Payment Terms	
SHATECALL	1395 S Marietta PKWY	Net 30 Days	
Sales Rep	Shipping Method	Ship Date	Due Date
224	Courier		7/9/03

Quantity	Item	Description	Unit Price	Extension
1 00	Labor	Trouble shoot and repair system, found account number was wrong in system, reprogrammed and tested, everything ok	117 00	117 00

	Subtotal	117 00
	Sales Tax	
	Freight	
	Total Invoice Amount	117 00
Check No	Payment Received	
	TOTAL	\$117 00



ACCESS SECURITY TECHNOLOGY, INC.

2274 Atlanta Road
 Smyrna, Georgia 30080
 Phone (770) 792-3761
 Toll Free (888) 849-7617
 Fax (770) 792-6016

WORK ORDER / INVOICE

Invoice No 0603-13

Date In _____

Date Started _____ Date Completed _____

Work Ordered By _____ Order Taken By _____

Technician _____ Helper _____

Arrival Time _____ Departure Time _____

Total Time On Job _____

CUSTOMER INFORMATION

Account No _____		Purchase Order No _____	
Bill To <u>SHARED TECHNOLOGIES</u>		Phone _____	
Address <u>1395 S MARIETTA PKWY</u>			
City, State, Zip <u>MARIETTA, GA 30067</u>			
Job Name _____		Job Location _____	Phone _____
Scope of Work <u>NO SIGNAL TO MONITORING STATION</u>			

Qty	Part No	Description	Unit Price	Total
1		FOUND WRONG ACCOUNT NUMBERS IN SYSTEM / REPROGRAMMED & TESTED HOUR LABOR		117.00
		COMPLETE		

Recommendations, Technician's Comments	Total Labor <u>117.00</u>
	Total Material
	Sales Tax
	TOTAL 117.00

The above materials are property of Access Security Technology, Inc. until paid in full. I have authorized representatives of Access Security Technology, Inc. access to the premises to perform the work. I hereby acknowledge the satisfactory completion of the above described work subject to price correction for clerical error.

Customer Signature X [Signature]