

**UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

PROOF OF CLAIM



CRDID 62896

In re

Case Number

FILED
SOUTHERN DISTRICT OF NEW YORK

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.

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.

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

Check box if this address differs from the address on the envelope sent to you by the court.

ALLEGIANCE TELECOM, INC
(3-13057 (RRD))

698

REC'D OCT 17 2003

Name of Creditor and Address

POUR LA FRANCE PO
1170 S KALAMATH
DENVER CO 80223



03805890062896

Creditor Telephone Number ()

If you have already filed a proof of claim with the Bankruptcy Court or BMC you do not need to file again.

CREDITOR TAX I.D. #
84-1141019

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR
13231

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

1 BASIS FOR CLAIM

Goods sold Personal injury/wrongful death Retiree benefits as defined in 11 U.S.C. § 1114(a)

Services performed Taxes Wages, salaries, and compensation (Fill out below)

Money loaned Other (describe briefly)

Your social security number _____
Unpaid compensation for services performed from _____ to _____
(date) (date)

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

\$ 111.96 (unsecured) \$ _____ (secured) \$ 111.96 (unsecured priority) \$ _____ (total)

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

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

Check this box if your claim is secured by collateral (including a right of setoff).

Brief description of collateral

Real Estate
 Motor Vehicle
 Other _____

Value of collateral \$ _____

Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____

6 UNSECURED PRIORITY CLAIM

Check this box if you have an unsecured priority claim.

Specify the priority of the claim

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 U.S.C. § 507(a)(3)

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(4)

Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(6)

Alimony, maintenance, or support owed to a spouse, former spouse, or child. 11 U.S.C. § 507(a)(7)

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

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

Amounts are subject to adjustment on 4/1/01 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 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.

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

THIS SPACE FOR COURT USE ONLY

RECEIVED

OCT 17 2003

DATE SIGNED
10/17/03

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).

Connie Mathoney
Connie Mathoney



00731

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

INVOICE NO
13231-39137

Date
3/29/02

Pour la France!
Catering Inc.

1170 South Kalamath
Denver, CO 80223
(303) 777-4773
Fax 777-4546

Client Information

Client Adelphia
Contact Tesser White
BillingAddress 4600 S Syracuse #400
Denver, CO 80237

Telephone 720-493-8359

Delivery Information

Company Adelphia
Contact Tesser White
Address 4600 S Syracuse #400
Denver, CO 80237

Event Information

Theme Box Lunches
Number of People 10
Date of Event Mon 04/01/02
Delivery Time 11 45 am

Food 107 50
Bar 0 00
Staff 0 00
Equipment
Sub Total 107 50
Service Charge 0 00
Delivery 12 45
Sales Tax 9 24
0 00

Gratuity 0 00

Total \$129 19
Deposit 17 23
Total Due \$111 96

*From the staff at Pour la France! Catering,
thank you for your order!*

I understand the payment terms for all services rendered by Pour la France! catering are due upon receipt of this invoice. Interest may be charged on the unpaid balance of any invoice past (15) days at an interest rate of 1 75% per month, (annual percentage rate of 21 0% or the legal maximum rate). The client will be held liable for all court costs and attorney's fees for cost of collection. Client will be held liable for the cost of lost equipment.

Client _____ **Date** _____
Gratuity \$ _____ **Initial** _____