

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE

PROOF OF CLAIM



s7176

In re
Allegiance Telecom of California, Inc

Case Number
03-13069

YOUR CLAIM IS SCHEDULED AS

FILED UNSECURED CONTINGENT
ALLEGIANTELECOM, INC
03-13057 (RRD)
705

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.

The amounts reflected above constitute your claim as scheduled by the Debtor. If you agree with the amounts set forth herein and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.

If the amounts shown above are listed as Contingent Unliquidated or Disputed, a proof of claim must be filed. If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

Name of Creditor and Address



03805888088502

SILK BIJOUX
7611 SLATER AV
UNIT P
HUNTINGTON BEACH CA 92647

Creditor Telephone Number ()

CREDITOR TAX I D #

33-0702831

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

Check here replaces or amends a previously filed claim dated _____

1 BASIS FOR CLAIM

- Goods sold
- Services performed
- Money loaned
- Personal injury/wrongful death
- Taxes
- Other (describe briefly)
- Retiree benefits as defined in 11 U.S.C. § 1302(b)(2)
- Wages, salaries, and compensation (Fill out below)

Billing over charge

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

RECD OCT 17 2003

2 DATE DEBT WAS INCURRED

11/15/2002

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

\$ 91.52 (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.

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.

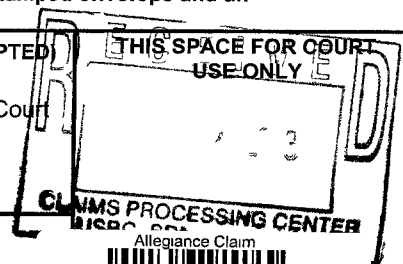
8 SUPPORTING DOCUMENTS Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS if the documents are 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



DATE SIGNED

10/6/03

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)

Mike Conf



00738

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



allegiance telecom, inc.

Allegiance Telecom of California, Inc
1950 StemmonsExpressway
Suite 3026
Dallas, TX 75207
(214) 853-7110 Fax
For Billing Inquiries, please contact
customer service at (800) 553-1989

01148 MA... DP 07 0960

SILK BIJIOUX
7611 SLATER AV
UNIT P
HUNTINGTON BEACH CA 92647

BILLING DATE 01/15/2002
ACCOUNT NUMBER 002190469505
INVOICE NUMBER 020117018010

ACCOUNT STATUS

PREVIOUS BALANCE	(76 85)
PAYMENTS APPLIED THROUGH 01/15/2002	0 00
ADJUSTMENTS	0 00
PAST DUE	<u>(76 85)</u>

SUMMARY OF CURRENT CHARGES

USAGE CHARGES

LOCAL	0 00
LATA TOLL*	0 00
1+ OUTBOUND**	0 00
8XX INBOUND	0 00
CALLING CARD	0 00
INTERNATIONAL	0 00
DIRECTORY ASSISTANCE	0 00

MONTHLY RECURRING AND NON-RECURRING CHARGES 5 00

LATE PAYMENT CHARGES 0 00

TAXES, FEES AND OTHER ASSESSMENTS 0 76

*Please see section labeled 'Monthly Recurring and Non-Recurring Charges' for LATA Carrier Information

**Please see section labeled 'Monthly Recurring and Non-Recurring Charges' for LD Carrier Information

TOTAL CURRENT CHARGES	5 76	<u>5 76</u>
TOTAL AMOUNT DUE		<u>(71 09)</u>

If you have any questions concerning this invoice or about available features please call customer service at (800) 553 1989 during the hours of 7 AM and 6 PM (CST) Monday thru Friday Please see section labeled 'Monthly Recurring and Non-Recurring Charges' for carrier information

Detach and mail this section with your check made payable to Allegiance Telecom of California, Inc for the amount due

SILK BIJIOUX
7611 SLATER AV
UNIT P
HUNTINGTON BEACH CA 92647

Make Checks Payable to

Allegiance Telecom of California, Inc
PO Box 844870
Dallas, TX 75284-4870

BILLING DATE	01/15/2002
ACCOUNT NUMBER	002190469505
INVOICE NUMBER	020117018010
PAYMENT DUE BY	02/14/2002
TOTAL AMOUNT DUE	(71 09)



60100

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01148 MALS DP 07 0960