

**UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

**PROOF OF CLAIM**



In re  
**Allegiance Telecom Service Corporation**

Case Number  
**03-13103**

**YOUR CLAIM IS SCHEDULED AS**  
\$260.00 UNSECURED

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(c)(2).

FILED  
**U.S.B.C. SOUTHERN DISTRICT OF NEW YORK**  
**ALLEGIANCE TELECOM, INC**  
**03-13103 (RRD)**

**913**  
The amounts and nature of your claim 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.

**Name of Creditor and Address**

PREMIER TRANSPORTATION SERVICES LLC  
LEMMON AVE EXEC TERMINAL  
DALLAS, TX 75209

*7777 Lemmon Ave,  
Suite 100*

Check box if you are aware that anyone has filed a proof of claim relating to your claim. Attach copy of statement giving

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.

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

Creditor Telephone Number ( )

CREDITOR TAX I.D. #  
**# 75-2662325**

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR  
**# 03640**

Check here  replace or  amend 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 below)

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

**2 DATE DEBT WAS INCURRED** 5-7-03 **3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED** \$ 260.00 (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.

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.

**REC'D OCT 22 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. 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 5:00 p.m. November 26, 2003, Prevailing Eastern Time.

**BY MAIL** United States Bankruptcy Court Southern District of New York Allegiance Claims Docketing Center Bowling Green Station P.O. Box 95 New York, NY 10074-0095

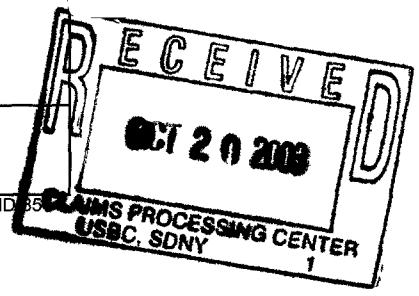
**BY HAND OR OVERNIGHT DELIVERY TO** United States Bankruptcy Court Southern District of New York Allegiance Claims Docketing Center One Bowling Green Room 534 New York, NY 10004-1408



DATE SIGNED  
10-13-03

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).

*Don Dammsund, General Manager*



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 153.

See Other Side For Instructions

**PREMIER TRANSPORTATION SERVICES, LLC**  
**Lemmon Ave Executive Terminal**  
**7777 Lemmon Ave Suite 100, Dallas, TX 75209**  
**(214) 351-7000                      (800) 789-4847                      Fax (214) 351-7020**

INVOICE						
Bill To ALLEGIANCE TELECOM, INC			Customer ALLEGIANCE TELECOM, INC			
9201 N CENTRAL EXPRWY 6TH FLR DALLAS TX 75231 Attention JEANNIE KINCAID			9201 N CENTRAL EXPRWY 6TH FLR DALLAS TX 75231 Attention JEANNIE KINCAID			
Account 03640	Order No	Ordered By JEANNIE	Sales DON	Veh Type 25 PAX MINI	Svc Date 05/07/2003	Invoice 087971

CHARGES	RATE	AMOUNT
SERVICE 4 00 Hrs	65 00	260 00
TOTAL CHARGES		260 00

DESCRIPTION	AMOUNT
SUBTOTAL	260 00
TOTAL PAYMENT	0 00
AMOUNT DUE	260 00

NET 15 DAYS      DUE DATE 05/22/2003

COMMENTS

ROUTING

P\_14 00 SPOT @ 13 45!!!!  
 P\_            IF ANY PROBLEMS CALL CHERYL GRAHAM @ 469-259-2872 OR CAROLYN YOUNG @ 469-259  
 P\_14 00 9201 N CENTRAL EXPRWY 6TH FLR DALLAS - -  
 P\_14 30 INFORMART 1950 STEMMONS FREEWAY, DALLAS - - EXIT MARKET CENTER BLVD

Please process payment upon receipt of this invoice! Thank you!  
 \*\*Effective 9-1-2003, PTS will increase the Administrative Surcharge  
 from 10% to 12% This surcharge entails insurance, fuel, and drug testing

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**RESERVATION SHEET**

Passenger	ALLEGIANCE TELECOM, INC	Run Type	DFW	Reservation	087971
Address	9201 N CENTRAL EXPRWY 6TH FLR	Map Page	26-P	05/07/2003 Wednesday 14 00	
City	DALLAS	Hm Phone	( ) -	DO Time	18 00
State	TX Zip Code 75231	Wk Phone	(469) 259-2058	Est Hours	4 00
Cross St	PARK LN & CENTRAL				

Account Type	CORPORATE	Ordered By	JEANNIE	Bill To	03640 ALLEGIANCE TELECOM
		Order No		CC Name	
Passengers	20	Order Phone	(469) 259-2058	Number	
Vehicle Type	25 PAX MINI	Order Date	04/25/2003	Expires	/ / Type
Vehicle ID	AFF-MB-5	Driver	532	Agency	

**ROUTING FOR DESTINATION ->**

**See Next Page for Routing List**

CHARGES	RATE	AMOUNT	TRIP SHEET NOTES																														
SERVICE 4 00 Hrs	65 00	260 00	<table border="0" style="width: 100%;"> <tr><td>Driver Spot</td><td>13 50</td></tr> <tr><td>Time Out</td><td>_____</td></tr> <tr><td>Arrived</td><td>14 00</td></tr> <tr><td>Drop Off</td><td>18 00</td></tr> <tr><td>Time In</td><td>_____</td></tr> <tr><td>Total Hours</td><td>_____</td></tr> <tr><td>Miles In</td><td>_____</td></tr> <tr><td>Out</td><td>_____</td></tr> <tr><td>Total</td><td>_____</td></tr> <tr><td>Phone In</td><td>_____</td></tr> <tr><td>Out</td><td>_____</td></tr> <tr><td>Total</td><td>_____</td></tr> <tr><td>Gallons</td><td>_____</td></tr> <tr><td>Price/Gal</td><td>_____</td></tr> <tr><td>Total</td><td>_____</td></tr> </table>	Driver Spot	13 50	Time Out	_____	Arrived	14 00	Drop Off	18 00	Time In	_____	Total Hours	_____	Miles In	_____	Out	_____	Total	_____	Phone In	_____	Out	_____	Total	_____	Gallons	_____	Price/Gal	_____	Total	_____
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GRATUITY Flt	_____	_____																															
FUEL & INS CH Flt	_____	_____																															
AIRPORT TOLL Flt	_____	_____																															
WAIT/TRAVEL TI Flt	_____	_____																															
STOPS Flt	_____	_____																															
ADMIN FEE Pct	_____	_____																															
EARLY/LATE FEE Flt	_____	_____																															
INBOUND I'NTL Flt	_____	_____																															
PARKING Flt	_____	_____																															
BAGGAGE CLM ME Flt	_____	_____																															
TOLL ROAD FEES Flt	_____	_____																															
CATERING Flt	_____	_____																															
HOLIDAY FEE Flt	_____	_____																															
Total Charges	260 00																																
Deposit	0 00																																
Amount Due	260 00	BILL	Taken By MARSHA																														

**LIABILITY AGREEMENT** This agreement is a contractual arrangement of this Company for the hire of limousine service and pertains specifically to the performance by the customer in the limousine during the course of time. In addition to the hourly rate for car and chauffeur any damage excess of usual use and wear of the hired car, there will be a minimum charge of \$100 for the repair and/ or general cleaning of the car. Decision as to the unusual wear and use of the vehicle interior and its environs, rests with the Company solely and its experience as to general habitation of hired cars, and its decision is final. Non-refundable deposit within 48 hours and substitution of vehicle at Company's discretion.

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P\_14 30 INFORMART\_1950 STEMMONS FREEWAY, DALLAS\_ - -\_EXIT MARKET CENTER BLVD  
P\_ WAIT ON SITE\*\*\*DO NOT LEAVE\*\*\*\_,\_ - -  
D\_18 00 DFW\_CLIENTS WILL HAVE FLIGHT INFO\_\_\_\_  
D\_18 00 CONF 15919\_\_\_\_\_