UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

PROOF OF CLAIM

s5854

In re
Allegiance Telecom of Georgia, Inc

Case Number
03-13074

YOUR CLAIM IS SCHEDULED AS

$252 21 UNSECURED CONTINGENT DISPUTED, UNLIQUIDATED

FILED
U S B C SOUTHERN DISTRICT OF NEW YORK
ALLEGIANCE TELECOM, INC
03-13057 (RRD)
1078

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

Name of Creditor and Address

03805888087180
CA3
1000 UNION CENTER DR
APT B
ALPHARETTA GA 30004

Creditor Telephone Number ( )

☐ 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 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

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 TAX I D #	ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR	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 (describe briefly below) _____
☐ Retiree benefits as defined in 11 U S C § 1114(a)
☐ Wages salaries and compensation (Fill out below)

REC'D OCT 3 1 2003

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

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED

$ _____ (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 5 00 p m , November 26, 2003, Prevailing Eastern Time

BY MAIL TO
United States Bankruptcy Court
Southern District of New York
Allegiance Claims Docketing Center
Bowling Green Station P O Box 95
New York NY 10274-0095

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

Allegiance Claim
01110

RECEIVED
23 2003
CLAIMS PROCESSING CENTER
USBC SDNY
1

DATE SIGNED
10/20/03

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)
President

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

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

In re	**X**	
ALLEGIANCE TELECOM, INC , *et al* ,		**Chapter 11 Case No 03-13057 (RDD)**
Debtors	**X**	**Jointly Administered**

NOTICE OF CORRECTED PROOF OF CLAIM FORM

PLEASE TAKE NOTICE THAT, RECENTLY, YOU SHOULD HAVE RECEIVED A "**NOTICE OF BAR DATE,**" DATED SEPTEMBER 30, 2003, REQUIRING FILING OF PROOFS OF CLAIM ON OR BEFORE **NOVEMBER 26, 2003 AT 5 00 P M (PREVAILING EASTERN TIME)** TOGETHER WITH A PROOF OF CLAIM FORM FOR YOUR USE IN FILING A CLAIM IN THE ABOVE CAPTIONED CHAPTER 11 CASES THE PROOF OF CLAIM FORM HAD TYPOGRAPHICAL ERRORS INCLUDING THE INCORRECT DATE OF OCTOBER 1, 2003 AS THE DEADLINE TO FILE CLAIMS

ENCLOSED IS THE CORRECT PROOF OF CLAIM YOU SHOULD USE FOR FILING A CLAIM IN THE ABOVE CAPTIONED CHAPTER 11 CASES IN ACCORDANCE WITH THE NOTICE OF BAR DATE

IF YOU HAVE ALREADY FILED A PROOF OF CLAIM FORM USING THE INCORRECT FORM AND THIS PROOF OF CLAIM WAS SENT TO ONE OF THE ADDRESSES LISTED BELOW, YOU DO NOT NEED TO FILE THE SAME PROOF OF CLAIM ON THE CORRECT FORM WHICH IS ENCLOSED HEREWITH IF YOU HAVE NOT, PLEASE USE THE ENCLOSED PROOF OF CLAIM FORM

THE NOTICE OF BAR DATE YOU RECEIVED WHICH ACCOMPANIED THE INCORRECT PROOF OF CLAIM FORM IS ACCURATE IN REQUIRING THAT PROOFS OF CLAIM MUST BE FILED ON OR BEFORE **NOVEMBER 26, 2003 AT 5 00 P M (PREVAILING EASTERN TIME)**

PROOFS OF CLAIM SHOULD BE SENT BY MAIL OR HAND DELIVERED SO THAT THEY ARE RECEIVED ON OR BEFORE **NOVEMBER 26, 2003, AT 5 00 P M , PREVAILING EASTERN TIME**, AS FOLLOWS

BY MAIL TO	**BY HAND OR OVERNIGHT DELIVERY TO**
United States Bankruptcy Court Southern District of New York Allegiance Claims Docketing Center Bowling Green Station, P O Box 95 New York, NY 10274-0095	United States Bankruptcy Court Southern District of New York Allegiance Claims Docketing Center One Bowling Green, Room 534 New York, NY 10004-1408

IF YOU HAVE ANY QUESTIONS CONCERNING THIS NOTICE, THE FILING OF PROOFS OF CLAIM OR REQUIRE A COPY OF THE NOTICE OF BAR DATE, PLEASE CONTACT THE ALLEGIANCE CLAIMS DOCKETING CENTER, BY CALLING BANKRUPTCY MANAGEMENT CORPORATION, THE DEBTORS' CLAIMS AGENT, AT 1-888-909-0100

ALLEGIANCE TELECOM, INC , ET AL