

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

**PROOF OF CLAIM**

OCT 06 2003



CRDID 8016

In re  
**ALLEGIANCE TELECOM, INC ET AL  
DEBTORS**

Case Number  
**CHAPTER 11  
CASE NO 03-13057 (RDD)  
03-13081**

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 **USDC SOUTHERN DISTRICT OF NEW YORK** statement giving particularity

**FILED**  
**SOUTHERN DISTRICT OF NEW YORK**  
**ALLEGIANCE TELECOM, INC**  
**03-13057 (RRD)**

Name of Creditor and Address  
 03805890008016  
  
CITY OF STE GENEVIEVE  
165 S 4TH ST  
SAINTE GENEVIEVE MO 63670-1605

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

-----  
**1102**

Creditor Telephone Number **(573) 883-5400**

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 #  
**43-6003164**

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR  
**SEE ATTACHED**

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) **2004 FRANCHISE FEE LICENSE**      Your social security number \_\_\_\_\_  
 Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_ (date) (date)

**2 DATE DEBT WAS INCURRED** **JANUARY 1, 2004**      **3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ **3,400 00** (unsecured)      \$ \_\_\_\_\_ (secured)      \$ **3,400 00** (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 31 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 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 21 2003**  
**CLAIMS PROCESSING CENTER**  
 Allegiance Claim

DATE SIGNED  
**10/15/03**

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)

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



01134



# CITY OF STE. GENEVIEVE

165 S FOURTH STREET

STE GENEVIEVE, MISSOURI 63670

TELEPHONE (573) 883-5400

FAX (573) 883-8105



## **Second Notice**

October 22, 2003

TO Accounts Payable Department  
Allegiance Telecom of MO Inc  
9201 N Central Expressway  
Dallas, TX 75231

To Whom It May Concern

Our records show that your company has operated a telephone and/or telecommunications business within the City limits of Ste Genevieve during the 2002 calendar year and also during the past few years. The City is making a coordinated effort to enforce all old ordinances due to the recent regulatory mandate from the Finance Committee. A copy of City Ordinance #1762 which requires the \$3,400 annual license tax for telephone companies is attached for your review. This Ordinance remains in effect and has never been rescinded.

The initial payment is past due since January 20, and the second 1/2 year payment is due on July 20, 2003. Thank you very much for your prompt payment of the attached invoice.

Sincerely,

Joe Dearing  
City Administrator

L 02 121 T10

# **City of Ste. Genevieve**

165 South Fourth Street  
Ste Genevieve, MO 63670  
(573) 883-5400 (Telephone)  
(573) 883 8105 (Facsimile)

## INVOICE

### **Second Notice**

October 22, 2003

INV-03-26

TO Accounts Payable Department  
Allegiance Telecom of MO Inc  
9201 N Central Expressway  
Dallas, TX 75231

#### **FOR**

City Telephone/Telecommunications License Tax - Year 2002

**Past due** payment due on January 20, 2002 \$ 1,700 00

Second Payment - due on July 20, 2002 \$ 1,700 00

**Total** \$ 3,400 00

**Thank you**



# CITY OF STE. GENEVIEVE

165 S FOURTH STREET

STE GENEVIEVE, MISSOURI 63670

TELEPHONE (573) 883-5400

FAX (573) 883-8105

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+

+

June 25, 2002

Accounts Payable Department  
Allegiance Telecom of MO Inc  
~~c/o Ernst & Young LLP~~  
~~18006 Skypark Circle, Suite 106~~  
~~Irvine, CA 92614~~  
~~Phone 949-838-3300~~

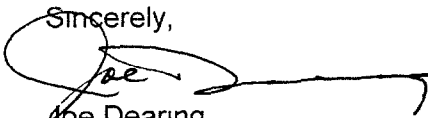
9201 N. Central Expressway  
Dallas TX 75231

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Sincerely,

  
Joe Dearing  
City Administrator

L-02-121 T10

# City of Ste. Genevieve

165 South Fourth Street  
Ste Genevieve, MO 63670  
(573) 883-5400 (Telephone)  
(573) 883 8105 (Facsimile)

## INVOICE

June 25, 2002

INV-02-17

TO Accounts Payable Department  
Allegiance Telecom of MO Inc  
~~c/o Ernst & Young LLP~~ 9201 N Central Expressway  
~~18006 Skypark Circle, Suite 106 Dallas TX 75231~~  
~~Irvine, CA 92614~~  
~~Phone 949-838-3300~~

### FOR

City Telephone/Telecommunications License Tax - Year 2002

<b>Past due</b> payment due on January 20, 2002	\$ 1,700 00
Second Payment - due on July 20, 2002	\$ 1,700 00
<b>Total</b>	<b>\$ 3,400 00</b>

Thank you

Check No. - 113020  
Check Date - 10/31/02  
Stub 1 of 1

08 STE. GENEVIEVE      10/30/02 Business License      3,400.00      3,400.00

3,400.00      3,400.00

DO NOT ACCEPT THIS CHECK UNLESS YOU CAN SEE A DUAL-TONE TRUE WATERMARK THAT APPEARS AS CONNECTING PENTAGONS WHEN HELD TO THE LIGHT AND "LOGO" APPEARS ON REVERSE.

75-282754



ALLEGIANCE TELECOM SERVICE CORPORATION  
OPERATING ACCOUNT  
P.O. 214-201-7100

Bank of America, N.A.

65-1278  
511

113020

9201 North Central Expressway  
DALLAS, TX 75231

210334

10/31/02

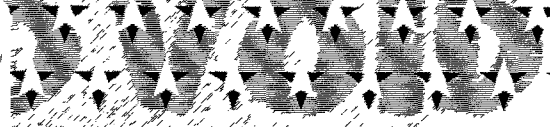
\$\*\*\*\*\*3,400.00

VOID After 180 Days

THREE THOUSAND FOUR HUNDRED AND 00/100\*\*\*\*\*

Pay To  
the Order Of

City of Ste. Genevieve  
165 S. Fourth Street  
Ste. Genevieve MO 63670



SAFE Checks

⑈ 113020 ⑆ 06112788 ⑆ 003299812521 ⑆

THE FACE OF THIS CHECK HAS A BLUE BACKGROUND - ANY OTHER COLORS MAY BE EVIDENCE OF CHEMICAL ALTERATION OR ERASURE - SEE REVERSE SIDE FOR MORE SAFETY FEATURES.