

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

**PROOF OF CLAIM**



CRDID 69803

In re  
*Allegiance Telecom, Inc et al*

Case Number  
*03-13057*

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

**FILED**  
**SOUTHERN DISTRICT OF NEW YORK**  
**ALLEGANCE TELECOM, INC**  
**03-13057 (RRD)**  
**1388**

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**

JACKSON & RHODES PC  
8150 N CENTRAL EXPY  
DALLAS TX 75206

Creditor Telephone Number *214 647-7500*

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

CREDITOR TAX I D #  
*75-2361513*

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

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** \$ *1168 31* (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (unsecured priority) \$ *1168 31* (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 NOV 19 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**

NOV 10 2003

Allegiance Claim

DATE SIGNED  
*11-4-03*

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)

*Vickie Petty* VICKIE PETTY Office 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 3571

See Other Side For Instructions



01432

# Jackson & Rhodes P.C.

8150 North Central Expressway, Campbell Centre Suite 1700

Dallas, TX 75206

Phone (214) 361-7588 FAX (214) 361-9726

Invoice Date May 06, 2002  
 Invoice Number 0120268  
 Client Number HANDRAALLEG

Allegience Telecom, Inc  
 9201 Central Expressway  
 Dallas, TX 75231

Attn Mr Randall E Hand

Re Marc Humphries P C v Allegience Telecom

For professional services rendered through April 25, 2002

**Detail Description**

Date	Employee	Activity Performed	Hours/Units	Amount
<b>Services</b>				
03/28/02	SNC	Initial review	1 00	\$ 150 00
04/01/02	SAB	Review documents, Meeting with N Caputto	1 50	442 50
04/02/02	SNC	Reviewed case with S Barnes	1 00	150 00
04/16/02	RGB	Review petition and related documents and list questions & concerns and documents required	2 00	420 00
<b>Total Services</b>			5 50	1,162 50
<b>Total Invoice Amount</b>				<u>\$ 1,162 50</u>

**Accounts Receivable Aging**

Current	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
1,162 50	0 00	0 00	0 00	0 00	1,162 50

ALL BALANCES IN EXCESS OF 30 DAYS WILL BE CHARGED ONE HALF PERCENT (1/2%) INTEREST