

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



PROOF OF CLAIM

In re

Allegiance Telecom of
Illinois, Inc

Case Number

03-13075

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 in your claim - Attach proof 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.

FILED
SOUTHERN DISTRICT OF NEW YORK
ALLEGIANTELECOM, INC
03-13075 (RRD)

Name of Creditor and Address

03805890019609
NEUSTAR INC NeuStar, Inc.
x MARTIN LOWEN VP & CO x 46000 Center Oak
x 2000 M ST NW STE 600 x Plaza
x WASHINGTON DC 20036 x Sterling, VA 20166
Attn: Alex Konde

Creditor Telephone Number (571) 434-5743

CREDITOR TAX ID #
52-2141938

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR
13720

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 below) _____

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

2 DATE DEBT WAS INCURRED March-April 2003 **3 IF COURT JUDGMENT, DATE OBTAINED**

4 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED \$ 1,110.73 (unsecured) \$ (secured) \$ (unsecured priority) \$ 1,110.73 (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.

RECD
DEC 03 2003
BMC

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

THIS SPACE FOR COURT USE ONLY

NOV 20

Allegiance Claim

02363

DATE SIGNED: 11/24/03 **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)
 Ahita Vessali, Controller

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 357

See Other Side For Instructions



Invoice

REMITTANCE SHEET

46000 Center Oak Plaza
SterlingVa 20166

Date 10/10/2003

Bill To Address

Allegiance Telecom of Illinois, Inc
9201 North Central Expressway
5B Accounts Payable
Dallas, TX 75231

Remittance Address

NeuStar
Bank Of America
P O Box 403034
Atlanta GA 30384

Customer

Name

13720

Allegiance Telecom of Illinois, Inc

Invoice Date

Collection Amt

Item ID

Reason

2003-03 31	107 30	00981887	SOW15
2003 03 31	505 32	00982722	LNP
2003 03-31	0 14	00983931	SOW6
2003 03 31	16 93	00984110	SOW11
2003 03 31	1 49	00985202	SOW34
2003-03 31	1 88	00986558	SOW34
2003-03 31	16 08	00990059	SOW28
2003-03 31	0 20	00991543	SOW19
2003-03 31	0 08	00992440	SOW13
2003-04 30	16 93	00995710	SOW11
2003 04 30	414 64	00998232	LNP
2003 04 30	0 14	00998879	SOW6
2003-04 30	1 50	00999142	SOW34
2003 04 30	1 88	01000486	SOW34
2003 04 30	16 08	01003709	SOW28
2003 04-30	0 20	01005049	SOW19
2003 04-30	0 08	01005716	SOW13
2003 03 31	9 86	FC-2076	

Totals

1 110 73