

United States Bankruptcy Court District of Delaware	PROOF OF CLAIM
---	-----------------------

In re (Name of Debtor) Alset Owners, LLC	Case Number 09-11960
--	--------------------------------

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 (The person or other entity to whom the debtor owes money or property) AmerenIP – a/k/a Illinois Power Company	<input type="checkbox"/> 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. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.
Name and Address Where Notices Should be Sent AmerenIP Illinois Power Company Attn: Collections A-10 PO Box 2543 Decatur, IL 62525 Telephone No. (800) 755-5000	<div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 18pt;"> RECEIVED OCT 22 2009 BMC GROUP </div>

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 7216, 0974, 8258, 7614, 5451, 7532, 5538, 2571	<input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim, dated:
--	---

1. BASIS FOR CLAIM:

<input type="checkbox"/> Goods Sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input checked="" type="checkbox"/> Other (Describe briefly) Electric and/or Gas Utilities Provided	<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. §1114(a) <input type="checkbox"/> Wages, salaries, and compensation (Fill out below) Your social security number: Unpaid compensation for services performed from _____ to _____
--	---

2. DATE DEBT WAS INCURRED: 06/05/09	3. IF COURT, JUDGMENT, DATE OBTAINED:
--	---------------------------------------

4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.

<input type="checkbox"/> SECURED CLAIM \$ Attach evidence of perfection of security interest Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly) Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ <input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$11,349.79 A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim. <input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ Specify the priority of the claim.	<input type="checkbox"/> Wages, salaries, or commissions (up to \$4000),* earned not more than 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) <input type="checkbox"/> Contributions to an employee benefit plan -- 11 U.S.C. §507(a)(4) <input type="checkbox"/> Up to \$1,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use -- 11 U.S.C. §507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child -- 11 U.S.C. §507(a)(7) <input type="checkbox"/> Taxes or penalties of governmental units -- 11 U.S.C. §507(a)(8) <input type="checkbox"/> Other -- Specify applicable paragraph of 11 U.S.C. §507(a) * Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
---	--

5. TOTAL AMOUNT OF CLAIM AT TIME

CLAIM AT TIME	\$11,349.79	\$	\$11,349.79
		(Priority)	(Total)

CASE FILED: (Unsecured) (Secured)

 Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8. TIME-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

THIS SPACE IS FOR COURT USE ONLY

Date 10/20/09	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) <div style="text-align: right;"> Pamela Johnson, Credit and Collections Department </div>
-------------------------	---



Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both, 18 U.S.C. §§152 and 3571.

*** Account Information ***

Account Number: 22850-87216
Account Status: Written Off
Customer Name: ALTES LLC
Requested By: ALTES LLC
(561) 241-4511 Extension:

Mail To:
ALTES LLC
AMERENTIP
CREDIT/COLL A-10 BANKRUPTCY
DECATUR IL 62525

Credit Amount: \$0.00
Deposit Requested: \$0.00
Deposit On-Hand: \$0.00
Suspended Charges: \$0.00
Service Address:
2220 MADISON AVE
GRANITE CITY IL 62040

New Charges: \$0.00
Current Bill: \$0.00
Billed Prior: \$2018.10
Balance Due: \$2018.10

*** Current Account Status ***

Current Rate(s):
1. GDS-2 Small Gen Gas Del-Sp Ht
2. DS - Small General Service (DS-2)
3. Electric Supply (BGS-2)
4.

5.
6.
7.
8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/16/2009	Charge Off								
07/01/2009	Payment			\$2018.16					
07/01/2009	Debit Uncollectible		\$159.74						
08/03/2009	Miscellaneous			\$0.06					
08/03/2009	Debit Uncollectible		\$0.06						
08/07/2009	Charge Off			\$159.74					
08/07/2009	Transferred To Acct # 2374966009								
08/07/2009	Transfer Credit			\$159.74					
08/07/2009	Debit Transfer Payment		\$159.68						
08/07/2009	Debit Transfer Payment		\$0.06						

*** Account Information ***

Account Number: 60590-00974
 Account Status: Written Off
 Customer Name: ALTES LLC
 Requested By:
 ALTES LLC
 (561) 241-4511 Extension:

Mail To:
 ALTES LLC
 AMERENTP
 CREDIT/COLL A-10 BANKRUPTCY
 DECATUR IL 62525

Credit Amount:
 Deposit Requested:
 Deposit On-Hand:
 Suspended Charges:
 Service Address:
 1105 S ILLINOIS ST
 BELLEVILLE IL 62220

*** Current Account Status ***
 \$0.00
 \$0.00
 \$0.00
 \$0.00

New Charges: \$0.00
 Current Bill: \$352.35
 Billed Prior: \$1361.10
 Balance Due: \$1713.45

Current Rate(s):
 1. GDS-2 Small Gen Gas Del-Sp Ht
 2. DS - Small General Service (DS-2)
 3. Electric Supply (BGS-2)
 4.

5.
 6.
 7.
 8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/ DEBITS	PAYMENT/ CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/ THERM/CCF	BILLED KW/DEMAND
06/16/2009	Charge Off								
07/01/2009	Payment			\$1713.51					
08/03/2009	Miscellaneous		\$352.35	\$352.35					
08/03/2009	Miscellaneous		\$0.06	\$0.06					
10/20/2009	Debit Uncollectible		\$0.06						
10/20/2009	Transferred To Acct #	7226137000							
10/20/2009	Transfer Credit			\$352.35					
10/20/2009	Debit Transfer Payment		\$76.07						
10/20/2009	Debit Transfer Payment		\$276.22						
10/20/2009	Debit Transfer Payment		\$0.06						

*** Account Information ***

Account Number: 81368-58258
 Account Status: Written Off
 Customer Name: ALTES LLC
 Requested By: PO BOX 2543
 ALTES LLC
 (561)241-4511 Extension:

Mail To:
 ALTES LLC
 AMERENIP
 CREDIT/COLL A-10 BANKRUPTCY
 DECATUR IL 62525

Credit Amount: \$0.00
 Deposit Requested: \$0.00
 Deposit On-Hand: \$0.00
 Suspended Charges: \$0.00
 Service Address:
 167 E MCARTHUR DR
 BETHLEHO IL 62010

*** Current Account Status ***

New Charges: \$0.00
 Current Bill: \$0.00
 Billed Prior: \$2415.86
 Balance Due: \$2415.86

Current Rate(s) : 1. GDS-2 Small Gen Gas Del-Sp Ht
 2. DS - Small General Service (DS-2)
 3. Electric Supply (BGS-2)
 4.

- 5.
- 6.
- 7.
- 8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/16/2009	Charge Off			\$2415.91					
08/17/2009	Miscellaneous			\$0.05					
08/17/2009	Debit Uncollectible		\$0.05						

*** Account Information ***

Account Number: 77122-37614
 Account Status: Written Off
 Customer Name: ALTES LLC
 Requested By: PO BOX 2543
 ALTES LLC
 (561)241-4511 Extension:

Mail To:
 ALTES LLC
 AMERENTP
 CREDIT/COLL A-10 BANKRUPTCY
 DECATR IL 62525

Credit Amount:
 Deposit Requested:
 Deposit On-Hand:
 Suspended Charges:
 Service Address:
 4527 W MAIN ST
 BELLEVILLE

IL 62226

*** Current Account Status ***

\$0.00 New Charges:
 \$0.00 Current Bill:
 \$0.00 Billed Prior:
 \$0.00 Balance Due:
 \$2149.08

Current Rate(s) : 1. DS - Small General Service (DS-2)
 2. Electric Supply (BGS-2)
 3.
 4.

5.
 6.
 7.
 8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/16/2009	Charge Off			\$2149.14					
08/17/2009	Miscellaneous			\$0.06					
08/17/2009	Debit Uncollectible		\$0.06						

*** Account Information ***

Account Number: 49214-05451
 Account Status: Written Off
 Customer Name: ALTES LLC
 Requested By:
 ALTES LLC
 (561) 241-4511 Extension:

Mail To:
 ALTES LLC
 AMERENIP
 CREDIT/COIL A-10 BANKRUPTCY
 DECATUR IL 62525

Credit Amount:
 Deposit Requested:
 Deposit On-Hand:
 Suspended Charges:
 Service Address:
 1501 TROY RD
 EDWARDSVILLE

IL 62025

*** Current Account Status ***

\$0.00 New Charges:
 \$0.00 Current Bill:
 \$0.00 Billed Prior:
 \$0.00 Balance Due:
 \$1978.10

- Current Rate(s) :
1. GDS-2 Small Gen Gas Del-Sp Ht
 2. DS - Small General Service (DS-2)
 3. Electric Supply (BGS-2)
 4. DS - Non-Residential Lighting (DS-5)
 5. Electric Supply (BGS-5)
 - 6.
 - 7.
 - 8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/16/2009	ELECTRIC LIGHTING	06/02/09 TO 06/05/09	\$9.71					0	0
06/16/2009	ELECTRIC SERVICE	06/02/09 TO 06/05/09	\$9.38					601	
06/16/2009	GAS SERVICE	06/02/09 TO 06/05/09	\$8.73					31	
06/16/2009	Bill Amount - Bill Final				\$1978.12	\$0.00	07/01/09		
06/17/2009	Charge Off			\$1978.12					
08/03/2009	Miscellaneous			\$0.02					
08/03/2009	Debit Uncollectible			\$0.02					

*** Account Information ***

Account Number: 46573-87532
 Account Status: Written Off
 Customer Name: ALTES LLC
 Requested By: PO BOX 2543
 ALTES LLC
 (561)241-4511 Extension:

Mail To:
 ALTES LLC
 AMERENIP
 CREDIT/COLL A-10 BANKRUPTCY
 DECATUR IL 62525

Credit Amount: \$0.00
 Deposit Requested: \$0.00
 Deposit On-Hand: \$0.00
 Suspended Charges: \$0.00
 Service Address:
 4527 W MAIN ST
 BELLEVILLE IL 62226

*** Current Account Status ***

New Charges: \$0.00
 Current Bill: \$0.00
 Billed Prior: \$495.34
 Balance Due: \$495.34

Current Rate(s): 1. GDS-2 Small Gen Gas Del-Sp Ht
 2.
 3.
 4.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/17/2009	Charge Off			\$495.34					

*** Account Information ***

Account Number: 60410-55538
Account Status: Written Off
Customer Name: ALTES LLC

Requested By: PO BOX 2543
ALTES LLC
(561)241-4511 Extension:

Mail To:
ALTES LLC
AMERENIP
CREDIT/COLL A-10 BANKRUPTCY
DECATUR IL 62525

660 CARLYLE AVE
BELLEVILLE IL 62221

*** Current Account Status ***

Credit Amount: \$0.00
Deposit Requested: \$0.00
Deposit On-Hand: \$0.00
Suspended Charges: \$0.00
Service Address: 660 CARLYLE AVE
BELLEVILLE IL 62221

New Charges: \$0.00
Current Bill: \$0.00
Billed Prior: \$63.44
Balance Due: \$63.44

- Current Rate(s):
1. GDS-2 Small Gen Gas Del-Sp Ht
 2. DS - Small General Service (DS-2)
 3. Electric Supply (BGS-2)
 - 4.
 - 5.
 - 6.
 - 7.
 - 8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/17/2009	Charge Off			\$63.44					

*** Account Information ***

Account Number: 71978-42571
Account Status: Written Off
Customer Name: ALTES LLC
Requested By: PO BOX 2543
ALTES LLC
(561)241-4511 Extension:

Mail To:
ALTES LLC
AMERENIP
CREDIT/COLL A-10 BANKRUPTCY
DECATUR IL 62525

Credit Amount: \$0.00
Deposit Requested: \$0.00
Deposit On-Hand: \$0.00
Suspended Charges: \$0.00
Service Address:
1602 CAMP JACKSON RD
CAHOKIA IL 62206

*** Current Account Status ***

New Charges: \$0.00
Current Bill: \$0.00
Billed Prior: \$516.42
Balance Due: \$516.42

- 5. Current Rate(s): 1. GDS-2 Small Gen Gas Del-Sp Ht
- 6.
- 7.
- 8.

TRANSACTION DATE	TRANSACTION	BILLING PERIOD	CHARGES/DEBITS	PAYMENT/CREDITS	TOTAL BILL	PREVIOUS BALANCE	DUE DATE	Usage: KWH/THERM/CCF	BILLED KW/DEMAND
06/18/2009	Charge Off			\$516.42					