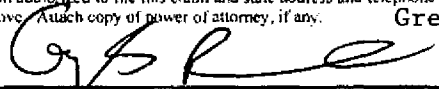


UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA Debtor against which claim is asserted: (Check only ONE debtor below)		PROOF OF CLAIM
<input type="checkbox"/> On-Site Sourcing, Inc. 09-10816-RGM	<input type="checkbox"/> DocuForce Financial Corp. 09-10817-RGM	<input type="checkbox"/> On-Site LA, Inc. 09-10818-RGM
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) ONSITE3 dba ONSITE EDISCOVERY		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number 09-10818 (if known) Filed on 02/04/09
Name and address where notices should be sent. CONTROL AIR CONDITIONING SERVICE CORP. 5200 E LA PALMA AVENUE ANAHEIM, CA 92807 Telephone number: (714) 777-8600		
Name and address where payment should be sent (if different from above): same as above		<input type="checkbox"/> Check this 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 this box if you are the debtor or trustee in this case.
Telephone number:		
1. Amount of Claim as of Date Case Filed: \$1,366.26		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim.
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		
2. Basis for Claim: Services provided (See instruction #2 on reverse side.)		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507(a)(5). <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507(a)(___). Amount entitled to priority: \$ _____ *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
3. Last four digits of any number by which creditor identifies debtor: 6387		
3a. Debtor may have scheduled account as: (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate: % _____ Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ 1,366.26		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		
Date: 03/13/09	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.  Greg Rummel, CFO	FOR COURT USE ONLY

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.

FILED

MAR 23 2009

BMC GROUP

On-Site Sourcing, Inc.



00057

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a):

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS

Debtor

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

Claim

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Proof of Claim

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

Secured Claim Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

INFORMATION

Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.



Control
Air Conditioning
Service Corporation

5200 E. La Palma Ave., Anaheim, CA 92807
(714) 777-6111 FAX (714) 777-9888

INVOICE

Invoice No.: 354725
Customer ID: 3-6387
Date: 8/25/2008

Maintenance

Bill to: ONSITE E-DISCOVERY
550 S. Hope, Ste., #800
Los Angeles, CA 90071

Service at: ON SITE E-DISCOVERY
550 S. HOPE STREET
SUITE 800
LOS ANGELES, CA 90071

Description: Work Order 82285 Aug. Maint. Agr#1320
NET 30 DAYS

Reference: Work Order 82285

PO Number:

Item	Description	Quantity	Unit Price	Amount
Agreement				
	Preventative Maintenance	1.00	325.63	325.63
			Agreement Subtotal	325.63
Labor				
	Arthur Villagran	3.00	0.00	0.00
			Labor Subtotal	0.00

Subtotal:	325.63
Sales Tax:	0.00
Total Due:	325.63

A 1.5% FEE PER MONTH WILL BE CHARGED ON ALL PAST DUE INVOICES.



5200 E. La Palma Ave., Anaheim, CA 92807
(714) 777-6111 FAX (714) 777-9888

INVOICE

Invoice No.: 358776
Customer ID: 3-6387
Date: 12/12/2008

Maintenance

Bill to: ONSITE E-DISCOVERY
550 S. Hope, Ste., #800
Los Angeles, CA 90071

Service at: ON SITE E-DISCOVERY
550 S. HOPE STREET
SUITE 800
LOS ANGELES, CA 90071

Description: Work Order 85820 Nov. Maint. Agr#1320
NET 30 DAYS

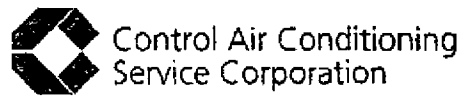
Reference: Work Order 85820

PO Number:

Item	Description	Quantity	Unit Price	Amount
Agreement				
	Preventative Maintenance	1.00	325.63	325.63
			Agreement Subtotal	325.63
Labor				
	Gabriel Lopez	3.00	0.00	0.00
			Labor Subtotal	0.00

Subtotal:	325.63
Sales Tax:	0.00
Total Due:	325.63

A 1.5% FEE PER MONTH WILL BE CHARGED ON ALL PAST DUE INVOICES.



Service Ticket

5200 E. La Palma Ave. Anaheim, Ca 92807 (714) 777-6111 Fax (714) 777-9888

Date: 12/08/08	Work Order # 85820	Equipment	Unit # 1	Unit #
Job Name: On site Discovery		Manufacturer: ClimateMaster		
Job Address: 550 S. Hope St. suite 800		Model/Type: GR7060 AFC30CL		
Job City: Los Angeles CA. 90071		Serial Number: G11238895		
Phone #:		Voltage/Phase:		

P.O NUMBER: _____ REQUESTED BY: _____ JOB SITE CONTACT: _____

MAINTENANCE FOR: _____ NO DEPARTMENT PROJECT SERVICE REQUEST WARRANTY

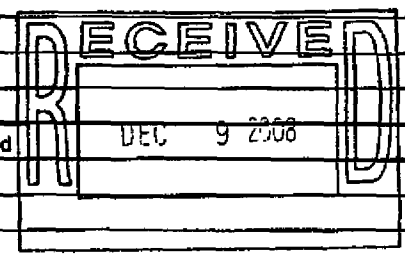
Service Requested: Maintenance

On site perform maintenance, Filters on site Replaced Filters, checked drain lines and drain pans, checked electrical components and connections. checked unit operation. All is O.K.

4-20x20x1
4-22x22x1

Job Complete Job Incomplete

Additional Work Recommended Yes No



PO#	P-Card	M/S	T/S	Materials Used

Date	Technician	Time In/Time Out	Regular Time	Over Time	Premium Time	Travel Time
12-8-08	Rubiel Lopez	:	3	:	:	:
		:	:	:	:	:
		:	:	:	:	:
		:	:	:	:	:
		:	:	:	:	:
		:	:	:	:	:

[Signature]
Agent or Customer Signature
White - Office

Blue - Technician

[Signature]
Technician
Gold - Customer



Control
Air Conditioning
Service Corporation

5200 E. La Palma Ave., Anaheim, CA 92807
(714) 777-6111 FAX (714) 777-9888

INVOICE

Invoice No.: 356428
Customer ID: 3-6387
Date: 9/30/2008

Service Projects

Bill to: ONSITE E-DISCOVERY
550 S. Hope, Ste., #800
Los Angeles, CA 90071

Service at: ON SITE E-DISCOVERY
550 S. HOPE STREET
SUITE 800
LOS ANGELES, CA 90071

Description: Work Order 78024 Project
NET 30 DAYS

Reference: Work Order 78024

PO Number:

Item	Description	Quantity	Unit Price	Amount
Miscellaneous				
	Final Billing	1.00	715.00	715.00
	Server Room Repair - too warm			
Miscellaneous Subtotal				715.00

Subtotal:	715.00
Sales Tax:	0.00
Total Due:	715.00

A 1.5% FEE PER MONTH WILL BE CHARGED ON ALL PAST DUE INVOICES.

FROM :

FAX NO. :

Mar. 04 2008 08:25AM P1

FULLERTON PRINTING INC. (714) 870-7500

Control Air Conditioning
Service Corporation

5200 E. La Palma Ave • Anaheim, CA 92807-2019 • (714) 777-6111 • Fax (714) 777-9888

SERVICE TICKET

TIME IN Pumped 7:45 TIME OUT 11:30 PAGE 1 OF

DATE	3/3/08	WORK ORDER #	77874	EQUIPMENT	UNIT #:	1	UNIT #:
JOB NAME	On Site Downstay			MANUFACTURER	Climate Master		
JOB ADDRESS	560 Hope			MODEL/TYPE	GRH06DAEC300LSS		
JOB CITY	L.A.			SERIAL NUMBER	G11238883		
PHONE #				VOLTAGE/PHASE	460V 3P		
P.O. NUMBER				REQUESTED BY:	JOB SITE CONTACT: Kay		
<input type="checkbox"/> MAINTENANCE FOR <input type="checkbox"/> NO DEPARTMENT <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> SERVICE REQUEST <input type="checkbox"/> WARRANTY							
SERVICE REQUESTED: Unit not working - too hot							
WORK PERFORMED: Checked in with building security, dropped off tools in loading dock then parked at different location. Checked in with build. eng, he said he reset unit but does not know Alarm it was off or. Found Room at 69° where t-stat is located. T-stat set for 68°. This unit serves Server Room & Room next door, where 24 th employees sit. Leaked out ductwork. Server Room returns air is just a transfer duct - does not go directly to unit. Unit operating pressures are low (1" suction 150" head due to cold return air & no water regulating valve. Supplying 45° chilled water. See work rec. below.							
<input type="checkbox"/> JOB INCOMPLETE <input checked="" type="checkbox"/> JOB COMPLETE							
*WORK RECOMMENDED: Unit does not have a water reg. valve on it, it needs one. Chilled water entering at 45° keeping head pressure low. Unit needs quote for unit in B above. Also quote to add supply duct from other unit to Server Room							
PURCHASE ORDER #	QTY.	MATERIALS USED					
<input type="checkbox"/> RECOVERY <input type="checkbox"/> QTY. OF DRUMS USED							
DATE	SERVICE MECHANIC	TRAVEL TIME	REGULAR TIME	OVERTIME	PREMIUM TIME	TOTAL	
3/3/08	Richard	:	3:5	:	:	:	
1/1		:	:	:	:	:	
1/1		:	:	:	:	:	
1/1		:	:	:	:	:	
1/1		:	:	:	:	:	
TOTALS:		:	:	:	:	:	

Signature of Customer or Agent

Service Mechanic

WHITE - OFFICE BLUE - MECHANIC GOLD - CUSTOMER

RECEIVED
MAR 04 2008