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80751

B 10 (Official Form 10) (12/08)

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 checked="" 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): Name and address where notices should be Telephone number: 404 995 1692	eMag Solutions LLC 11 Piedmont Center Suite 820 Atlanta, Georgia 30305	<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (if known) Filed on: _____
Name and address where payment should be sent (if different from above): Telephone number:		<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.
1. Amount of Claim as of Date Case Filed: \$ 1470.67 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.		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. <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.
2. Basis for Claim: <u>SERVICES PROVIDED</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>3261</u> 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: \$ _____		
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: <u>3/18/09</u> 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. <u>Brenda Abraham Brenda Abraham 3118/09</u>		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.



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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.

eMag Solutions, LLC
P.O. Box 64911
Baltimore, MD 21264-4911

CUSTOMER NUMBER	MEMO NUMBER
302214	705392
LOCATION NUMBER	INVOICE DATE
367- 25	25 NOV 2008

TAX ID
ALLFIRST / M&T BANK
BANK ACCT# 970193907
WIRE ABA# 022000046
ACH ABA# 022000046

DEBIT MEMO

Invoice Number: 533242

SOLD TO: 302214
ONSITE3 - VA
ATTN: GARRICK MUENCH
2011 CRYSTAL DRIVE
SUITE 200
ARLINGTON VA 22202

SHIP TO: PAGE 1
ONSITE3 - VA
ATTN: GARRICK MUENCH
2011 CRYSTAL DRIVE
SUITE 200
ARLINGTON VA 22202

ORDER ENTRY DATE	SHIP DATE	SHIPPED VIA/SHIPPING TERMS	ORDER	TERMS
25 NOV 2008	25 NOV 2008		COMPLETE PARTIAL X	DUE ON RECEIPT

PRODUCT	DESCRIPTION	QUANTITY	PRICE	AMOUNT
	ADD'L FREIGHT INCURRED	1.000	25.000	25.00
	FREIGHT BILLED AGAINST JOB NO 5429A TRK# 978477203215 RETURNED ORIGINAL MEDIA TO CLIENT.			
	TOTAL - MEMO		United States Dollars	25.00

TAX ID
ALLFIRST / M&T BANK
BANK ACCT# 970193907
WIRE ABA# 022000046
ACH ABA# 022000046

P.O. Box 64911
Baltimore, MD 21264-4911
TEL#

CUSTOMER NAME ONSITE3 - VA
CUSTOMER NO. 302214
LOCATION NO. 367- 25
CREDIT/DEBIT 705392
INVOICE AMOUNT 25 NOV 2008
25.00 USD

TAX ID 22-3646387
 ALLFIRST / M&T BANK
 BANK ACCT# 970193907
 WIRE ABA# 022000046
 ACH ABA# 022000046

eMag Solutions, LLC
 P.O. Box 64911
 Baltimore, MD 21264-4911
 Phone: 800-433-7720

CUSTOMER NUMBER	INVOICE NUMBER
302214	533046
LOCATION NUMBER	INVOICE DATE
367- 25	30 SEP 2008

SOLD TO: 302214			INVOICE		SHIP TO:		PAGE 1	
ONSITE3 - VA					ONSITE3 - VA			
ATTN: JEFFRY FEHRMAN					ATTN: JEFFRY FEHRMAN			
2011 CRYSTAL DRIVE					2011 CRYSTAL DRIVE			
SUITE 200					SUITE 200			
ARLINGTON VA 22202					ARLINGTON VA 22202			
ORDER ENTRY DATE	SHIP DATE	SHIPPED VIA/SHIPPING TERMS			ORDER	TERMS		
30 SEP 2008	30 SEP 2008	FEDX			COMPLETE PARTIAL	DUE ON RECEIPT		
		X						
PRODUCT	DESCRIPTION				QUANTITY	PRICE	AMOUNT	
	PURCHASE ORDER JEFFREY FEHRMAN							
A625009	RESTORATION - OTHER				4.000	350.000	1400.00	
	JOB NO 5342A							
	BACKUP TAPE RESTORATION SERVICES (PER TAPE)							
	TRK# 978477201451							
A660001	MEDIA - DVD				1.000	15.000	15.00	
	DVD 5342 DVD#1A 092908							
	FREIGHT AMOUNT						30.67	
	INVOICE FOR SALES ORDER 331797					SUB TOTALS	1445.67	
	NET DUE DATE OF 9/30/08							
	United States Dollars INVOICE						1,445.67	

We hereby certify these goods were produced in compliance with all applicable requirements of the Fair Labor Standards Act of 1938, as amended.

FOLD AND DETACH ON PERFORATION

TAX ID 22-3646387
 ALLFIRST / M&T BANK
 BANK ACCT# 970193907
 WIRE ABA# 022000046
 ACH ABA# 022000046

P.O. Box 64911
 Baltimore, MD 21264-4911
 Phone: 800-433-7720

CUSTOMER NAME ONSITE3 - VA
 CUSTOMER NO. 302214
 LOCATION NO. 367- 25
 INVOICE NO. 533046 30 SEP 2008
 INVOICE AMOUNT 1,445.67

USINVRP REMITTANCE PORTION - PLEASE ATTACH TO CHECK PAYMENT