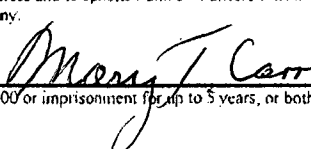


UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA Debtor against which claim is asserted: (Check only ONE debtor below)		PROOF OF CLAIM
<u>On-Site Sourcing, Inc.</u> 09-10816-RGM	<u>DocuForce Financial Corp.</u> 09-10817-RGM	<u>On-Site LA, Inc.</u> 09-10818-RGM
NOTE: This form should 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): Name and address where notices should be sent: Comptroller of Maryland 301 West Preston Street Room 409 Baltimore, MD 21201 <small>Telephone number:</small>		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ <small>(if known)</small> 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: \$ <u>631.00</u> 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 checked="" 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 checked="" 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)().
2. Basis for Claim: <u>sales tax 12/08</u> <small>(See instruction #2 on reverse side.)</small>		Amount entitled to priority: \$ 574.00
3. Last four digits of any number by which creditor identifies debtor: <u>06850180</u> 3a. Debtor may have scheduled account as: <u>06850180</u> <small>(See instruction #3a on reverse side.)</small>		*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.
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: \$ <u>57.00</u>		
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>5/20/09</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. 		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

1 JUN 02 2009

BMC GROUP

On-Site Sourcing, Inc.



00151

IN THE MATTER OF: : UNITED STATES BANKRUPTCY COURT
: EASTERN DISTRICT OF VIRGINIA
: ALEXANDRIA DIVISION
:
: CASE NUMBER: 09-10816
: jointly administered
: CHAPTER: 11

On Site Sourcing, Inc.
Debtor

PROOF OF CLAIM

Mary T. Carr, the undersigned, is an agent for the State of Maryland, Comptroller of Treasury, Room 409, State Office Building, 301 West Preston Street, Baltimore, Maryland 21201 duly authorized to make this Proof of Claim on behalf of the Comptroller.

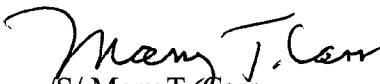
The above debtor is justly and truly indebted to the State of Maryland, Comptroller of the Treasury, as follows:

	Tax	Interest	Penalty	Total
Sales and Use Priority Unsecured	\$568.00	\$6.00	\$57.00	\$574.00 \$ 57.00
Withholding Priority Unsecured				
Total Claim	\$568.00	\$6.00	\$57.00	\$631.00

No judgment has been rendered on and no security interest is held for this claim, and this claim is not subject to any set-off or counterclaim.

Tax and Interest entitled to priority under Section 507 of the Bankruptcy Code.

COMPTROLLER OF MARYLAND

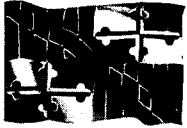
By: 
/S/ Mary T. Carr

410-767-1653

Date: May 20, 2009

CR Number: 06850180

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



COMPTROLLER
of MARYLAND
Serving the People

Peter Franchot
Comptroller

James T. Loftus
Director
Compliance Division

May 20, 2009

On-Site Sourcing, Inc., etal
Attn: BMC Group, Claims Processing
P.O. Box 2005
Chanhassen, MN 55317-2005

IN THE MATTER OF
On Site Sourcing, Inc.
Case Number: 09-10816 Jointly Administered
CR Number: 06850180

Dear Clerk:

Please file the enclosed claim on behalf of the Comptroller of Maryland.

Enclosed are an original proof of claim and a copy. Please file the original claim on behalf of the Comptroller of Maryland. Please date stamp the copy and return it to us.

Thank you for your cooperation.

Very truly yours,

Mary T. Carr
Revenue Specialist
Phone: 410-767-1653

MTC:nl
Enclosures