



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 to whom the debtor owes money or property): Sadish C. Marasinghe		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (if known)
Name and address where notices should be sent: Sadish C. Marasinghe 13537 Georgia Avenue Apt. 103 Silver Spring, MD 20906 Telephone number: 240-476-8227		
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>\$ 1,800.40</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 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
2. Basis for Claim: <u>Unpaid Vacation</u> (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)
3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		<input checked="" 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).
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: \$ _____		<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).
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:		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507(a)(____). Amount entitled to priority: <u>\$ 1,800.40</u> *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.
Date: 06/02/09	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. 	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

JUN 04 2009
 BMC GROUP

On-Site Sourcing, Inc.

 00167

On-Site Sourcing, Inc.
 2011 Crystal Drive
 Suite 200
 Arlington, VA 22202

CHECK NO: 0
 CHECK DATE: 4/30/2009
 PERIOD ENDING 4/18/2009

Sadish Marasinghe
 13537 Georgia Avenue
 Apartment 103
 Silver Spring, MD 20906

LOCATION: VA ALEX
 ID NUMBER: 200229
 BASE RATE: 20.00

STATUS EXEMPT
 FED: S 1
 ST1: S 1
 ST2:

TAX ADJUSTMENTS
 FED: ST:
 DI/UC:
 LOCAL:

IMPORTANT MESSAGE

HOURS AND EARNINGS					TAXES AND DEDUCTIONS			SPECIAL INFORMATION	
DESCRIPTION	CURRENT HOURS/UNITS	RATE	EARNINGS	Y-T-D EARNINGS	DESCRIPTION	CURRENT AMOUNT	Y-T-D AMOUNT		
Holiday Earnings	0.00	0.00	0.00	640.00	Federal Income	16.19	1571.48	BDAY	-8.00
Other Earnings	0.00	0.00	0.00	160.00	Medicare	8.95	215.88	SICK	47.33
Overtime Earnings	0.00	0.00	0.00	475.20	Social Security	38.28	923.09	VAC	90.02
Personal Holiday Ea	0.00	0.00	0.00	320.00	MD State Income	18.39	580.91		
Regular Earnings	34.00	0.00	680.00	13309.60	Montgomery	12.39	391.34		
Sick Earnings	0.00	0.00	0.00	720.00					
Vacation Earnings	0.00	0.00	0.00	333.00					
TOTAL H/E	34.00		680.00	15957.80	Total Taxes	94.20	3682.70		
PRE-TAX ITEMS					DEDUCTIONS			CURRENT NET PAY DISTRIBUTION	
401K			13.60	296.49	Vol Life Employ	0.00	40.80	C 003921735040	509.70
Dental			0.00	52.72					
One Net Platinum			0.00	579.12					
VA Parking			62.50	437.50					
TOTAL PRE-TAX			76.10	1365.83	Total Ded:	0.00	40.80	Total Dir Dep	509.70
TOTAL	34.00		603.90	14591.97					
EARNINGS	PRETAX	FIT TAXABLE	LESS TAXES	LESS DEDS	EQ NET PAY				
CURRENT	680.00	76.10	603.90	94.20	0.00	509.70			
Y-T-D	15957.80	1365.83	14591.97	3682.70	40.80	10868.47			



On-Site Sourcing, Inc.
 2011 Crystal Drive
 Suite 200
 Arlington, VA 22202

DATE: 4/30/2009
 ADVICE NO: 0

YOUR ENTIRE NET PAY HAS BEEN DEPOSITED IN YOUR BANK ACCOUNT(S). PLEASE REVIEW THE "CURRENT NET PAY DISTRIBUTION" SECTION OF YOUR STATEMENT OF EARNINGS FOR DETAILS.

Sadish Marasinghe
 13537 Georgia Avenue
 Apartment 103
 Silver Spring, MD 20906

NOT NEGOTIABLE