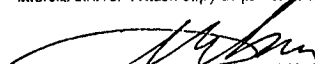


<b>UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA</b> Debtor against which claim is asserted: (Check only ONE debtor below)		<b>PROOF OF CLAIM</b>
On-Site Sourcing, Inc. 09-10816-RGM	DocuForce Financial Corp. 09-10817-RGM	On-Site LA, Inc. 09-10818-RGM
NOTE: This form should not be 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): <u>Nahom Tamir</u>		<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 notices should be sent: <u>Agol Seminary rd Apt 829</u> <u>Alexandria Va 22311</u> Telephone number: <u>703 920 0221</u>		
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>\$ 3028.50</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  <input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B) <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). <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: <u>\$ 3028.50</u>  <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.</small>
2. Basis for Claim: <u>Unpaid Vacation Time</u> (See instruction #2 on reverse side.)		
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.)		
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>05/29/2009</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

JUN 04 2009

BMC GROUP

On-Site Sourcing, Inc.



00169

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

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

Nahom A. Tamiru  
 4901 Seminary Road  
 Apartment 829  
 Alexandria, VA 22311

LOCATION: VALEX  
 ID NUMBER: 000347  
 BASE RATE: 33.65

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		
Bonus Earnings	0.00	0.00	0.00	1137.42	Federal Income	71.05	3965.79	PHOL	16.00
Regular Earnings	30.67	0.00	1032.13	23333.37	Medicare	14.06	353.97	SICK	42.98
Vacation Earnings	0.00	0.00	0.00	1009.58	Social Security	60.12	1513.49	VAC	98.30
					VA State Income	35.61	1152.85		
<b>TOTAL H/E</b>	<b>30.67</b>		<b>1032.13</b>	<b>25480.37</b>	<b>Total Taxes</b>	<b>180.84</b>	<b>6986.10</b>		

**PRE-TAX ITEMS**

**DEDUCTIONS**

**CURRENT NET PAY DISTRIBUTION**

Dental			0.00	52.72				C 004133854556	788.79
PHCS Platinum			0.00	579.12					
VA Parking			62.50	437.50					
<b>TOTAL PRE-TAX</b>			<b>62.50</b>	<b>1069.34</b>					
<b>TOTAL</b>	<b>30.67</b>		<b>969.63</b>	<b>24411.03</b>	<b>Total Ded:</b>	<b>0.00</b>	<b>0.00</b>	<b>Total Dir Dep</b>	<b>788.79</b>
<b>EARNINGS</b>	<b>PRETAX</b>	<b>FIT TAXABLE</b>	<b>LESS TAXES</b>	<b>LESS DEDS</b>	<b>EQ NET PAY</b>				
CURRENT	1032.13	62.50	969.63	180.84	0.00	788.79			
Y-T-D	25480.37	1069.34	24411.03	6986.10	0.00	17424.93			

Statement of Earnings, Deductions, and keep for your records. A Payment by Ceridian



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.

Nahom A. Tamiru  
 4901 Seminary Road  
 Apartment 829  
 Alexandria, VA 22311

**NOT NEGOTIABLE**