

b10  
6205250 REV 3/96

<b>United States Bankruptcy Court For The Eastern District of Virginia</b>	<b>PROOF OF CLAIM</b>
--	-----------------------

In re (Name of Debtor) <b>On-Site Sourcing, Inc.</b>	Case Number <b>09-10816</b>
---	--------------------------------

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. Section 503.

Name of Creditor (The person or other entity to whom the debtor owes money or property) Virginia Department of Taxation	___ Check if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy or statement giving particulars.  ___ Check if you never received any notices from the bankruptcy court in this case.  ___ Check if this address differs from the address on the envelope sent to you by the court.
Name and Address Where Notices Should Be Sent  <b>Virginia Department of Taxation P.O. Box 2156 Richmond, VA 23218-2156</b>	

THIS SPACE IS FOR COURT USE ONLY

Telephone No 804-649-2445

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:	Check here if this claim ___ replaces ___ amends } a previous filed claim dated: _____
--	--

<b>1. BASIS FOR CLAIM</b> ___ Goods Sold ___ Service performed ___ Money loaned ___ Personal injury/wrongful death <input checked="" type="checkbox"/> Taxes ___ Other (Describe briefly)	___ Retiree Benefits as defined in U.S.C. § 1114(a) ___ Wages, salaries, and commissions (fill out below) Your social security number _____ Unpaid compensation for services performed from _____ (date) to _____ (date)
---	--

<b>2. DATE DEBT WAS INCURRED</b> See Attached	<b>3. IF COURT JUDGEMENT, DATE OBTAINED</b> N/A
--	--

**4. CLASSIFICATION OF CLAIM.** Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority. (2) Unsecured Priority. (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM.

___ SECURED CLAIM \$ <u>0.00</u> Attach evidence of perfection of security interest Brief Description of Collateral: ___ Real Estate ___ Motor Vehicle ___ Other (Describe)  Amount of arrearage and other charges included in secured claim above if and \$ _____  ___ UNSECURED NONPRIORITY CLAIMS \$ <u>0.00</u> A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.	<input checked="" type="checkbox"/> UNSECURED PRIORITY CLAIM \$ <u>11,066.81</u> Specify the priority of the claim. ___ Wages, salaries, or commissions (up to \$2,000, earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3)) ___ Contribution to an employee benefit plan - 11 U.S.C. § 507(a)(4) ___ Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6) <input checked="" type="checkbox"/> Taxes or penalties of government units - 11 U.S.C. § 507(a)(7) ___ Other - 11 U.S.C. §§ 507(a)(2), (a)(5) - (Describe briefly)
--	--

**5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED:**

<b>\$ 0.00</b> (Unsecured)	<b>\$ 0.00</b> (Secured)	<b>\$ 11,066.81</b> (Priority)	<b>\$ 11,066.81</b> (Total)
-------------------------------	-----------------------------	-----------------------------------	--------------------------------

\_\_\_ Check if claim includes prepetition charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

<b>6. CREDITS AND SETOFFS:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor. <b>7. SUPPORTING DOCUMENT:</b> Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgements, or evidence or security interest. If the documents are not available, explain. If the documents are voluminous, attach a summary. <b>8. TIME-STAMPED COPY:</b> To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.	THIS SPACE IS FOR COURT USE ONLY
--	----------------------------------

Date:  <b>November 10, 2009</b>	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any).  <b>/S/ Mark K. Ames</b> Taxing Authority Consulting Services, P.C., 804-649-2445, <a href="mailto:info@taxva.com">info@taxva.com</a>
---------------------------------------	---

Official Form 10

**B-10A**

VIRGINIA DEPARTMENT OF TAXATION  
 P.O. BOX 2156  
 RICHMOND, VIRGINIA 23218-2156

SUMMARY OF UNPAID TAXES ASSESSED IN THE NAME OF

**NAME On-Site Sourcing, Inc.**

**CASE NO. 09-10816**

\*Priority amount represents priority tax and interest due as of the petition date.

†Secured amount is claimed as secured to the extent of any interest of the debtor(s) in real property; otherwise claimed as priority.

<u>Acct. Name/Tax Type</u>	<u>Status</u>	<u>Tax Period(s)</u>	<u>Secured Amount†</u>	<u>Priority Amount*</u>	<u>Unsecured Amount</u>	<u>Total</u>
<b><u>SECURED TAXES</u></b>						
<b><u>PRIORITY TAXES</u></b>						
Sales	ASMNT	Jan 2009	\$	11,035.56	\$ -	\$ 11,035.56
Litter	ASMNT	2008	\$	31.25	\$ -	\$ 31.25
					\$	-
					\$	-
					\$	-
<b><u>UNSECURED NON PRIORITY TAXES</u></b>						
					\$	-
					\$	-
<b>TOTAL</b>			<b>\$</b>	<b>-</b>	<b>\$</b>	<b>11,066.81</b>
			<b>\$</b>	<b>11,066.81</b>	<b>\$</b>	<b>-</b>
					<b>\$</b>	<b>11,066.81</b>

# Eastern District of Virginia Claims Register

[09-10816-RGM On-Site Sourcing, Inc.](#) **Converted** 09/28/2009

**Judge:** Robert G. Mayer

**Chapter:** 7

**Office:** Alexandria

**Last Date to file claims:**

**Trustee:** Kevin R. McCarthy

**Last Date to file (Govt):**

<i>Creditor:</i> (9300768) Commonwealth of Virginia Department of Taxation PO Box 2156 Richmond, VA 23218	<b>Claim No: 64</b> <i>Original Filed</i> Date: 11/10/2009 <i>Original Entered</i> Date: 11/10/2009	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Dixon, Amanda <i>Modified:</i> 11/10/2009
---	---	--

Unsecured claimed:	\$0.00
Priority claimed:	\$11066.81
<b>Total claimed:</b>	<b>\$11066.81</b>

*History:*

[Details](#) [64-1](#) 11/10/2009 Claim #64 filed by Commonwealth of Virginia, total amount claimed: \$11066.81 (Chandler, Kimberly )

*Description:* (64-1) sales jan 09 and litter 08 asmnt taxes

*Remarks:* (64-1) kjc

## Claims Register Summary

**Case Name:** On-Site Sourcing, Inc.

**Case Number:** 09-10816-RGM

**Chapter:** 7

**Date Filed:** 02/04/2009

**Total Number Of Claims:** 1

	Total Amount Claimed	Total Amount Allowed
<b>Unsecured</b>	\$0.00	
<b>Secured</b>		
<b>Priority</b>	\$11066.81	
<b>Unknown</b>		
<b>Administrative</b>		
<b>Total</b>	<b>\$11066.81</b>	<b>\$0.00</b>