

UNITED STATES BANKRUPTCY COURT

PROOF OF CLAIM

Name of Debtor: Opus West Corporation

Case Number: 09-343510-hdh-11

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): Wilson Electric Services Corp. dba Netsian

Name and address where notices should be sent:
Wilson Electric Services Corp. dba Netsian
600 E. Gilbert Drive - Tempe, AZ 85281

Telephone number:
480-505-6535

Check this box to indicate that this claim amends a previously filed claim.
FILED
NOV 23 2009
TAWANA C. MARSHALL, CLERK
U.S. BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS

Name and address where payment should be sent (if different from above):

same as above

RECEIVED

NOV 30 2009

Telephone number:

BMC GROUP

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.
 Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 998.00

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.

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: goods sold, services performed
(See instruction #2 on reverse side.)

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.)

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: Real Estate Motor Vehicle 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: \$ _____

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

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).

Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).

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.

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: 8/3/09

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.



Margaret Lonawell - Margaret Lonawell - AR Collections

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.

600 E. Gilbert Drive
Tempe, AZ 85281

Wilson Electric Services Corp.
600 E. Gilbert Dr.
Tempe, AZ 85281

WE *Wilson Electric* **NETSIAN**
TECHNOLOGIES GROUP
WILSON ELECTRIC SERVICES CORP.
PHONE: 480-505-6500 FAX: 480-505-6900

Invoice 37193

| | |
|--|---|
| Bill to: OPUS WEST CONSTRUCTION 2555 E CAMELBACK ROAD SUITE #800 PHOENIX, AZ 85016 | Job: 072100686 HERMOSA VILLAGE SENIOR 6350 E. SPEEDWAY BLVD TUCSON, AZ 85016 |
|--|---|

| | |
|--------------------------------------|---------------------------------|
| Invoice #: 37193 Date: 04/20/09 | Customer P.O. #: |
| Payment Terms: Net 30 Days | Salesperson: MICHAEL J. SPENCER |
| Customer Code: OPUWES | |

Remarks: FROM DRAW REQUEST BILLING ENTRY

| Quantity | Description | U/M | Unit Price | Extension |
|----------|--------------------------------|-----|------------------|---------------|
| | 007 CO#5 KNOCK BOX FOR GATE OP | | | 998.00 |
| | | | Subtotal: | 998.00 |
| | | | Total: | 998.00 |

CB



OPUS West Construction Corporation
SUBCONTRACT CHANGE ORDER

Change Order Date: 03/04/2009

Change Order #: 5

To Subcontract Agreement dated: 09/13/2007

Audio, Video, and Security Systems

CON-10305.00-41

11500

TO: Netsian Technologies Group
1305 W 1st St
Tempe, AZ 85281

PROJECT: Hermosa Village Senior Living
6350 E. Speedway Blvd.
Tucson, AZ 85710

CHANGE DETAILS

| Item | Description | Amount |
|------|--|----------|
| 1 | Subcontractor to furnish labor and material to supply and install one (1) knox box with associated gate operation system, as required by the Tucson Fire Department. | \$998.00 |
| | | \$998.00 |

SCHEDULE

Completion date of original contract will not be adjusted, unless noted herein.

CONTRACT SUMMARY

| Cost Code | Previous Amount | This Change Order | Current Contract Amount |
|-------------------------|-----------------|-------------------|-------------------------|
| 10305.00-K20-16340.00-S | \$82,843.00 | \$998.00 | \$83,841.00 |
| 10305.00-K20-16650.00-S | \$148,341.00 | \$0.00 | \$148,341.00 |
| | \$231,184.00 | \$998.00 | \$232,182.00 |

| | |
|--|--------------|
| Original Contract Amount..... | \$223,331.00 |
| Previously Approved Change Orders..... | \$7,853.00 |
| Amount this Change Order..... | \$998.00 |
| Contract Amount to Date..... | \$232,182.00 |

ACKNOWLEDGEMENT

Please sign and return all original copies

Netsian Technologies Group

OPUS West Construction Corporation

Printed Name _____ Date _____

Chad Buck
Printed Name _____ Date _____

Reference this change order number on all Application for Payment documents.

The work covered by this Subcontract Change Order will be performed under the same terms and conditions as those in the Subcontract Agreement. Subcontractor agrees this Subcontract Change Order is inclusive of all Subcontractor's claims for additional compensation for work heretofore authorized or performed beyond the scope of the Subcontract Agreement as amended this date. No other claims will be accepted by Contractor.