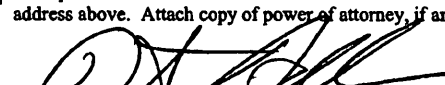



UNITED STATES BANKRUPTCY COURT		PROOF OF CLAIM
Name of Debtor: Axis Onshore, L.P.		Case Number: 10-33569
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Advanced Micro Technologies, Inc.,		<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: 10 Burnes Street Natchez, MS 39120 Telephone number: 601-442-8413		
Name and address where payment should be sent (if different from above): (Same as above) 10 Burnes Street Natchez, MS 39120 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>8,081.09</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 type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) 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 \$2,600* 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: \$ _____
2. Basis for Claim: <u>Goods sold and services performed</u> (See instruction #2 on reverse side.)		*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
3. Last four digits of any number by which creditor identifies debtor: <u>9624</u> 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 checked="" type="checkbox"/> Other Describe: _____ Value of Property: \$ <u>2,801.09</u> Annual Interest Rate <u>18</u> % <u>does not include interest accrued.</u> Amount of arrearage and other charges as of time case filed included in secured claim, If any: \$ <u>8,081.09</u> Basis for perfection: <u>Construction possession</u> Amount of Secured Claim: \$ <u>2,801.09</u> Amount Unsecured: \$ <u>5,280.00</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>7-23-2010</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.  BRENT ADKISON U.P.		FOR COURT USE ONLY  TriDimension 00082

ADVANCED MICRO TECHNOLOGIES, INC.

Invoice 6309

10 Burnes Street
 Natchez, MS 39120 USA
 Telephone: 601/442-8413

Customer 0301

Bill To:

Axis Oil
 405 Texas Street
 Vidalia, LA 71373
 USA

Ship To:

Axis Oil
 405 Texas Street
 Vidalia, LA 71373
 USA

Date	Ship Via	F.O.B.	Terms				
06/14/10	UPS	Origin	Due Upon Receipt				
Purchase Order Number	Order Date	Salesperson	Our Order Number				
Verbal	06/14/10	BMA	5338				
Qty	Ship	B.O.	Item Number	Description	Tax	Unit Price	Amount
5	5	0	NTWC-31224	Category 3 Telephone Insert 6 Conductor		7.50	37.50
52	52	0	NTWC-31219	Cat 6 Gig Channel Minijack Bl/Rd/Wh/Bk cc		10.65	553.80
7	7	0	NTWC-31220	Mini Com Exec Faceplate 2 Position		9.50	66.50
20	20	0	NTWI-32823	Category 6 Giga Channel Patch Cable 7 Ft Bu/Re/Bl/Wh		14.50	290.00
1242	1242	0	NTWI-40206	Category 6 24 AWG 4 Pair Solid N/S CMP Blue		0.79	981.18
2	2	0	NTWH-31903	Mini Com Modular 24 Port Patch Panel		86.50	173.00
1	1	0	ZSHP-99001	Shipping		48.91	48.91
44.0	44.0	0.0	XLAB-96501	Labor		120.00	5280.00

See details attached for Labor. Thank you.

Walter Murray
 Office Manager
 Axis Onshore, LP

NonTaxable Subtotal	0.00
Taxable Subtotal	7430.89
Tax	650.20
Total Invoice	8081.09

Northern District of Texas Claims Register

10-33569-sgj11 Axis Onshore, LP

Judge: Stacey G. Jernigan **Chapter:** 11
Office: Dallas **Last Date to file claims:** 07/28/2010
Trustee: **Last Date to file (Govt):**

<i>Creditor:</i> (13250265) ADVANCED MICRO TECHNOLOGIES, INC 10 BURNES STREET NATCHEZ, MS 39120	Claim No: 40 <i>Original Filed</i> Date: 07/26/2010 <i>Original Entered</i> Date: 07/26/2010	<i>Status:</i> Filed by: CR Entered by: Ecker, C. Modified:
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Unsecured claimed: \$5280.00 Secured claimed: \$2801.09 Total claimed: \$8081.09

History:
Details 40-1 07/26/2010 Claim #40 filed by ADVANCED MICRO TECHNOLOGIES, INC, total amount claimed: \$8081.09 (Ecker, C.)

Description:
Remarks:

Claims Register Summary

Case Name: Axis Onshore, LP
Case Number: 10-33569-sgj11
Chapter: 11
Date Filed: 05/21/2010
Total Number Of Claims: 1

	Total Amount Claimed	Total Amount Allowed
Unsecured	\$5280.00	
Secured	\$2801.09	
Priority		
Unknown		
Administrative		
Total	\$8081.09	\$0.00