

UNITED STATES BANKRUPTCY COURT District of Delaware

PROOF OF CLAIM

Name of Debtor: *Cynergy Data*

Case Number:

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):

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent:

Court Claim Number: _____ (If known)

Filed on: _____

*Basin Haulage Inc.
P.O. Box 74058
Middle Village N.Y. 11379*

RECEIVED
OCT 08 2009

KURTZMAN CARSON CONSULTANTS

Telephone number:
(718) 366-6513

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

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.

Telephone number:

1. Amount of Claim as of Date Case Filed: \$ 332.26

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.

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.

Specify the priority of the claim.

2. Basis for Claim: *Removal of Rubbish*
(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: 1707

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).

3a. Debtor may have scheduled account as: _____
(See instruction #3a on reverse side.)

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

4. Secured Claim (See instruction #4 on reverse side.)

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).

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

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

Nature of property or right of setoff: Real Estate Motor Vehicle Other
Describe:

Other - Specify applicable paragraph of 11 U.S.C. §507 (a)().

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.

Amount entitled to priority:

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.)

*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.

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

Date: 9/24/09

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.

Stephen Spallino - President

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.





INVOICE

BASIN HAULAGE INC.
 PO BOX 790058
 MIDDLE VILLAGE, NY 11379
 (718) 366-6513
 BIC# 00265

NOTICE TO CUSTOMERS - The maximum rate that may be charged by your trade waste removal business is regulated by the NYC Business Integrity Commission (BIC). The current maximum rates are \$15.89 per cubic yard and \$10.42 per 100 pounds. If you should have a question or complaint concerning waste removal, contact the NYC BIC.

Invoice # 0061707-IN Invoice Date 8/31/2009

Bill To

Service Address

30-30 47TH AVENUE

CYNERGY DATA
 30-30 47TH AVENUE
 9TH FLOOR
 LONG ISLAND CITY, NY 11101

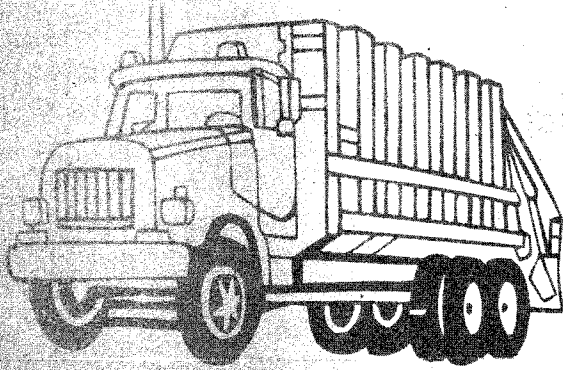
Cust # 0072610

* THIS IS A DUPLICATE INVOICE*

Please detach here and return with your payment. Thank You.

Amount Enclosed

Date	Description	Qty.	Rate	Total
8/31/2009	YARDS LOOSE 8/4/09	1.500	12.000	18.00
8/31/2009	YARDS LOOSE 8/11/09	3.000	12.000	36.00
8/31/2009	YARDS LOOSE 8/13/09	1.500	12.000	18.00
8/31/2009	YARDS LOOSE 8/20/09	1.500	12.000	18.00
8/31/2009	YARDS LOOSE 8/25/09	1.500	12.000	18.00
8/31/2009	YARDS LOOSE 8/27/09	1.500	12.000	18.00



OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS
137.18	195.08	0.00	0.00

Net Invoice:	126.00
Sales Tax:	11.18
INVOICE TOTAL:	137.18
PRIOR BALANCE:	332.26

Please Pay INVOICE TOTAL

BASIN HAULAGE INC
 PO BOX 790058
 MIDDLE VILLAGE, NY 11379

Cust. #: 0072610
 Service Address: 30-30 47TH AVENUE

Invoice #: 0061707

~~469.44~~



INVOICE

BASIN HAULAGE INC.
 PO BOX 790058
 MIDDLE VILLAGE, NY 11379
 (718) 366-6513
 BIC# 00265

NOTICE TO CUSTOMERS - The maximum rate that may be charged by your trade waste removal business is regulated by the NYC Business Integrity Commission (BIC). The current maximum rates are \$15.89 per cubic yard and \$10.42 per 100 pounds. If you should have a question or complaint concerning waste removal, contact the NYC BIC.

Invoice # 0061010-IN Invoice Date 7/31/2009

Bill To

Service Address
30-30 47TH AVENUE

CYNERGY DATA
 30-30 47TH AVENUE
 9TH FLOOR
 LONG ISLAND CITY, NY 11101

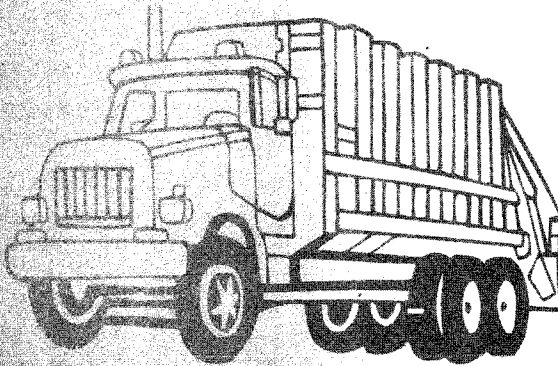
Cust # 0072610

* THIS IS A DUPLICATE INVOICE*

Please detach here and return with your payment. Thank You.

Amount Enclosed

Date	Description	Qty.	Rate	Total
7/31/2009	YARDS LOOSE 7/7/09	3.000	12.000	36.00
7/31/2009	YARDS LOOSE 7/9/09	3.000	12.000	36.00
7/31/2009	YARDS LOOSE 7/14/09	1.500	12.000	18.00
7/31/2009	YARDS LOOSE 7/16/09	1.500	12.000	18.00
7/31/2009	YARDS LOOSE 7/21/09	1.500	12.000	18.00
7/31/2009	YARDS LOOSE 7/23/09	1.500	12.000	18.00
7/31/2009	YARDS LOOSE 7/28/09	1.500	12.000	18.00
7/31/2009	YARDS LOOSE 7/30/09	1.500	12.000	18.00



OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS
137.18	195.08	0.00	0.00

Net Invoice: 180.00
 Sales Tax: 15.08
INVOICE TOTAL: 195.08
 PRIOR BALANCE: ~~332.26~~

Please Pay INVOICE TOTAL

BASIN HAULAGE INC
 PO BOX 790058
 MIDDLE VILLAGE, NY 11379

Cust. #: 0072610
 Service Address: 30-30 47TH AVENUE

Invoice #: 0061010

~~527.34~~