

RECEIVED

OCT 27 2017

LEGAL SERVICES

Filed: USBC - District of Delaware
CST Industries Holdings Inc.
17-11292 (BLS)



Fill in this information to identify the case:

Debtor 1 CST Power & Construction, Inc

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: District of Delaware

Case number 17-11294

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?

DISA, Inc

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

☒ No

☐ Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

DISA, Inc

Name

10900 Corporate Centre Dr, STE#250

Number Street

Houston

TX

77041

City

State

ZIP Code

Contact phone 281-673-2470

Contact email kristina.lin@disa.com

Where should payments to the creditor be sent? (if different)

Name

Number Street

City

State

ZIP Code

Contact phone _____

Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?

☒ No

☐ Yes. Claim number on court claims registry (if known) _____

Filed on _____

MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No

☐ Yes. Who made the earlier filing? _____

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☐ No
☒ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 2 6 4 4

7. How much is the claim? \$ 1,262.85 Does this amount include interest or other charges?
☒ No
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.
Drug testing services

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.
Nature of property:
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ _____

☐ Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

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

\$ _____

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

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

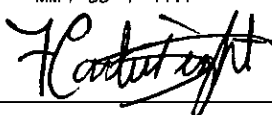
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 10/19/2017
MM / DD / YYYY



Signature

Print the name of the person who is completing and signing this claim:

Name	<u>Fredoria Cartwright</u>		
	First name	Middle name	Last name
Title	<u>Controller</u>		
Company	<u>DISA, Inc</u>		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	<u>10900 Corporate Centre Dr, STE#250</u>		
	Number	Street	
	<u>Houston</u>		<u>TX 77041</u>
	City	State	ZIP Code
Contact phone	<u>281-673-2400</u>	Email	<u>kristina.lin@disa.com</u>

United States Bankruptcy Court
District of Delaware

Notice of Bankruptcy Case Filing

A bankruptcy case concerning the debtor(s) listed below was filed under Chapter 11 of the United States Bankruptcy Code, entered on 06/09/2017 at 7:09 PM and filed on 06/09/2017.

CST Power & Construction, Inc.
879 West 190th Street
Suite 1100
Gardena, CA 90248
Tax ID / EIN: 95-2319480
fka Temcor
fka CST Covers Industries, Inc.
fka CST Power
fka Conservatek



The case was filed by the debtor's attorney:

Jeremy William Ryan
Potter Anderson & Corroon LLP
1313 N. Market Street
P.O Box 951
Wilmington, DE 19801
302 984-6108

The case was assigned case number 17-11294-BLS to Judge Brendan Linehan Shannon.

In most instances, the filing of the bankruptcy case automatically stays certain collection and other actions against the debtor and the debtor's property. Under certain circumstances, the stay may be limited to 30 days or not exist at all, although the debtor can request the court to extend or impose a stay. If you attempt to collect a debt or take other action in violation of the Bankruptcy Code, you may be penalized. Consult a lawyer to determine your rights in this case.

If you would like to view the bankruptcy petition and other documents filed by the debtor, they are available at our *Internet* home page www.deb.uscourts.gov or at the Clerk's Office, 824 Market Street, 3rd Floor, Wilmington, DE 19801.

You may be a creditor of the debtor. If so, you will receive an additional notice from the court setting forth important deadlines.

Una O'Boyle
Clerk, U.S. Bankruptcy
Court

AGED TRIAL BALANCE WITH OPTIONS - DETAIL

DISA Global Solutions, Inc.
 Receivables Management

Ranges:

Customer ID: 022644-62750 - 022644-1	User-Defined 1: First - Last	ZIP Code: First - Last	Posting Date: First - Last	Exclude: Zero Balance, No Activity, Fully
Customer Class: First - Last	Account Type: All	State: First - Last	Short Name: First - Last	
Salesperson ID: First - Last	Customer Name: First - Last	Telephone: First - Last	Print Currency In: Functional (Z-US\$)	Customer: by Customer Name
Sales Territory: First - Last	* - Indicates an unposted credit document that has been applied.			Document: by Document Number

Customer: 022644-62750		Name: CST Power & Construction, Inc.		Cust Class: DRUGTEST		Aged As of: 9/15/2017		
Contact:	Theresa Dion	Phone:	(713) 290-9944 Ext. 0000	Credit:	Unlimited	Salesperson: 8010		
Document Number	Type	Date	Amount	Current	31 - 60 Days	61 - 90 Days	91 - 120 Days	120 and over
1126888	SLS	5/15/2017	\$348.35					\$348.35
1136732	SLS	5/31/2017	\$91.50				\$91.50	
1173174	SLS	8/31/2017	\$91.50	\$91.50				
1176733	SLS	9/15/2017	\$51.10	\$51.10				
1184587	SLS	9/30/2017	\$396.75	\$396.75				
1189078	SLS	10/15/2017	\$134.10	\$134.10				
PYMNT846204	PMT	6/8/2017	(\$151.50)				(\$151.50)	
				Current	31 - 60 Days	61 - 90 Days	91 - 120 Days	120 and over
Totals:				\$673.45	\$0.00	\$0.00	(\$60.00)	\$348.35
Grand Totals:				1	\$673.45	\$0.00	\$0.00	(\$60.00)
								\$348.35
								\$961.80



DISA Inc.

Invoice 1126888

CST Covers
Attention: Jaime Brown
879 W. 190 Street, Suite 110
Gardena, CA 90248

Invoice Date : May 15, 2017
Account Terms : NET 30
Account Number: 022644 - 62750
Client Name : CST Power & Construction, Inc. - CST
Covers

Summary of Charges

2	Alcohol Handling Fee	\$ 10.00
2	Alcohol Testing	\$ 50.00
16	Background Screen Services	\$ 127.35
3	Drug Test	\$ 116.00
3	Urine Collection	\$ 45.00
Total Amount Due		\$ 348.35

Return this page with payment for proper credit

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

*Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.
Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.*



DISA Inc.

Invoice 1126888

CST Covers
Attention: Jaime Brown
879 W. 190 Street, Suite 110
Gardena, CA 90248

Invoice Date : May 15, 2017
Account Terms : NET 30
Account Number: 022644 - 62750
Client Name : CST Power & Construction, Inc. - CST
Covers

Summary of Charges

2	Alcohol Handling Fee	\$ 10.00
2	Alcohol Testing	\$ 50.00
16	Background Screen Services	\$ 127.35
3	Drug Test	\$ 116.00
3	Urine Collection	\$ 45.00
Total Amount Due		\$ 348.35

Retain this page for your records

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.

Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1126888

Client ID 22644

CST Covers - 62750 (Covers)

No PO/Job Number Specified

Background Screening

Monday, May 1, 2017

XXXXX6330 MORALES,CRESENSIO

Order#:	1566374	SafetyNet™ Criminal Jurisdiction Search	\$ 8.00
Order#:	1566374	Criminal History Federal Search (Willis, TX,)	\$ 12.00
Order#:	1566374	Patriot Act Search	\$ 8.00
Order#:	1566374	SSN Validity Check	\$ 2.00
Order#:	1566374	Criminal History County (CO, OTERO)	\$ 12.00
Order#:	1566374	County Court Fee	\$ 0.75
Order#:	1566374	Criminal History County (CO, PROWERS)	\$ 12.00
Order#:	1566374	County Court Fee	\$ 0.75
Order#:	1566374	Criminal History County (TX, ECTOR)	\$ 12.00
Order#:	1566374	Criminal History County (TX, HARRIS)	\$ 12.00
Order#:	1566374	Criminal History County (TX, MONTGOMERY)	\$ 12.00
Order#:	1566374	Criminal History County (TX, WALKER)	\$ 12.00
Order#:	1566374	Criminal History State (CO,)	\$ 10.00
Order#:	1566374	State Court Fee	\$ 0.75
Order#:	1566374	Criminal History State (TX,)	\$ 10.00
Order#:	1566374	State Court Fee	\$ 3.10

XXXXX6330 Total \$ 127.35

Monday, May 1, 2017 Total \$ 127.35

Test Result

Monday, May 1, 2017

XXXXX4368 DEARING,JORGE

CCF:	2035617092	PHMSA Contractor Compliance Policy-CST Power & Con Urine Collection Only	\$ 15.00
CCF:	2035617092	DOT Panel + MDMA & 6AM Drug Test In Network Collected at TX295	\$ 38.00

XXXXX4368 Total \$ 53.00

Monday, May 1, 2017 Total \$ 53.00

Friday, May 12, 2017

XXXXX6330 MORALES,CRESENSIO

CCF:	2038844778	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol EBT Test Collected at TX295	\$ 25.00
CCF:	2038844778	DCCHA Consortium Policy - CST Power & Construction, Inc. Non-DOT Urine Collection	\$ 15.00
CCF:	2038844778	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol Handling Fee	\$ 5.00



DISA Inc.

Invoice 1126888

CCF: 2038844778	Urine 10 Panel OP300:A300:M20:MDA:6AM:ExOP BrAlc Drug Test In Network Collected at TX295	\$ 39.00
XXXXXX6330 Total		\$ 84.00
XXXXXX9330 ALCARAZ,DARIO		
CCF: 2038844779	Urine 10 Panel OP300:A300:M20:MDA:6AM:ExOP BrAlc Drug Test In Network Collected at TX295	\$ 39.00
CCF: 2038844779	DCCHA Consortium Policy - CST Power & Construction, Inc. Non-DOT Urine Collection	\$ 15.00
CCF: 2038844779	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol Handling Fee	\$ 5.00
CCF: 2038844779	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol EBT Test Collected at TX295	\$ 25.00
XXXXXX9330 Total		\$ 84.00
Friday, May 12, 2017 Total		\$ 168.00
No PO/Job Number Specified Total		\$ 348.35
CST Covers Total		\$ 348.35
Invoice Total		\$ 348.35



DISA Inc.

Invoice 1136732

CST Covers
Attention: Jaime Brown
879 W. 190 Street, Suite 110
Gardena, CA 90248

Invoice Date : May 31, 2017
Account Terms : NET 30
Account Number: 022644 - 62750
Client Name : CST Power & Construction, Inc. - CST
Covers

Summary of Charges

1	Alcohol Handling Fee	\$ 5.00
1	Alcohol Testing	\$ 25.00
1	Drug Test	\$ 39.00
1	Employee Setup Fee	\$ 7.50
1	Urine Collection	\$ 15.00
Total Amount Due		\$ 91.50

Return this page with payment for proper credit

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.

Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1136732

CST Covers
Attention: Jaime Brown
879 W. 190 Street, Suite 110
Gardena, CA 90248

Invoice Date : May 31, 2017
Account Terms : NET 30
Account Number: 022644 - 62750
Client Name : CST Power & Construction, Inc. - CST
Covers

Summary of Charges

1	Alcohol Handling Fee	\$ 5.00
1	Alcohol Testing	\$ 25.00
1	Drug Test	\$ 39.00
1	Employee Setup Fee	\$ 7.50
1	Urine Collection	\$ 15.00
Total Amount Due		\$ 91.50

Retain this page for your records

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.

Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1136732

Client ID 22644

CST Covers - 62750 (Covers)

No PO/Job Number Specified

Test Result

Thursday, May 25, 2017

XXXXX7050 GARCIA,JOSE

CCF: 2038844780	Urine 10 Panel OP300;A300;M20;MDA;6AM:ExOP BrAlc Drug Test In Network Collected at TX295	\$ 39.00
CCF: 2038844780	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol Handling Fee	\$ 5.00
CCF: 2038844780	DCCHA Consortium Policy - CST Power & Construction, Inc. Non-DOT Urine Collection	\$ 15.00
CCF: 2038844780	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol EBT Test Collected at TX295	\$ 25.00
CCF: 2038844780	DCCHA Consortium Policy - CST Power & Construction, Inc. Employee Member Setup Fee	\$ 7.50

XXXXX7050 Total \$ 91.50

Thursday, May 25, 2017 Total \$ 91.50

No PO/Job Number Specified Total \$ 91.50

CST Covers Total \$ 91.50

Invoice Total \$ 91.50

AGED TRIAL BALANCE WITH OPTIONS - DETAIL

DISA Global Solutions, Inc.
 Receivables Management

Ranges:

Customer ID: 022644-70648 - 022644-	User-Defined 1: First - Last	ZIP Code: First - Last	Posting Date: First - Last	Exclude: Zero Balance, No Activity, Fully
Customer Class: First - Last	Account Type: All	State: First - Last	Short Name: First - Last	Customer: by Customer Name
Salesperson ID: First - Last	Customer Name: First - Last	Telephone: First - Last	Print Currency In: Functional (Z-US\$)	Document: by Document Number
Sales Territory: First - Last	* - Indicates an unposted credit document that has been applied.			

Customer: 022644-70648		Name: CST Power & Construction, Inc.		Cust Class: DRUGTEST		Aged As of: 9/15/2017		
Contact:	Jaime Brown	Phone:	(936) 441-2780 Ext. 0000	Credit:	Unlimited	Salesperson: 8010		
Document Number	Type	Date	Amount	Current	31 - 60 Days	61 - 90 Days	91 - 120 Days	120 and over
1126135	SLS	5/15/2017	\$572.25					\$572.25
1135590	SLS	5/31/2017	\$250.75				\$250.75	
1167498	SLS	8/15/2017	\$178.00		\$178.00			
1170265	SLS	8/31/2017	\$695.22	\$695.22				
1176734	SLS	9/15/2017	\$531.03	\$531.03				
1183023	SLS	9/30/2017	\$194.85	\$194.85				
1187718	SLS	10/15/2017	\$82.50	\$82.50				
				Current	31 - 60 Days	61 - 90 Days	91 - 120 Days	120 and over
Totals:				\$1,503.60	\$178.00	\$0.00	\$250.75	\$572.25
				Current	31 - 60 Days	61 - 90 Days	91 - 120 Days	120 and over
Grand Totals:				1	\$1,503.60	\$178.00	\$0.00	\$250.75
								\$572.25
								\$2,504.60



DISA Inc.

Invoice 1126135

CST Storage - Construction
Attention: Jaime Brown
498 N Loop 336 East
Conroe, TX 77301

Invoice Date : May 15, 2017
Account Terms : NET 30
Account Number: 022644 - 70648
Client Name : CST Power & Construction, Inc. - CST
Storage - Construction

Summary of Charges

4	Alcohol Handling Fee	\$ 20.00
4	Alcohol Testing	\$ 96.00
4	Collection - Oral Fluid	\$ 70.00
5	Drug Test	\$ 355.00
1	Employee Setup Fee	\$ 7.50
120	Forms Shipping	\$ 0.00
1	Hair Collection	\$ 20.00
1	Psychomedics Collection Site Handling Fee	\$ 3.75
Total Amount Due		\$ 572.25

Return this page with payment for proper credit

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.

Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1126135

CST Storage - Construction
Attention: Jaime Brown
498 N Loop 336 East
Conroe, TX 77301

Invoice Date : May 15, 2017
Account Terms : NET 30
Account Number: 022644 - 70648
Client Name : CST Power & Construction, Inc. - CST
Storage - Construction

Summary of Charges

4	Alcohol Handling Fee	\$ 20.00
4	Alcohol Testing	\$ 96.00
4	Collection - Oral Fluid	\$ 70.00
5	Drug Test	\$ 355.00
1	Employee Setup Fee	\$ 7.50
120	Forms Shipping	\$ 0.00
1	Hair Collection	\$ 20.00
1	Psychomedics Collection Site Handling Fee	\$ 3.75
Total Amount Due		\$ 572.25

Retain this page for your records

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.

Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1126135

Client ID 22644

CST Storage - Construction - 70648 (TBD)

No PO/Job Number Specified

Orders

Quantity	Description	Price
Thursday, May 4, 2017		
20.00	DOT Drug (Federal CCF's) 05/04/2017	\$ 0.00
20.00	Non-DOT Drug (Forensic CCF's) 05/04/2017	\$ 0.00
20.00	Non-DOT Drug (Forensic CCF's) 05/04/2017	\$ 0.00
20.00	Non-DOT Drug (Forensic CCF's) 05/04/2017	\$ 0.00
40.00	Non-DOT Alcohol Testing Form 05/04/2017	\$ 0.00
Total Amount		\$ 0.00
		\$0.00

Test Result

Thursday, April 27, 2017

XXXXX2363 ORTIZ,GILBERT

CCF: X555356	DCCHT w-Randoms Consortium Policy - CST Covers Employee Member Setup Fee	\$ 7.50
CCF: X555356	Hair Five Panel Exp Opi Drug Test In Network Collected at TX295	\$ 59.00
CCF: X555356	DCCHT w-Randoms Consortium Policy - CST Covers Hair Collection	\$ 20.00
CCF: X555356	DCCHT w-Randoms Consortium Policy - CST Covers Psychomedics Collection Site Handling Fee	\$ 3.75
XXXXX2363 Total		\$ 90.25

Thursday, April 27, 2017 Total \$ 90.25

Friday, April 28, 2017

XXXXX2102 LOOZE,JAMES

CCF: 2039194503	Oral Fluid 9 Panel+ BUP+Syn K2:Br Alc Drug Test In Network Collected at TX295	\$ 74.00
CCF: 2039194503	DCCOF Consortium Policy - CST Covers Oral Fluid Collection Only	\$ 15.00
CCF: 2039194503	DCCOF Consortium Policy - CST Covers Alcohol Handling Fee	\$ 5.00
CCF: 2039194503	DCCOF Consortium Policy - CST Covers Alcohol EBT Test Collected at TX295	\$ 25.00
XXXXX2102 Total		\$ 119.00

XXXXX9074 ARMSTRONG,JACK

CCF: 2039194502	DCCOF Consortium Policy - CST Covers Alcohol EBT Test Collected at TX295	\$ 25.00
CCF: 2039194502	DCCOF Consortium Policy - CST Covers Oral Fluid Collection Only	\$ 15.00
CCF: 2039194502	DCCOF Consortium Policy - CST Covers Alcohol Handling Fee	\$ 5.00
CCF: 2039194502	Oral Fluid 9 Panel+ BUP+Syn K2:Br Alc Drug Test In Network Collected at TX295	\$ 74.00
XXXXX9074 Total		\$ 119.00

Friday, April 28, 2017 Total \$ 238.00



DISA Inc.

Invoice 1126135

Monday, May 1, 2017

XXXXX9190 DELAGUILA,CESAR

CCF: 2039194504	DCCOF Consortium Policy - CST Covers Oral Fluid Collection Only	\$ 15.00
CCF: 2039194504	DCCOF Consortium Policy - CST Covers Alcohol Handling Fee	\$ 5.00
CCF: 2039194504	DCCOF Consortium Policy - CST Covers Alcohol EBT Test Collected at TX295	\$ 25.00
CCF: 2039194504	Oral Fluid 9 Panel+BUP+Syn K2:Br Alc Drug Test In Network Collected at TX295	\$ 74.00

XXXXX9190 Total \$ 119.00

XXXXX9330 ALCARAZ,DARIO

CCF: 2039194511	Oral Fluid 9 Panel+BUP+Syn K2:Br Alc Drug Test In Network Collected at LA072	\$ 74.00
CCF: 2039194511	DCCOF Consortium Policy - CST Covers Oral Fluid Collection Only	\$ 25.00
CCF: 2039194511	DCCOF Consortium Policy - CST Covers Alcohol Handling Fee	\$ 5.00
CCF: 2039194511	DCCOF Consortium Policy - CST Covers Alcohol EBT Test Collected at LA072	\$ 21.00

XXXXX9330 Total \$ 125.00

Monday, May 1, 2017 Total \$ 244.00

No PO/Job Number Specified Total \$ 572.25

CST Storage - Construction Total \$ 572.25

Invoice Total \$ 572.25



DISA Inc.

Invoice 1135590

CST Storage - Construction
Attention: Jaime Brown
498 N Loop 336 East
Conroe, TX 77301

Invoice Date : May 31, 2017
Account Terms : NET 30
Account Number: 022644 - 70648
Client Name : CST Power & Construction, Inc. - CST
Storage - Construction

Summary of Charges

2	Alcohol Handling Fee	\$ 10.00
2	Alcohol Testing	\$ 50.00
3	Drug Test	\$ 137.00
1	Hair Collection	\$ 20.00
1	Psychemedics Collection Site Handling Fee	\$ 3.75
2	Urine Collection	\$ 30.00
Total Amount Due		\$ 250.75

Return this page with payment for proper credit

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470. Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1135590

CST Storage - Construction
Attention: Jaime Brown
498 N Loop 336 East
Conroe, TX 77301

Invoice Date : May 31, 2017
Account Terms : NET 30
Account Number: 022644 - 70648
Client Name : CST Power & Construction, Inc. - CST
Storage - Construction

Summary of Charges

2	Alcohol Handling Fee	\$ 10.00
2	Alcohol Testing	\$ 50.00
3	Drug Test	\$ 137.00
1	Hair Collection	\$ 20.00
1	Psychomedics Collection Site Handling Fee	\$ 3.75
2	Urine Collection	\$ 30.00

Total Amount Due \$ 250.75

Retain this page for your records

Remit To: DISA Global Solutions, Inc.
Dept. 890314
PO Box 120314
Dallas, TX 75312-0314

Please contact us immediately if you have any questions or concerns regarding this invoice so that we may resolve them as soon as possible. You may email questions to billing@disa.com, fax to 713-972-3470 or phone us at 281-673-2470.

Please provide the invoice number, account number and a brief explanation of the question or problem. Clients have 30 days from invoice date to dispute any charges.



DISA Inc.

Invoice 1135590

Client ID 22644

CST Storage - Construction - 70648 (TBD)

No PO/Job Number Specified

Test Result

Monday, April 24, 2017

XXXXX4452 ARCE,ERIC

CCF: X555357	Hair Five Panel Exp Opi Drug Test In Network Collected at TX295	\$ 59.00
CCF: X555357	DCCHT w-Randoms Consortium Policy - CST Covers Hair Collection	\$ 20.00
CCF: X555357	DCCHT w-Randoms Consortium Policy - CST Covers Psychemedics Collection Site Handling Fee	\$ 3.75

XXXXX4452 Total \$ 82.75

Monday, April 24, 2017 Total \$ 82.75

Wednesday, May 24, 2017

XXXXX8227 HUNT,DAMIAN

CCF: 2039194501	DCCHA Consortium Policy - CST Power & Construction, Inc. Non-DOT Urine Collection	\$ 15.00
CCF: 2039194501	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol Handling Fee	\$ 5.00
CCF: 2039194501	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol EBT Test Collected at TX295	\$ 25.00
CCF: 2039194501	Urine 10 Panel OP300:A300:M20:MDA:6AM:ExOP BrAlc Drug Test In Network Collected at TX295	\$ 39.00

XXXXX8227 Total \$ 84.00

Wednesday, May 24, 2017 Total \$ 84.00

Friday, May 26, 2017

XXXXX0504 NEWTON,BRIAN

CCF: 2039559953	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol EBT Test Collected at TX295	\$ 25.00
CCF: 2039559953	DCCHA Consortium Policy - CST Power & Construction, Inc. Alcohol Handling Fee	\$ 5.00
CCF: 2039559953	DCCHA Consortium Policy - CST Power & Construction, Inc. Non-DOT Urine Collection	\$ 15.00
CCF: 2039559953	Urine 10 Panel OP300:A300:M20:MDA:6AM:ExOP BrAlc Drug Test In Network Collected at TX295	\$ 39.00

XXXXX0504 Total \$ 84.00

Friday, May 26, 2017 Total \$ 84.00

No PO/Job Number Specified Total \$ 250.75

CST Storage - Construction Total \$ 250.75

Invoice Total \$ 250.75



DISA Global Solutions, Inc.
10900 Corporate Centre Drive, Suite 250
Houston, Texas 77041
281.673.2400 | 800.752.6432

Epiq Bankruptcy Solutions, LLC
Attn: NM. Rodriguez
777 Third Avenue, 12th Floor
New York, NY 10017

Date: 10/19/2017

Proof of Claim Submission

Case# 17-11294
Debtor: CST Power & Construction, Inc.
Filing Date: 6/9/2017

Attached are the paperwork for our proof of claim related to the case number stated above.
The company has two separate accounts. We combined the totals and filed one single proof of claim (\$823+\$439.85)

Feel free to contact me if you have any questions.

Thank you.

Kristina Lin
AR Customer Accounts Analyst

DISA Global Solutions, Inc.
10900 Corporate Centre Dr, STE#250
Houston, TX 77041
Main: 281-673-2400
AR Phone Line: 281-673-2470
Direct Phone Line: 281-673-2458

www.disa.com



DISA Global Solutions



Please note our new address:
10900 Corporate Centre Dr.
Suite 250
Houston, TX 77041



U.S. POSTAGE >>> PITNEY BOWES



ZIP 77041 \$ 007.29⁰
02 4W
0000351127 OCT. 24, 2017

12

Confidential
TO BE OPENED BY ADDRESSEE ONLY

FILED / RECEIVED

OCT 27 2017

EPIQ SYSTEMS

