

Fill in this information to identify the case:

Debtor United Site Services, Inc.

United States Bankruptcy Court for the: _____ District of New Jersey
(State)Case number 25-23630

Modified Official Form 410

Proof of Claim

04/25

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.

Filets must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or 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?	Airgas USA, LLC		
	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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
	Airgas USA, LLC 110 West 7th Street Tulsa, OK 74119 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)		
	Contact phone <u>918-551-4743</u> Contact email <u>Keeley.Carter@airgas.com</u>	Contact phone _____ Contact email _____	
	Uniform claim identifier (if you use one): _____		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____/_____/_____		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>0584</u> ____
7. How much is the claim?	\$ <u>662.95</u> . Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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. <u>Airgas Assets/Unreturned Cylinders</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> 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 amount 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) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No	Amount entitled to priority
	<input type="checkbox"/> Yes. Check all that apply:	
<p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
	<input type="checkbox"/> Up to \$3,800* 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"/> Wages, salaries, or commissions (up to \$17,150*) 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).	\$ _____
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.	\$ _____

* Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?	<input checked="" type="checkbox"/> No
	<input type="checkbox"/> Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.
	\$ _____

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)(3) 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 acknowledgement 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 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 02/09/2026
MM / DD / YYYY

/s/ Keeley Carter

Signature

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

Name Keeley Carter
First name _____ Middle name _____ Last name _____

Title Bankruptcy Specialist

Company Airgas USA, LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 634-7164 | International (424) 236-7220

Debtor: 25-23630 - United Site Services, Inc.		
District: District of New Jersey, Trenton Division		
Creditor: Airgas USA, LLC 110 West 7th Street Tulsa, OK, 74119 Phone: 918-551-4743 Phone 2: Fax: Email: Keeley.Carter@airgas.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded	
	Related Document Statement:	
	Has Related Claim: No	
	Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: Airgas Assets/Unreturned Cylinders	Last 4 Digits: Yes - 0584	Uniform Claim Identifier:
Total Amount of Claim: 662.95	Includes Interest or Charges: Yes	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No	Nature of Secured Amount: Value of Property:	
Amount of 503(b)(9): No	Annual Interest Rate:	
Based on Lease: No	Arrearage Amount: Basis for Perfection:	
Subject to Right of Setoff: No	Amount Unsecured:	
Submitted By: Keeley Carter on 09-Feb-2026 8:44:03 a.m. Pacific Time		
Title: Bankruptcy Specialist		
Company: Airgas USA, LLC		

CASE #25-23630
United Site Services, Inc.
U.S. Bankruptcy Court
District of New Jersey

Date: 12/29/2025

RE: Bankruptcy notice

To Whom it May Concern:

I am writing with reference to the Chapter 11 petition filed by the above. Prior to the petition date, the corporation, and its affiliates **rented or leased** gas cylinders and purchased gas products from Airgas USA, LLC-Central Division. As of the petition date, the company was in possession of **[2] cylinders, or cylinder cradles** that, pursuant to the contract(s) between the parties, are the **property of Airgas USA, LLC-Central Division. The cylinder(s) were delivered to United Site Services Inc located at 118 Flanders Road in Westboro, MA 01581-1035.**

A description of the Airgas owned assets is listed below

Cylinder Description	Quantity	Total Value \$
CY-AC 4	1	\$258.31
CY-OX 200	1	\$365.64
SALES TAX		\$39.00
TOTAL		\$662.95

Pursuant to Federal Regulations (49 C.F.R.. 173.30 1, et al) compressed gas cylinders may not be transported unless filled by the owner of the cylinders or with the owner's consent. Therefore, filling or transporting the Airgas USA, LLC-Central Division cylinders by any person other than Airgas USA, LLC-Central Division would be a violation of Federal Regulations.

Sincerely,

Keeley Carter
Bankruptcy Specialist
Airgas USA LLC
Central Division BSC
110 W. 7th St., Ste. 1300
Tulsa, OK 74119
Phone: 918-551-4743
Email: Keeley.Carter@Airgas.com



AIRGAS USA, LLC
PO Box 1152
Tulsa, OK 74101

DEBIT MEMO

INVOICE DATE	PAYER	INVOICE NO.	DUUE DATE	PAY THIS AMOUNT
01/26/2026	0584	9801174553	03/12/2026	\$ 662.95

SOLD BY AIRGAS USA, LLC (C166)
2780 IRVING BLVD
DALLAS TX 75207-2312
214-748-4721

Manage Your Account Online 24/7

Access order history, view cylinder balances, get proofs of delivery, pay invoices and more -- visit Airgas.com today.



Please send new or updated blanket purchase orders to: CEBSCPOCoordinator@airgas.com

PLEASE MAKE CHECKS PAYABLE AND REMIT TO:

BILL TO ATTN SW ACCOUNTS PAYABLE
 UNITED SITE SERVICES INC
 USE 5124624
 118 FLANDERS RD
 WESTBORO MA 01581-1035

Airgas USA, LLC
PO BOX 734671
DALLAS TX 75373-4671

114058419801174553000000662958

TO ENSURE PROPER CREDIT, PLEASE RETURN THE UPPER PORTION WITH YOUR REMITTANCE. FOR QUESTIONS ON YOUR ACCOUNT PLEASE CALL: 1-855-470-2666

ORDER NO.	INVOICE NO.	INVOICE DATE	SOLD TO NO.	SOLD TO NAME				
PO/RELEASE		ORDERED BY		SHIP VIA	PAYMENT TERMS		ORDER DATE	
LOU AUDIT					NET 45		01/26/2026	
DELIVERY NO. / DESCRIPTION	MATERIAL NUMBER	QTY SHIP'D	UOM	QTY B/O	CYLINDER	UNIT PRICE	UOM	AMOUNT
7124487900 CY-AC 4 CYL ACETYLENE IND #4 CGA 510 LOSS OF USE		1	CL			258.31	CL	258.31 T
7124487900 CY-OX 200 CYL OXYGEN INDUSTRIAL 200 CGA 540 LOSS OF USE		1	CL			365.64413	CL	365.64 T
Sale subtotal:							623.95	

Effective 9/15/2025, we may impose a surcharge of 3% on the transaction amount for credit card transactions on account, which is not greater than our cost of acceptance. We do not impose a surcharge on debit cards or auto-pay transactions.

For customers with a Billing Zip Code in Colorado, see terms of payment on reverse or visit www.airgas.com/terms-of-sale.

Sales Tax: 39.00

Airgas.
an Air Liquide company

AIRGAS USA, LLC
PO Box 1152
Tulsa, OK 74101

SHIP TO: 8684 YAA ---
UNITED SITE SERVICES INC *DNU*
USE SP 5124929 SH 5126095
BILLING ONLY
118 FLANDERS RD
WESTBORO MA 01581-1035

FOR WIRE TRANSFER PAYMENTS

Airgas USA, LLC
Acct No 550372236
JPMC Bank, ABA No 021000021
www-global-remits@airgas.com

FOR CHANGE Email: cdv.return.mail@airgas.com

