

6. Submit a copy of articles of incorporation or other organization documents, a copy of any contract with any underlying carrier(s) and a copy of certificate of authority to transact business in Illinois.

See Attachment "B"

7. List jurisdictions (other than Illinois) in which Applicant is offering service(s).

CA, NM, ID, OR, WA, GA, FL, TX, UT, WI, MT, AZ, AL, CO, IN, KY, NE, NV, OK, SC, WY, NJ

8. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

 YES (Please provide details) X NO

9. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

 YES X NO

If YES, describe fully. _____

10. Has Applicant provided service under any other name?

 YES X NO

If YES, please list. _____

11. Is the Applicant seeking an expedited application pursuant to Section 13-404.1(b)?

 YES X NO

If YES, please provide the name of the underlying carrier(s) and the docket number of the underlying carrier(s) certification proceeding. _____

MANAGERIAL

12. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in narrative form, resumes of key personnel, or a combination of these forms.

See Attachment "C"

13. List officers or principals of Applicant.

Richard Torgersrud – C.E.O.

Kevin O’Neal - President

14. Does any officer or principals of Applicant have an ownership or other interest in any other entity, which has provided or is currently providing telecommunications services? YES NO

If YES, list entity. _____

15. How does Applicant propose to handle service complaints? (At a minimum, describe Applicant’s internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

Applicant’s Toll Free Number will be displayed and advertised on all products and services, complaints and billing documents. Any complaints will be handled by a customer service representative for issuance of credits within 24 hours. A full refund request will be processed by a supervisor within 72 hours.

16. Does Applicant currently maintain service quality standards?

YES NO (Currently under development)

If YES, please attach what those standards are, any credits that may be issued for failures and how customers are notified.

17. Will personnel be available at Applicant’s business office during regular working hours to respond to customer inquiries about service or billing? YES NO

18. What telephone number(s) would a customer use to contact your company (other than the toll-free customer service number provided in response to question 1)?

800-205-5510

19. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

YES NO

FINANCIAL

20. Please attach evidence of Applicant’s financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant’s financial resources and ability to provide service. See Attachment “D” submitted confidentially.

TECHNICAL

21. Does Applicant utilize its own equipment and/or facilities? YES NO

If YES, please list the equipment and / or facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

If NO, which underlying carrier's facilities does the Applicant intend to use?

AireSpring and NovaTel

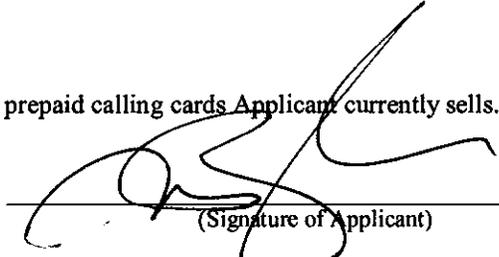
22. Please describe the nature of prepaid service to be provided (e.g., general service, location specific service, discounted rates for specific countries, etc.).

Telmate will provide prepaid services to Correctional Facilities under contract with State and Municipal Department of Corrections for Inmate Calls.

23. Will technical personnel be available at all times to assist customers with service problems?

YES NO

24. Please attach a copy of the front and back of any prepaid calling cards Applicant currently sells. N/A
Placard should be attached as "E"



(Signature of Applicant)

Marianne Zhen – Corporate Controller

VERIFICATION

This application shall be verified under oath.

OATH

State of CALIFORNIA)
County of SAN FRANCISCO)ss

MARIANNE ZHEN makes oath and says that he is CORPORATE CONTROLLER
(Insert here the name of affiant) (Insert the official title of the affiant)

of TELMATE, LLC
(Insert here the exact legal title or name of the Applicant)

that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein.

[Handwritten Signature]

(Signature of affiant)

Subscribed and sworn to before me, a Notary Public, by MARIANNE ZHEN, Corporate Controller
by Kim-DUNG THI NGUYEN, Notary Public
(Title of person authorized to administer oaths)

in the State and County above named, this 13th day of JANUARY, 2012

[Handwritten Signature]

(Signature of person authorized to administer oath)

