

NEW YORK STATE PUBLIC SERVICE COMMISSION

Electrically Submitted Telecommunications Company Critical Information Form (TCCI)

Updating with new company information.

Link to Company Information --> [icon]

5F55 Communications Network Billing, Inc.

Follow Up Required

Notes:

\* Company's Corporate Name: Communications Network Billing, Inc.

Doing Business As, if applicable N/A

Formerly Known As, if applicable N/A

If Providing Cable Service:

Region where providing service: N/A

System: N/A

State in which Certificate of Incorporation filed: NV

\* Company Website: www.comnetbillinc.com

Company Corporate Address: 895 Dove Street N/A 3rd Floor City Newport Beach Alicia Treder

State: CA Zip: 92660-0000

\* Company President: First Name: Cristina Last Name: Tucker

Telephone Number: (800) 913-2042

Fax Number: (800) 339-0861

E-mail address: N/A

\* Mailing address: 895 Dove Street N/A 3rd Floor City Newport Beach

State: CA Zip: 92660-0000

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Suite 101 A

City  
Suwanee

State:  
GA

Zip:  
30024-7289

Tisa Shumake

**Attestation:**

**08/25/2008 01:00:37 PM --- By Order issued July 3, 2006 in Case 04-M-0159, the Commission directed all facilities-based telecommunications providers to adhere to appropriate electrical safety codes and attest on an annual basis that they comply with the National Electrical Safety Code and National Electrical Code. Accordingly, by checking the 'yes' box below, I attest that our company's installation, operation, and maintenance practices and procedures are in compliance with applicable National Electrical Safety Code and National Electrical Code. --- Yes, our company's practices and procedures are in compliance with applicable National Electrical Safety Code and National Electrical Code.**

**Company Officer's Name:** First Name: Last Name:  
Cristina Tucker

**Title:** President

**Form Preparer's Name:** First Name: Last Name:  
Tisa Shumake

**Telephone Number:** 678-436-5590

**E-mail address:** tshumake@rtcllc.net