# Ohio.gov Public Utilities Commission

### **Public Utilities Commission** Ohio Annual Reports

Step 1: Cover Page Step 2: Identity of Respondent Step 3: Intrastate Gross Earnings	Network Operator Services, Inc. Cover Page
Step 4: Contact Persons Step 5: Verification and Oath	For the provision of (check all that apply):
	Interexchange Carrier
	Alternative Operator Service Provider 😾
	Competitive Access
	Competitive Local Exchange Carrier
	VOIP
	Other
	Other Description
	Principal Place of Business:
	Legal Name Network Operator Services, Inc. Website URL
	Address P.O. Box 3529
	City Longview
	County Gregg
	State TX Zip Code 75606
	Phone '(999) 9999-9999' 903-247-4868
	Address of Principal Business Office PO Box 3529 at end of year Longview, TX 75606
	Filer:
	Name Dalene Harness
	Title Regulatory Analyst
	Address P.O. Box 3529 Longview, TX 75606
	Email osbill@centrisinfo.com
	Phone '(999) 9999-9999' 903-247-4868
	Fax 903-758-9372
	Edit Go to next section >

## Ohio.gov Public Utilities Commission

### **Public Utilities Commission** Ohio Annual Reports

Step 1: Cover Page

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### Network Operator Services, Inc. Identity of Respondent

1. Identify respondent's form of business organization: sole proprietorship, partnership, corporation, or other (explain).	S CORP
2. If a consolidated, merged, or reorganized company, briefly provide particulars of such transactions, the date 'mm/dd/yyyy' of the transactions, and PUCO authority. If a reorganized company, give name of original	N/A
company.  3. Identify any other names (other than shown on title page) under which respondent conducted any part of its business during the year.	N/A
If incorporated specify:     a. Date 'mm/dd/yyyy' of filing of articles of incorporation.	3/11/1988
b. State in which incorporated.	TX
5. Identify PUCO Case Number (and date 'mm/dd/yyyy' issued) granting operating authority and identify certificate number(s) issued.	98-141-CT-ACE
6. State whether respondent is operational in Ohio (actually providing service and the date 'mm/dd/yyyy' operations began), or available (but not currently providing service).	Yes, January 1998
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Network Operator Services, Inc.

**Statement of Intrastate Gross Earning** 

NOTE: Please enter whole numbers without dollar signs or commas

Operating and Miscellaneous Revenue - Wholesale Cellular Communications, Radio Common Carrier, Directory Revenue, Rent Revenue, Special Billings (revenue from work performed for others, rent revenue-nonoperating, return on regulated investment used to provide nonregulated products and services, etc.)

2. Other Revenue, Dividend and Interest Income, Gains From Disposition of Property -- Operating and Nonoperating, Other Operating or Nonoperating Gains (foreign currency exchange or transfer, extinguishment of debt, company's share of earnings of affiliated company accounted for on equity method, income from sinking and other funds, etc.)

3. SUBTOTAL (1) + (2)

4. Less: Earnings or receipts from sales to other public utilities for resale

5. TOTAL (3) - (4)

\$20,449

\$20,449

\$0

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Network Operator Services, Inc.

Contact Persons

IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE/INVOICES IS/ARE DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING. Name, Title, Email, Address, and Phone Number of the Company's **Contact Person** Name Dalene Harness Title Regulatory Analyst Email osbill@centrisinfo.com P.O. Box 3529 Longview, TX 75606 Phone Number '(999) 9999-9999' 903-247-4868 Name, Title, Email, Address, and Phone Number of Person to whom invoice should be Directed Name Dalene Harness Title Regulatory Analyst Email osbill@centrisinfo.com P.O. Box 3529 Address Longview, TX 75606 Phone Number '(999) 903-247-4868 9999-9999' Name and Address of the President President's Name Tim Martin, President P.O. Box 3529 Longview, TX 75606 President's Address Edit Go to next section >

#### VERIFICATION

The foregoing report must be verified by the President or Chief Officer of the company.

State of  $\underline{TX}$ County of  $\underline{Gregg}$ 

Linda Martin makes oath and says that

s/he is Secretary

of Network Operator Services, Inc.

that s/he has examined the foregoing report; that to the best of her/his knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from and including January 1, 2011 to and including December 31, 2011.

(Signature of affiant.)

SUSAN P. FREEMAN My Commission Expires January 07, 2014

Sworn and subscribed before me this 10 day of February, 2012 Month/Year

Signature of notary

My commission expires on 1-7-14

This foregoing document was electronically filed with the Public Utilities

**Commission of Ohio Docketing Information System on** 

2/16/2012 12:05:48 PM

in

Case No(s). 12-0005-TP-RPT

Summary: Annual Report electronically filed by Ms. Dalene Harness on behalf of Network Operator Services, Inc