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Technician PC Date Processed DEC 11 2015

CERTIFICATE REVISION FORM-FOR DIS DATABASE

☐ Revise Certificate No.: _____ To (check all that apply):

☐ Reflect Name change from _____ To _____

☐ Transfer Certificate from _____ To _____

☐ Cancel CTS/TP Certificate No. _____, due to issuance of CLEC certificate.

☐ Reflect Change In Ownership to:

☐ Send Electronic Notice of Certificate Cancellation.

☐ Keep Case File Open for:

Certificate Cancellations

☐ Cancel Certificate No. _____ due to merger with _____,

which has certificate No.: _____

☒ Cancel Certificate No. 90-6401-TP-TRF, and remove from list of ☐ CLEC ☒ CTS carriers.

Requested by: Robbin Russell

Date: 12/11/2015

CASE NUMBER: 14-2211-TP-CIO
CASE DESCRIPTION: Transfer of Customers of Impact Telecom and Americatel Corporation to Matrix Telecom, Inc.
DATE OF SERVICE: 12/11/2015
DOCUMENT SIGNED ON: 12/11/2015

Sign Here: _____



PARTY OF RECORD	APPLICANT	ATTORNEY
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✓ Impact Telecom Inc.
9250 East Costilla Ave.
Suite 400
Greenwood Village, CO 80112

Americatel Corp.
7361 Calhoun Place
Suite 650
Rockville, MD 20855

PARTY OF RECORD	ATTORNEY	ATTORNEY
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none