

151 Southhall Lane, Ste 450 Maitland, FL 32751 P.O. Drawer 200 Winter Park, FL 32790-0200 www.inteserra.com

> May 24, 2018 Via Web Filing

Ms. Betty McCauley, Commission Secretary Public Utilities Commission of Ohio 180 East Broad Street Columbus, OH 43215

RE: Network Communications International Corp d/b/a NCIC Inmate Communications Revision to P.U.C.O. Tariff No. 4 Case No. 18-0920-TP-ATA

Dear Ms. McCauley:

Enclosed for filing please find the original of the above referenced tariff filing and application submitted on behalf of Network Communications International Corp d/b/a NCIC Inmate Communications. The purpose of this filing is to revise Institutional Services rates in compliance with the final rules filed in Case No. 14-1554-TP-ORD, revised on May 14, 2018 by the Commission. The Company respectfully requests an effective date for this filing of May 24, 2018.

The following tariff pages are included with this filing:

| 2 <sup>nd</sup> Revised Page 1  | Updates Check Sheet         |
|---------------------------------|-----------------------------|
| 2 <sup>nd</sup> Revised Page 18 | Reduces Rates; Deletes Text |
| 2 <sup>nd</sup> Revised Page 20 | Reduces Rates; Deletes Text |
| 2 <sup>nd</sup> Revised Page 21 | Reduces Rates; Deletes Text |

Any questions you may have regarding this filing should be directed to my attention at 407-740-3005 or via email to swarren@inteserra.com. Thank you for your assistance in this matter.

Sincerely,

/s/ Sharon R. Warren

Sharon R. Warren Consultant

cc: Stephanie Jackson - NCIC tms: OHn1801

Enclosures SW/mp

# The Public Utilities Commission of Ohio TELECOMMUNICATIONS FILING FORM

(Effective: 10-11-2017)

This form is intended to be used with most types of required filings. It provides check boxes with rule references for the most common types of filings. It does not replace or supersede Commission rules in any way.

In the Matter of the Application of. Network Communications International Corp d/b/a NCIC Inmate Communications Services for a Tariff Revision TRF Docket No. **90-5845-CT-TRF** Case No. 18-0920-TP-ATA **NOTE: Unless you have reserved a Case #, leave the** "Case No" fields BLANK.

| Name of Registrant(s)  | Network Communications International Corp. |                             |                                       |   |       |              |  |  |
|--|--|-----------------------------|---------------------------------------|---|-------|--------------|--|--|
| DBA(s) of Registrant(s)  | NCIC Inmate Communications                 |                             |                                       |   |       |              |  |  |
| Address of Registrant(s  | 607 Ea                                     | ast Whaley Street, Longviev | v, TX 75601                           | <u>, </u>                                     |       |              |  |  |
| Company Web Address  | www.r                                      | ncic.com                    |                                       | <u>, , , , , , , , , , , , , , , , , , , </u> | ~~~   |              |  |  |
| Regulatory Contact Person(s) Sharon R. Warren Phone 407-740-3005 |  |                             |                                       |   | Fax   | 407-740-0613 |  |  |
| Regulatory Contact Person's                                      | Email A                                    | ddress swarren@inteser      | ra.com                                |   |       |              |  |  |
| Contact Person for Annual R                                      | eport                                      | Carlene Fiola               |                                       |   | Phone | 407-740-3010 |  |  |
| Address (if different from ab                                    | ove) -                                     | 151 Southhall Lane, Suite   | e 450, Maitland,                      | FL 32751                                      |       |              |  |  |
| Consumer Contact Information                                     | on .                                       | Stephanie Jackson           |                                       |   | Phone | 800-530-4898 |  |  |
| Address (if different from abo                                   | ove) -                                     |                             | · · · · · · · · · · · · · · · · · · · | ······································        |       |              |  |  |
|  |  |                             |                                       |   |       |              |  |  |

Motion for protective order included with filing?  $\Box$  Yes  $\boxtimes$  No

Motion for waiver(s) filed affecting this case? 🗌 Yes 🛛 No [Note: Waivers may toll any automatic timeframe.]

#### Notes:

Section I and II are Pursuant to Chapter <u>4901:1-6</u>

Section III – Carrier to Carrier is Pursuant to Ohio Adm. Code <u>4901:1-7</u>, and Wireless is Pursuant to Ohio Adm. Code <u>4901:1-6-24</u> Section IV – Attestation

(1) Indicate the Carrier Type and the reason for submitting this form by checking the boxes below.

(2) For requirements for various applications, see the identified section of Ohio Adm. Code Chapter 4901 and/or the supplemental application form noted.

(3) Information regarding the number of copies required by the PUCO may be obtained from the PUCO's web site at <u>www.puco.ohio.gov</u> under the docketing information system section, by calling the docketing division at 614-466-4095, or by visiting the docketing division at the offices of the PUCO.

(4) An Incumbent Local Exchange Carrier (ILEC) offering basic local exchange service (BLES) outside its traditional service area should choose CLEC designation when proposing to offer BLES outside its traditional service area or when proposing to make changes to that service.

#### All Filings that result in a change to one or more tariff pages require, at a minimum, the following exhibits.

| Exhibit   | Description:  |  |  |  |  |
|---|---|--|--|--|--|
| A   | The tariff pages subject to the proposed change(s) as they exist before the change(s)   |  |  |  |  |
| B The Tariff pages subject to the proposed change(s), reflecting the change, with the change(s) marked in the right margin. |   |  |  |  |  |
| C   | A short description of the nature of the change(s), the intent of the change(s), and the customers affected.                          |  |  |  |  |
| D   | A copy of the notice provided to customers, along with an affidavit that the notice was provided according to the applicable rule(s). |  |  |  |  |

# Section I – Part I - Common Filings

| Carrier TypeXOther (explain below)                               | For Profit ILEC                                  | Not For Profit ILEC                       |  |
|--|--|---|--|
| Change terms & conditions of existing BLES                       | ATA <u>1-6-14(H)</u><br>(Auto 30 days)           | ATA <u>1-6-14(H)</u><br>(Auto 30 days)    | ATA <u>1-6-14(H)</u><br>(Auto 30 days)   |
| Introduce non-recurring charge,<br>surcharge, or fee to BLES     |  |   | ATA <u>1-6-14(H)</u><br>(Auto 30 days)   |
| Introduce or Increase Late Payment                               | ATA <u>1-6-14(1)</u><br>(Auto 30 days)           | ATA <u>1-6-14(1)</u><br>(Auto 30 days)    | ATA <u>1-6-14(1)</u><br>(Auto 30 days)   |
| Revisions to BLES Cap.   | □ ZTA <u>1-6-14(F)</u><br>(0 day Notice)         |   |  |
| Introduce BLES or expand local service area (calling area)       | ZTA <u>1-6-14(H)</u><br>(0 day Notice)           | ZTA <u>1-6-14(H)</u><br>(0 day Notice)    | ZTA <u>1-6-14(H)</u> (0 day Notice)      |
| Notice of no obligation to construct facilities and provide BLES | ☐ ZTA <u>1-6-27(C)</u><br>(0 day Notice)         | ☐ ZTA <u>1-6-27(C)</u><br>(0 day Notice)  |  |
| Change BLES Rates  | TRF <u>1-6-14(F)</u><br>(0 day Notice)           | TRF <u>1-6-14(F)(4)</u><br>(0 day Notice) | ☐ TRF <u>1-6-14(G)</u><br>(0 day Notice) |
| To obtain BLES pricing flexibility                               | BLS <u>1-6-14</u><br>(C)(1)(c)<br>(Auto 30 days) |   |  |
| Change in boundary   | ACB <u>1-6-32</u><br>(Auto 14 days)              | ACB <u>1-6-32</u><br>(Auto 14 days)       |  |
| Expand service operation area                                    |  |   | TRF <u>1-6-08(G)(0 day)</u>              |
| BLES withdrawal  |  |   | ZTA <u>1-6-25(B)</u><br>(0 day Notice)   |
| Other* (explain) Inmate Service<br>Provider                      |  |   |  |

# Section I – Part II – Customer Notification Offerings Pursuant to Chapter 4901:1-6-7 OAC

| Type of Notice    | Direct Mail | Bill Insert | Bill Notation | Electronic Mail |
|-------------------|-------------|-------------|---------------|-----------------|
| 15-day Notice     |             |             |               |                 |
| 30-day Notice     |             |             |               |                 |
| Date Notice Sent: |             |             |               |                 |

# Section I – Part III – IOS Offerings Pursuant to Chapter 4901:1-6-22 OAC

| IOS | Introduce New | Tariff Change | Price Change | Withdraw |
|-----|---------------|---------------|--------------|----------|
| IOS |               | $\boxtimes$   |              |          |

## Section II - Part I - Carrier Certification - Pursuant to Chapter 4901:1-6-08, 09 & 10 OAC

|                    | ILEC               | CLEC              | Telecommunications   | CESTC              | CETC               |
|--------------------|--------------------|-------------------|----------------------|--------------------|--------------------|
| Certification      | (Out of Territory) |                   | Service Provider Not |                    |                    |
|                    |                    |                   | Offering Local       |                    |                    |
| * See Supplemental | ACE <u>1-6-08</u>  | ACE <u>1-6-08</u> | ACE <u>1-6-</u> 08   | ACE <u>1-6-</u> 10 | UNC <u>1-6-</u> 09 |
| form               | * (Auto 30- day)   | *(Auto 30 day)    | *(Auto 30 day)       | (Auto 30 day)      | *(Non-Auto)        |

\*Supplemental Certification forms can be found on the Commission Web Page.

# Section II – Part II – Certificate Status & Procedural

| Certificate Status   | ILEC                                   | CLEC                                   | Telecommunications<br>Service Provider Not<br>Offering Local       |
|--|--|--|--|
| Abandon all Services   |  | ABN <u>1-6-26</u><br>(Auto 30 days)    | ABN <u>1-6-26</u><br>(Auto 30 days)                                |
| Change of Official Name *  | ACN <u>1-6-29(B)</u><br>(Auto 30 days) | ACN <u>1-6-29(B)</u><br>(Auto 30 days) | <ul> <li>☐ CIO <u>1-6-29(C)</u></li> <li>(0 day Notice)</li> </ul> |
| Change in Ownership *  | ACO <u>1-6-29(E)</u>                   | ACO <u>1-6-29(E)</u>                   | CIO <u>1-6-29(C)</u>   |
|  | (Auto 30 days)                         | (Auto 30 days)                         | (0 day Notice)   |
| Merger *   | AMT <u>1-6-29(E)</u>                   | AMT <u>1-6-29(E)</u>                   | CIO <u>1-6-29(C)</u>   |
|  | (Auto 30 days)                         | (Auto 30 days)                         | (0 day Notice)   |
| Transfer a Certificate *   | ATC <u>1-6-29(B)</u>                   | ATC <u>1-6-29(B)</u>                   | CIO <u>1-6-29(C)</u>   |
|  | (Auto 30 days)                         | (Auto 30 days)                         | (0 day Notice)   |
| Transaction for transfer or lease of property, plant or business * | ☐ ATR <u>1-6-29(B)</u>                 | ATR <u>1-6-29(B)</u>                   | CIO <u>1-6-29(C)</u>   |
|  | (Auto 30 days)                         | (Auto 30 days)                         | (0 day Notice)   |
|  |  |  |  |

# \* Other exhibits may be required under the applicable rule(s). ACN, ACO, AMT, ATC, ATR and CIO applications see <u>the 4901:1-6-29 Filing Requirements on the PUCO's Web Page</u> for a complete list of exhibits.

#### Section III - Carrier to Carrier (Pursuant to 4901:1-7), and Wireless (Pursuant to 4901:1-6-24)

| Carrier to Carrier   | ILEC                               | CLEC                                 |
|--|------------------------------------|--------------------------------------|
| Interconnection agreement, or amendment to   | □ NAG <u>1-7-07</u>                | □ NAG <u>1-7-07</u>                  |
| an approved agreement  | (Auto 90 day)                      | (Auto 90 day)                        |
| Request for Arbitration  | ARB <u>1-7-09</u><br>(Non-Auto)    | ARB <u>1-7-09</u><br>(Non-Auto)      |
| Introduce or change c-t-c service tariffs,   | ATA <u>1-7-14</u><br>(Auto 30 day) | ☐ ATA <u>1-7-14</u><br>(Auto 30 day) |
| Request rural carrier exemption, rural carrier suspension or modification                            | UNC <u>1-7-04</u> or 05 (Non-Auto) |                                      |
| Changes in rates, terms & conditions to Pole<br>Attachment, Conduit Occupancy and Rights-<br>of-Way. | ATA 1-3-04<br>(Auto 30 days)       |                                      |
|  |                                    |                                      |
| Wireless Providers See 4901:1-6-24   | RCC<br>Registration &              | Interconnection                      |
|  | Change in Operations]              | Agreement or                         |

# Registrant hereby attests to its compliance with pertinent entries and orders issued by the Commission.

Section IV. - Attestation

# AFFIDAVIT **Compliance** with Commission Rules

I am an officer/agent of the applicant corporation, Network Communications International Corp., and am authorized to make this statement on its behalf

#### Sharon R. Warren (Name)

Please Check ALL that apply:

X I attest that these tariffs comply with all applicable rules for the state of Ohio. I understand that tariff notification filings do not imply Commission approval and that the Commission's rules as modified and clarified from time to time, supersede any contradictory provisions in our tariff. We will fully comply with the rules of the state of Ohio and understand that noncompliance can result in various penalties, including the suspension of our certificate to operate within the state of Ohio.

I attest that customer notices accompanying this filing form were sent to affected customers, as specified in Section II, in accordance with Rule 4901:1-6-7, Ohio Administrative Code.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on (Date) May 24, 2018

Signature and /s/Sharon R. Warren Title Consultant to. Network Communications International Corp.

\*This affidavit is required for every tariff-affecting filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.

## VERIFICATION

I, Sharon R. Warren, verify that I have utilized the Telecommunications Filing Form for most proceedings provided by the Commission and that all of the information submitted here, and all additional information submitted in connection with this case, is true and correct to the best of my knowledge.

Signature and /s/Sharon R. Warren Title Consultant to. Network Communications International Corp.

\*Verification is required for every filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.

> File document electronically as directed in case number 06-900-AU-WVR or

Send your completed Application Form, including all required attachments as well as the required number of copies, to:

**Public Utilities Commission of Ohio Attention: Docketing Division** 180 East Broad Street, Columbus, OH 43215-3793 (Date) May 24, 2018

(Date) May 24, 2018

at (Location) Maitland, Florida

Network Communications International Corp. d/b/a NCIC Inmate Communications

> <u>Exhibit A</u> Current Tariff Pages

## CHECK SHEET

Pages of this tariff, as indicated below, are effective as of the date shown at the bottom of the respective pages. Original and revised pages, as named below, comprise all changes from the original tariff and are currently in effect as of the date on the bottom of this page.

| PAGE  | REVISION             |   |
|-------|----------------------|---|
| Title | Original             |   |
| 1     | 1 <sup>st</sup> Rev. | * |
| 2     | Original             |   |
| 3     | Original             |   |
| 4     | Original             |   |
| 5     | Original             |   |
| 6     | 1 <sup>st</sup> Rev. | * |
| 6.1   | Original             | * |
| 7     | Original             |   |
| 8     | Original             |   |
| 9     | Original             |   |
| 10    | Original             |   |
| 11    | Original             |   |
| 12    | Original             |   |
| 13    | Original             |   |
| 14    | Original             |   |
| 15    | Original             |   |
| 16    | Original             |   |
| 17    | Original             |   |
| 18    | 1 <sup>st</sup> Rev. | * |
| 19    | 1 <sup>st</sup> Rev. | * |
| 20    | 1 <sup>st</sup> Rev. | * |
| 21    | 1 <sup>st</sup> Rev. | * |
|       |                      |   |

\* - indicates those pages included with this filing

#### 3.4 Institutional Collect Calling Service

NCIC provides Institutional Automated Collect Operator Service to inmates of confinement facilities. Service may be limited by the administrators of the institutions as to availability, call duration or calling scope. Calls are billed to the Called Party. The Called Party must actively accept charges for the call.

(D)

Institutional automated collect operator service allows inmates to make collect calls to terminating locations anywhere in the State of Ohio. An automated system prompts the caller and the called party through user - friendly instructions. The called party must accept responsibility for payment of the charges by dialing the designated digit for acceptance. If a call is not accepted within five (5) seconds of the automated voice recording prompt, the automated recording is replayed a second time. If an acceptance digit is not received five (5) seconds after the second recording is completed, the call is terminated by NCIC's system.

Use of the automated collect calling service is subject to the rules and regulations of the Commission. and the institution's administrative restrictions.

#### 3.4.1 Classes of Calls

Automated Collect Station Calls: are calls which are placed by an Inmate who dials all of the digits required to route the call and who follows the NCIC system prompts, enabling the Called Party to accept the charges for the call. If the Called Party does not accept the call, the call is terminated and no billing applies.

## 3.4.2 Rates and Charges\*

\*

| A. | Usage Charges:   |        |     |
|----|------------------|--------|-----|
|    | Rate Per Minute: | \$0.30 | (R) |

(D)

**(D)** 

Pursuant to FCC Docket 12-375, the revisions shown above are effective June 20, 2016 for Jails (N)

|     | SECTION 3 - DESCRIPTION OF SERVICE AND RATES, (CONT'D.) |                          |                                    |        |                   |  |
|-----|---|--------------------------|------------------------------------|--------|-------------------|--|
| 3.5 | Secure Collect, (Cont'd.)                               |                          |                                    |        |                   |  |
|     | 3.5.1   | 3.5.1 Rates and Charges* |                                    |        |                   |  |
|     |   | А.                       | Usage Charges:<br>Rate Per Minute: | \$0.30 | (R)<br>(D)<br>(D) |  |
|     |   |                          |                                    |        | ()                |  |

\* Pursuant to FCC Docket 12-375, the revisions shown above are effective June 20, 2016 for Jails. (N)

#### 3.6 Institutional Prepaid Debit Service

#### 3.6.1 Description

Institutional prepaid debit service allows an inmate to purchase a card or deposit funds into an account. Debit cards or Debit accounts may be funded in any amount subject to the requirements or restrictions of the Confinement Institution. To place a call, the inmate enters a specified Personal Identification Number (PIN) and dials the desired telephone number.

The Company's system automatically informs the caller of the Available Usage Balance remaining in the Prepaid Account, and provides prompts to place the call by entering the destination telephone number. Network usage is deducted from the Available Usage Balance in the account following completion of the call and after it is rated.

Refunds of remaining balances in a Debit Card or Debit Account are refundable upon request, typically after release of the inmate from the Institution. The Available Usage Balance expires six months from the date the last call is made on the account or card. No refunds of unused balances will be issued after the expiration date.

#### 3.6.1 Rates and Charges\*

| A. | Usage Charges:   |        |  |
|----|------------------|--------|--|
|    | Rate Per Minute: | \$0.30 |  |

#### 3.7 Ancillary Service Charges – Maximum\*

A. Automated Payment Fees (where available) – Credit Card payment, debit card payment, and bill processing fees, including fees for payments made by interactive voice response (IVR), web, or kiosk (where available).

Automated payment fees \$3.00

**B.** Live Agent Fee – A fee associated with the optional use of a live operator to complete Inmate Calling Services transactions.

Live Agent Fee \$5.95

**C. Paper Bill/Statement Fees** – Fees associated with providing customers of Inmate Calling Services an optional paper billing statement.

Paper Bill/Statement Fees \$2.00

\* Pursuant to FCC Docket 12-375, the revisions shown above are effective June 20, 2016 for Jails (N)

(R) (D)

(D)(N) (N)

(N)

# Network Communications International Corp. d/b/a NCIC Inmate Communications

<u>Exhibit B</u> Proposed Tariff Pages

#### CHECK SHEET

Pages of this tariff, as indicated below, are effective as of the date shown at the bottom of the respective pages. Original and revised pages, as named below, comprise all changes from the original tariff and are currently in effect as of the date on the bottom of this page.

| PAGE  | REVISION             |   |
|-------|----------------------|---|
| Title | Original             |   |
| 1     | 2 <sup>nd</sup> Rev. | * |
| 2     | Original             |   |
| 3     | Original             |   |
| 4     | Original             |   |
| 5     | Original             |   |
| 6     | 1 <sup>st</sup> Rev. |   |
| 6.1   | Original             |   |
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| 12    | Original             |   |
| 13    | Original             |   |
| 14    | Original             |   |
| 15    | Original             |   |
| 16    | Original             |   |
| 17    | Original             |   |
| 18    | 2 <sup>nd</sup> Rev. | * |
| 19    | 1 <sup>st</sup> Rev. |   |
| 20    | 2 <sup>nd</sup> Rev. | * |
| 21    | 2 <sup>nd</sup> Rev. | * |
|       |                      |   |

\* - indicates those pages included with this filing

#### 3.4 Institutional Collect Calling Service

NCIC provides Institutional Automated Collect Operator Service to inmates of confinement facilities. Service may be limited by the administrators of the institutions as to availability, call duration or calling scope. Calls are billed to the Called Party. The Called Party must actively accept charges for the call.

Institutional automated collect operator service allows inmates to make collect calls to terminating locations anywhere in the State of Ohio. An automated system prompts the caller and the called party through user - friendly instructions. The called party must accept responsibility for payment of the charges by dialing the designated digit for acceptance. If a call is not accepted within five (5) seconds of the automated voice recording prompt, the automated recording is replayed a second time. If an acceptance digit is not received five (5) seconds after the second recording is completed, the call is terminated by NCIC's system.

Use of the automated collect calling service is subject to the rules and regulations of the Commission. and the institution's administrative restrictions.

#### 3.4.1 Classes of Calls

<u>Automated Collect Station Calls</u>: are calls which are placed by an Inmate who dials all of the digits required to route the call and who follows the NCIC system prompts, enabling the Called Party to accept the charges for the call. If the Called Party does not accept the call, the call is terminated and no billing applies.

#### 3.4.2 Rates and Charges

| <b>A.</b> | Usage Charges:   |        |  |
|-----------|------------------|--------|--|
|           | Rate Per Minute: | \$0.25 |  |

(R)

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| 3.5 | Secure Collect, (Cont'd.) |                   |                                    |        |  |  |  |
|-----|---------------------------|-------------------|------------------------------------|--------|--|--|--|
|     | 3.5.1                     | Rates and Charges |                                    |        |  |  |  |
|     |                           | А.                | Usage Charges:<br>Rate Per Minute: | \$0.25 |  |  |  |

**(D)** 

**(T)** 

(R)

#### 3.6 **Institutional Prepaid Debit Service**

#### 3.6.1 Description

Institutional prepaid debit service allows an inmate to purchase a card or deposit funds into an account. Debit cards or Debit accounts may be funded in any amount subject to the requirements or restrictions of the Confinement Institution. To place a call, the inmate enters a specified Personal Identification Number (PIN) and dials the desired telephone number.

The Company's system automatically informs the caller of the Available Usage Balance remaining in the Prepaid Account, and provides prompts to place the call by entering the destination telephone number. Network usage is deducted from the Available Usage Balance in the account following completion of the call and after it is rated.

Refunds of remaining balances in a Debit Card or Debit Account are refundable upon request, typically after release of the inmate from the Institution. The Available Usage Balance expires six months from the date the last call is made on the account or card. No refunds of unused balances will be issued after the expiration date.

#### **Rates and Charges** 3.6.1 **(T)** Α. **Usage Charges:**

\$0.21

#### Ancillary Service Charges – Maximum 3.7

Rate Per Minute:

A. Automated Payment Fees (where available) - Credit Card payment, debit card payment, and bill processing fees, including fees for payments made by interactive voice response (IVR), web, or kiosk (where available).

Automated payment fees \$3.00

**B**. Live Agent Fee – A fee associated with the optional use of a live operator to complete Inmate Calling Services transactions.

Live Agent Fee \$5.95

С. Paper Bill/Statement Fees - Fees associated with providing customers of Inmate Calling Services an optional paper billing statement.

Paper Bill/Statement Fees \$2.00

**(D)** 

**(T)** 

(R)

Network Communications International Corp. d/b/a NCIC Inmate Communications <u>Exhibit C</u> Description

The purpose of this filing is to revise rates in compliance with rule changes as set forth in Case No. 14-1554-TP-ORD.

# Network Communications International Corp. d/b/a NCIC Inmate Communications

### Exhibit D Customer Notice

Network Communications International Corp. d/b/a NCIC Inmate Communications does not have any presubscribed customers, therefore, no customer notice was provided.

This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

5/24/2018 1:21:05 PM

in

Case No(s). 18-0920-TP-ATA

Summary: Tariff Revision electronically filed by Ms. Margeaux Pennywell on behalf of Network Communications International Corp d/b/a NCIC Inmate Communications