

South Dakota Data Request for
Televergence Solutions
March XX, 2012
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1-1) Does the applicant have financial statements for the year ending December 31, 2011? If so, please provide. If not, please provide an explanation.

Response: Please see attached.

1-2) Per ARSD 20:10:24:02 (9), please provide the cash flow statement. If the cash flow statement is not available, please provide a written request for waiver as described in ARSD 20:10:24:02 (19).

Response: Televergence does not have a Cash Flow Statement. See Attachment II for the waiver request.

1-3) Per ARSD 20:10:24:02 (10), please provide a description of how the applicant handles customer service matters.

Response: Customers can contact the Company through the toll free customer service number [(800) 706 - 5199] which will be provided on the bill and on the Company's website. The Customer Service Department will be open 24 hours per day, 7 days per week.

1-4) Per ARSD 20:10:24:02 (11), please explain how the applicant will bill customers without access to email.

Response: If a valid email address is unavailable a paper bill will be sent to the Customers billing address provided at the time of the sale.

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- 1-5) Please refer to the information provided regarding ARSD 20:10:24:02 (12). Does the applicant intend to prevent the unauthorized switching of **interexchange** customers?

Response: Yes, the Company does intend to prevent the unauthorized switching of interexchange customers by contract with customers or through third party verification.

- 1-6) Per ARSD 20:10:24:02 (15), has the applicant ever been denied registration or certification? If yes, please provide the reasons for any such denial. Is the applicant in good standing with the regulatory agencies? If no, please provide a detailed explanation of why the applicant is not in good standing in a given state.

Response: The Company has never been denied registration or certification in any state.

- 1-7) Per ARSD 20:10:24:02 (16), please provide a description of the applicant's target market.

Response: Business customers

- 1-8) Per ARSD 20:10:24:02 (17), please provide the applicant's South Dakota sales tax number.

Response: The Company's South Dakota sales tax number will be submitted upon receipt.