## **Cancellation of Registration**

## REQUEST FOR CANCELLATION OF REGISTRATION

TO: Washington Utilities & Transportation Commission Attention: Telecommunications Section P.O. Box 47250 Olympia, WA 98504-7250 (Fax) 360-586-1150

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	Docket UT (Commission Use Only)
	(Commission ose only)
The undersigned, _Mark Lammert does hereby (Issuing Agent/Officer of Company)	
request cancellation of _Intellicall Operator Services, Inc registration (Registered Company Name)	
to operate as a telecommunications company doing business in the state of Washingto	on.
Please include the following information:	
Unified Business Identification (UBI) Number: _601-176-499	
Company Contact Person: _Mark Lammert	
Contact Telephone Number:407-260-1011	
The undersigned certify that they have no existing customers and no outstanding prepa	aid calling services.
I understand that this request is not effective until acknowledged upon by the Commiss	ion.
Signature: _	
Date:	12/22/17