INTERNATIONAL SECTION 214 APPLICATION FCC FORM 214 FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Sec. 214 Application to develop and distribute an interantional phone card.

1. Applicant			
Name:	Protocall, LLC	Phone Number:	913-897-2194
DBA Name:		Fax Number:	913-897-9624
Street:	14927 S. Caenen Ln.	E-Mail:	daveprotocall@sbcglobal.net
City:	Olathe	State:	KS
Country:	USA	Zipcode:	66062 –
Attention:	Mr David R Lindgren		

2. Contact				
	Name:	David R. Lindgren	Phone Number:	913-530-9048
	Company:	Protocall. LLC	Fax Number:	913-897-9624
	Street:	14927 S. Caenen Ln.	E-Mail:	daveprotocall@sbcglobal.net
	City:	Olathe	State:	KS
	Country:	USA	Zipcode:	66062 –
	Attention:		Relationship:	Same

3. Place of Incorporation of Applicant Kansas

4. Other Company(ies) and Place(s) of Incorporation

5. Service Type(s) (check all that apply)

X	Global or	Limited	Global	Facilities-	-Based	Authority	(Section	63.18(e)(1))
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Global or Limited Global Resale Authority (Section 63.18(e)(2))

Individual Facilities–Based Service (Section 63.18(e)(3))

Individual Switched Resale Service (Section 63.18(e)(3))

Individual Facilities–Based and Resale Service (Section 63.18(e)(3))

Switched Services over Private Lines (ISR) (Section 63.16 and/or 63.18 (e)(3))

Inmarsat and Mobile Satellite Service (Section 63.18(e)(3))

Overseas Cable Construction (Section 63.18(e)(3))

Individual Non–Interconnected Private Line Resale Service (Section 63.18(e)(3))

Other (Section 63.18(e)(3))

6a	Is	а	fee	submitted	with	this	application?
oa.	19	а	IUU	submitted	WILLI	uns	application:

▲ If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).

Governmental Entity ON Noncommercial educational licensee

Other(please explain):

6b. Fee Classification CUT – Section 214 Authority

7. Destination Country(ies) (e.g.,	Country X", "All international points", "All international points except Country X and Country Y" or
"Countries X, Y, and Z only".)	All international points'

8. Caption (description	of author	rity requeste	d, e.g., Ap	plication f	for Authori	ty to Provid	e Internati	onal Facil	ities-Based and R	Resold Services to
All Internati	onal Points	S Except	Country X)								
(T.O. 1							1 0 1 0			•	

(If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

Application for authoity to develop an international phone card. We would be selling it to our accounts and eventually selling it to resellers.

• Yes

O No

9. Does the applicant request streamlined processing pursuant to 47 C.F.R. Section 63.12? If yes, include in Attachment 1 a statement of how the application qualifies for streamlined processing.

10. If applying for authority to provide switched services over private lines pursuant to Section 63.16, provide the required showing in Attachment 1.

۲	Yes	0
0	Yes	۲
	_	

No

No

14. [Section 63.18(h)] In Attachment 2, provide the name, address, citizenship and principal business of the applicant's ten percent or greater direct and indirect shareholders or other equity holders, and identify any interlocking directorates.

15. In Attachment 2, respond to paragraphs (d), (e)(3) and (g) of Section 63.18.

16. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	۲	Yes	O No	
17. By checking Yes, the applicant certifies that it has not agreed to accept special concessions directly or indirectly from a foreign carrier with respect to any U.S. international route where the foreign carrier possesses sufficient market power on the foreign end of the route to affect competition adversely in the U.S. market and will not enter into such agreements in the future.	۲	Yes	O No	

CERTIFICATION

18. Typed Name of Person Signing (Must be a Corp David Lindgren	,	9. Title of Person Sig President	ning	
WILLFUL FALSE STATEMENTS MAI (U.S. Code, Title 18, Section 1 (U.S. Code, Title 47, Section	001), AND/OR REVOC	CATION OF ANY S	TATION AUTHORIZATION	
20. 1:	2:		3:	

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