

Approved by OMB
3060-0686

INTERNATIONAL SECTION 214 AUTHORIZATIONS FOR ASSIGNMENT OR TRANSFER OF CONTROL FCC 214 MAIN FORM FOR OFFICIAL USE ONLY	FCC Use Only
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APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:
Assignment of 214 Authority

1. Legal Name of Applicant			
Name:	Innovative Solution Systems, Inc	Phone Number:	732-596-0300 x25
DBA Name:		Fax Number:	732-596-1113
Street:	One Woodbridge Center, # 435	E-Mail:	milan@iss-soft.com
City:	Woodbridge	State:	NJ
Country:	USA	Zipcode:	07095 -
Attention:	Mr Milan K Awon		

2. Name of Contact Representative (If other than applicant)

Name:	Mr Milan K Awon	Phone Number:	732-596-0300
Company:	Innovative Solution Systems, Inc	Fax Number:	732-596-1113
Street:	One Woodbridge Center, # 435	E-Mail:	milan@iss-soft.com
City:	Woodbridge	State:	NJ
Country:	USA	Zipcode:	07095-
Contact Title:	President	Relationship:	Same

CLASSIFICATION OF FILING

3. Choose the button next to the classification that best describes this filing. Choose only one.

a. Assignment of Section 214 Authority

An Assignment of an authorization is a transaction in which the authorization, or a portion of it, is assigned from one entity to another. Following an assignment, the authorization will usually be held by an entity other than the one to which it was originally granted. (See Section 63.24(b).)

b. Transfer of Control of Section 214 Authority

A Transfer of Control is a transaction in which the authorization remains held by the same entity, but there is a change in the entity or entities that control the authorization holder. (See Section 63.24(c).)

c. Notification of Pro Forma Assignment of Section 214 Authority (No fee required)

d. Notification of Pro Forma Transfer of Control of Section 214 Authority (No fee required)

Date of Consummation: Must be completed if you select c or d.

4. File Number(s) of Section 214 Authority(ies) for Which You Seek Consent to Assign or Transfer Control.

File Number:IT	File Number:	File Number:	File Number:	File Number:	File Number:	File Number:	File Number:
C214200409070 0353							

5. Name of Section 214 Authorization Holder

Name:	Mr Milan K Awon	Phone Number:	732-596-0300 x25
DBA Name:		Fax Number:	732-596-1113
Street:	One Woodbridge Center,# 435	E-Mail:	milan@iss-soft.com
City:	Woodbridge	State:	NJ
Country:	USA	Zipcode:	07095
Attention:			-

6. Name of Assignor / Transferor

Name:	Mr Siddharth Sharda	Phone Number:	212-564-6511
Company:	TeleTech,Inc	Fax Number:	347-223-5464
Street:	350, 5th Avenue	E-Mail:	sharda@iss-soft.com
	Suite # 1416		
City:	New York	State:	NY
Country:	USA	Zipcode:	10118
			-
Contact Title:	Financial Analyst	Relationship:	Other

7. Name of Assignee / Transferee

Name:	TeleTech,Inc	Phone Number:	212-564-6511
DBA Name:		Fax Number:	347-223-5464
Street:	350, 5th Avenue	E-Mail:	sharda@iss-soft.com
	Suite # 1416		
City:	New York	State:	NY
Country:	USA	Zipcode:	10118
			-
Attention:	Mr Siddharth Sharda		

8a. Is a fee submitted with this 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 Noncommercial educational licensee Notification of Pro Forma (No fee required.)
- Other(please explain):

8b. You must file a separate application for each legal entity that holds one or more Section 214 authorizations to be assigned or transferred.

Fee Classification CUT – Section 214 Authority

9. Description (Summarize the nature of the application.)

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

Innovative Solution Systems, Inc the applicant wants to Assign its 214 authorization to TeleTech, Inc unconditionally and Voluntarily.

10. In Attachment 1, please respond to paragraph (c) and (d) of Section 63.18 with respect to the assignor/transferor and the assignee/transferee. Label your response "Answer to Question 10".

11. Does any entity, directly or indirectly, own at least ten (10) percent of the equity of the assignee/transferee as determined by successive multiplication in the manner specified in the note to Section 63.18(h) of the rules?

No

Yes

If you answered "Yes" to this question, provide in Attachment 1, the name, address, citizenship, and principal businesses of each person or entity that directly or indirectly owns at least ten (10) percent of the equity of the assignee/transferee, and the percentage of equity owned by each of those persons or entities (to the nearest one percent). Label your response "Answer to Question 11."

12. Does the assignee/transferee have any interlocking directorates with a foreign carrier?

Yes

No

If you answered "Yes" to this question, identify each interlocking officer/director in Attachment 1. (See Section 63.09(g).) Provide the name and position/title of the individual or entity, the name of the foreign carrier, and the country in which the foreign carrier is authorized to operate. Label your response: "Answer to Question 12."

13. Provide in Attachment 1 a narrative of the means by which the proposed assignment or transfer of control will take place. In circumstances of a substantial assignment or transfer of control pursuant to Section 63.24(e), where the assignor seeks authority to assign only a portion of its U.S. international assets and/or customer base, please specify whether the assignor requests authority to continue to operate under any or all of its international Section 214 File Nos. after consummation; and, if so, please specify in Attachment 1 each File No. it seeks to retain in its own name. Label your response "Answer to Question 13."

Note: The assignor may retain any or all of its international Section 214 File Nos. In that case, the assignor will continue to hold the international section 214 authorizations that it specifies in response to this question. The ITC-ASG File No. that the Commission assigns to this application will, when granted, constitute Commission authorization of the proposed assignment of assets and /or customers from the assignor to the assignee. Unless Commission grant of the assignment application specifies otherwise, the assignee may provide the same services on the same routes as permitted under the assignor's Section 214 authorization(s), and the assignee may provide such service to any customers it may obtain in the ordinary course of business.

Applicant certifies that its responses to questions 21 through 25 are true:

21. The assignee/transferee 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 any such agreements in the future.	<input type="radio"/> No	<input checked="" type="radio"/> Yes
22. By signing this application, the undersigned certify either (1) that the authorization(s) will not be assigned or that control of the authorization(s) will not be transferred until the consent of the Federal Communications Commission has been given, or (2) that prior Commission consent is not required because the transaction is subject to the notification procedures for pro forma transactions under Section 63.24 of the rules. The assignee/transferee also acknowledges that the Commission must be notified by letter within 30 days of a consummation or of a decision not to consummate. (See Section 63.24(e)(4).)	<input type="radio"/> No	<input checked="" type="radio"/> Yes
23. If this filing is a notification of a pro forma assignment or transfer of control, the undersigned certify that the assignment or transfer of control was pro forma and that, together with all previous pro forma transactions, does not result in a change in the actual controlling party.	<input type="radio"/> No	<input checked="" type="radio"/> Yes
24. The undersigned certify that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	<input type="radio"/> No	<input checked="" type="radio"/> Yes
25. The assignee/transferee certifies that neither it nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.	<input type="radio"/> No	<input checked="" type="radio"/> Yes

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT
(U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION
(U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).

CERTIFICATION

26. Printed Name of Assignor / Transferor Innovative Solution Systems,Inc	29. Printed Name of Assignee / Transferee TeleTech,Inc
27. Title (Office Held by Person Signing) President	30. Title (Office Held by Person Signing) President
28. Signature (Enter the name of the person who will sign the paper version of this form for retention in their files) Milan K Awon	31. Signature (Enter the name of the person who will sign the paper version of this form for retention in their files) Lata Awon

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