

# TENNESSEE REGULATORY AUTHORITY

Executive Secretary

Sara Kyle, Chairman  
Lynn Greer, Director  
Melvin Malone, Director



Director

PAID T.R.A.

Chk # 0080  
Amount 25.00  
Rcvd By JP  
Date 5-8-02  
460 James Robertson Parkway  
Nashville, Tennessee 37243-0505

## APPLICATION FOR AUTHORITY TO PROVIDE CUSTOMER-OWNED COIN (OR COINLESS) OPERATED TELEPHONE SERVICE IN TENNESSEE (RULE 1220-4-2-.43 TO .54) SECTION A

Company ID Number 128787 Docket Number 02-00710  
(To Be filled out by the TRA)

### Part 1: General Information

Name of Applicant Cocaine & Alcohol Awareness Program Inc.

Address 3835 Lamar Avenue

State TN Zip Code 38118 Phone No: (901) 794 - 0915

Name and telephone number of contact person authorized to respond to Authority inquiries Monday through Friday.

Albert Richardson 901 794-0915  
Name Telephone

3835 Lamar Avenue Memphis, TN. 38118  
Address City State Zip

Mail the completed application and a check for \$25.00 to: Tennessee Regulatory Authority, 460 James Robertson Parkway, Nashville 37243-0505. Should you have any questions please call Dee Audrain at (615) 741-2904, Ext. 217.

Toll Free 1-800-342-8359

Facsimile (615) 741-2336

*Lynn Gray*  
Call- 901-487-6831

*7 locations*  
*more 3 10 phones*

**BEFORE THE TENNESSEE REGULATORY AUTHORITY**

Nashville, TN

July 23, 2002

IN RE: Company ID: 128787

Cocaine & Alcohol Awareness Program, Inc. CASE NUMBER:02-00710  
3835 Lamar Avenue  
Memphis, TN 38118

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**ORDER-GRANTING AUTHORITY TO PROVIDE  
CUSTOMER OWNED COIN OR COINLESS  
OPERATED TELEPHONE SERVICE**

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This matter is before the Tennessee Regulatory Authority upon the application of the above-mentioned company to be an operator of Customer Owned Coin Operated Telephone Service (COCOTs) in Tennessee. The TRA considered this application at a Conference held on July 23, 2002 and concluded that the applicant has met all the requirements to provide COCOT service in Tennessee.

**IT IS THEREFORE ORDERED:**

1. That the above-mentioned company is authorized to provide COCOT service within the state of Tennessee and is required to post the above referenced Company ID number on the display card for each COCOT.
2. That this order permit shall remain in effect until further order of this Authority.
3. That this order shall be retained as proof of certification with this Authority, and may be used to obtain the appropriately tariffed access line from Authority authorized telecommunications service providers.

  
Chairman Sara Kyle

  
Director Pat Miller

  
Director Ron Jones

**TENNESSEE REGULATORY AUTHORITY**  
**2011-2012 INSPECTION FEE**  
**FOR CUSTOMER OWNED COIN OPERATED TELEPHONES (COCOTS)**

COMPANY ID 128787

Cocaine & Alcohol Awareness Program Inc.  
3835 Lamar Avenue  
Memphis, TN 38118

**RECEIVED**  
**FISCAL OFFICE**

JUL 24 2012

CHK # 10499 SOURCE R422-12  
DEP # 531 AMT 120.00

Please calculate and submit to the TRA your company's appropriate COCOT inspection fee by July 1, 2012. Failure to submit the proper fees could result in the disconnection of your COCOTs.

1. Total number of COCOTs operated by your company as of July 1, 2011 12
2. Total number of COCOT additions between July 1, 2011 and June 30, 2012 0
3. Total number of COCOT deletions between July 1, 2011 and June 30, 2012 0
4. Total COCOTs as of June 30, 2012  
(line 1 plus line 2, subtract line 3) 12
5. **Fee due (Total COCOTS shown on line 4 x \$10.00)** \$ 120  
If Line 4 is 0 and you wish to retain your authority, please send fee of \$10.00.

I, the undersigned owner, president, or officer of the above named COCOT provider, being first duly sworn, on oath, state the number of COCOTs operated by said company and the inspection fee computed therefrom are accurate.

NAME Megana Beale  
(Please Print)

SIGNATURE [Signature]

TITLE Administrative Assistant

FAX NO 901.360.0805  
TELEPHONE 901.360.0442

If you are no longer in this business and would like to cancel your authority, please sign below.

**PLEASE CANCEL MY AUTHORITY TO OPERATE COCOTs IN TENNESSEE, AS I HAVE CLOSED THE TELECOM BUSINESS.**

Please return form with enclosed payment to:

Tennessee Regulatory Authority  
Attn: Dee Audrain  
460 James Robertson Parkway  
Nashville, TN 37243-0505  
Dee.audrain@tn.gov

**RECEIVED**

JUL 25 2012

TN REGULATORY AUTHORITY  
UTILITIES DIVISION

**TENNESSEE REGULATORY AUTHORITY**  
**2010-2011 INSPECTION FEE**  
**FOR CUSTOMER OWNED COIN OPERATED TELEPHONES (COCOTS)**

COMPANY ID 128787

Cocaine & Alcohol Awareness Program Inc.  
3835 Lamar Avenue  
Memphis, TN 38118

**RECEIVED**  
**FISCAL OFFICE**

JUL 18 2011

CK # 2992 SOURCE RA 22-12  
DEP # 388 AMT 100.00

Please calculate and submit to the TRA your company's appropriate COCOT inspection fee by July 1, 2011. Failure to submit the proper fees could result in the disconnection of your COCOTs.

1. Total number of COCOTs operated by your company as of July 1, 2010 \_\_\_\_\_
2. Total number of COCOT additions between July 1, 2010 and June 30, 2011 \_\_\_\_\_
3. Total number of COCOT deletions between July 1, 2010 and June 30, 2011 10
4. Total COCOTs as of June 30, 2011 (line 1 plus line 2, subtract line 3) 10
5. **Fee due (Total COCOTS shown on line 4 x \$10.00)** \$ 100.00  
If Line 4 is 0 and you wish to retain your authority, please send fee of \$10.00.

I, the undersigned owner, president, or officer of the above named COCOT provider, being first duly sworn, on oath, state the number of COCOTs operated by said company and the inspection fee computed therefrom are accurate.

NAME WALI SHAHED  
(Please Print)

SIGNATURE Wali Shahed

TITLE FINANCIAL OFFICER

FAX NO (901) 360-0865  
TELEPHONE (901) 360-0442

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Nashville, TN 37243-0505  
Dee.audrain@tn.gov

**RECEIVED**

JUL 18 2011

TN REGULATORY AUTHORITY  
UTILITIES DIVISION

**TENNESSEE REGULATORY AUTHORITY**  
**2009-2010 INSPECTION FEE**  
**FOR CUSTOMER OWNED COIN OPERATED TELEPHONES (COCOTS)**

**COMPANY ID :** 128787

Cocaine & Alcohol Awareness Program Inc.  
3835 Lamar Avenue  
Memphis, TN 38118-0000

**RECEIVED**  
**FISCAL OFFICE**

APR 19 2010

CK # 4970 SOURCE RA 22-RA17  
DEP # 204 AMT 100.00

Please calculate and submit to the TRA your company's appropriate COCOT inspection fee by July 1, 2010. Failure to submit the proper fees could result in the disconnection of your COCOTs.

1. Total number of COCOTs operated by your company as of July 1, 2009 10
2. Total number of COCOT additions between July 1, 2009 and June 30, 2010 0
3. Total number of COCOT deletions between July 1, 2009 and June 30, 2010 0
4. Total COCOTs as of June 30, 2010  
(line 1 plus line 2, subtract line 3) 10
5. **Fee due (Total COCOTS shown on line 4 x \$10.00)** \$ 100.00  
If Line 4 is 0 and you wish to retain your authority, please send fee of \$10.00.

I, the undersigned owner, president, or officer of the above named COCOT provider, being first duly sworn, on oath, state the number of COCOTs operated by said company and the inspection fee computed therefrom are accurate.

NAME WALI SHAHED  
(Please Print)

SIGNATURE Wali Shahed

TITLE Fiscal Officer

TELEPHONE (901) 360-0442

If you are no longer in this business and would like to cancel your authority, please sign below.

**PLEASE CANCEL MY AUTHORITY TO OPERATE COCOTs IN TENNESSEE, AS I HAVE CLOSED THE TELECOM BUSINESS.**

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Tennessee Regulatory Authority  
Attn: Dee Audrain  
460 James Robertson Parkway  
Nashville, TN 37243-0505  
Dee.audrain@tn.gov

**RECEIVED**

APR 19 2010

TN REGULATORY AUTHORITY  
UTILITIES DIVISION

**TENNESSEE REGULATORY AUTHORITY**  
**2008-2009 INSPECTION FEE**  
**FOR CUSTOMER OWNED COIN OPERATED TELEPHONES (COCOTS)**

COMPANY ID: 128787

Cocaine & Alcohol Awareness Program Inc.  
3835 Lamar Avenue  
Memphis, TN 901-794-091538118

Please calculate and submit to the TRA your company's appropriate COCOT inspection fee by July 1, 2009. Failure to submit the proper fees could result in the disconnection of your COCOTs.

1. Total number of COCOTs operated by your company as of July 1, 2008 10
2. Total number of COCOT additions between July 1, 2008 and June 30, 2009 2
3. Total number of COCOT deletions between July 1, 2008 and June 30, 2009 < 2 >
4. Total COCOTs as of June 30, 2009 (line 1 plus line 2, subtract line 3) 10
5. **Fee due (Total COCOTS shown on line 4 x \$10.00)** \$ 100.00  
If Line 4 is 0 and you wish to retain your authority, please send fee of \$10.00.

I, the undersigned owner, president, or officer of the above named COCOT provider, being first duly sworn, on oath, state the number of COCOTs operated by said company and the inspection fee computed therefrom are accurate.

NAME ADAM RICHARDSON, JR  
(Please Print)

SIGNATURE [Signature]

TITLE EXECUTIVE DIRECTOR

TELEPHONE (901) 360-0442

If you are no longer in this business and would like to cancel your authority, please sign below.

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Tennessee Regulatory Authority  
Attn: Dee Audrain  
460 James Robertson Parkway  
Nashville, TN 37243-0505  
Dee.audrain@state.tn.us

VOUCHER NO. 4304  
CC RA22 SRG. RA22  
AMT. REC. 100.00  
DEPOSIT DATE 7/21/09