

FCC Form 499-Q Telecommunications Reporting Worksheet

Quarterly Filing for Universal Service Contributors

> Please read instructions before completing <

Approval by OMB
3060-0855

Block 1: Contributor Identification Information		101	Filer 499 ID	829143
102	Legal name of reporting entity	Executive Systems, Inc.		
103	Filer's IRS employer identification number	54-0834905		
104	Name telecommunications provider is doing business as	Executive Systems, Inc.		
105	Affiliated Filers Name/Holding Company Name <small>[All affiliated companies should show same name here. In most cases, the Affiliated Filers Name will be the holding company name.]</small>	Check if filer has no affiliates: <input checked="" type="checkbox"/>		
105.1	Affiliated Filers Name/Holding Company Name IRS employer identification number			
106	Filer's FCC Registration Number (FRN)	0021-4935-49		
107	Complete mailing address of reporting entity's corporate headquarters	2113 Spencer Road, Richmond VA 23230-2657 United States		

Block 2: Contact Information				
108	Person who completed this worksheet	First Nita	MI R	Last Putnam
109	Telephone number of this person	(804) - 288-0041 ext 0		
110	Fax number of this person	() -		
111	Email of this person	nitaputnam@esitd.com		
112	Billing address and billing contact person: <small>[Bills for Universal Service contributions will be sent to this address.]</small>	Nita 2113 Spencer Road Richmond nitaputnam@esitd.com	Putnam VA 23230 2657 United States 804 288-0041 218 804 288-4731	

Block 3: Contributor Historical and Projected Revenue Information				
113	Indicate which quarterly filing this represents	<input checked="" type="checkbox"/> Filing due November 1, 2017	Historical revenues (lines 115-118) for July 1 - September 30, 2017	Projected revenues (lines 119-120) for January 1 - March 31, 2018
		<input type="checkbox"/> February 1, 2018	October 1 - December 31, 2017	April 1 - June 30, 2018
		<input type="checkbox"/> May 1, 2018	January 1 - March 31, 2018	July 1 - September 30, 2018
		<input type="checkbox"/> August 1, 2018	April 1 - June 30, 2018	October 1 - December 31, 2018

114 Check if using safe harbor to allocate interstate/intrastate revenues for each of the following (as applicable): Cellular & broadband PCS: <input type="checkbox"/> Paging: <input type="checkbox"/> Analog SMR: <input type="checkbox"/> Interconnected VoIP: <input type="checkbox"/>				
Historical billed revenues with no allowance or deductions for uncollectibles. See Instructions.		Total Revenues (a)	Interstate Revenues (b)	International Revenues (c)
115	Telecommunications provided to other universal service contributors for resale as telecommunications or as or as interconnected VoIP.	\$0.00	\$0.00	\$0.00
116	End-user telecommunications revenues including any pass-through charges for universal service contributions, but excluding international-to-international revenues	\$26,727.60	\$17,346.21	\$0.00
117	All other goods and services	\$18,431.76	Column (b) and (c) not requested for Lines 117 and 118	
118	Gross-billed revenues from all sources [sum of above]	\$45,159.36		
119	Projected gross-billed end-user interstate and international telecommunications revenues including any pass-through charges for universal service contributions, but excluding international-to-international revenues		\$17,346.21	\$0.00
120	Projected collected end-user interstate and international telecommunications revenues including any pass-through charges for universal service contributions, but excluding international-to-international revenues		\$17,346.21	\$0.00

Block 4: CERTIFICATION: to be signed by an officer of the reporting entity				
121 I certify that the revenue data contained herein are privileged and confidential and that public disclosure of such information would likely cause substantial harm to the competitive position of the company. I request nondisclosure of the revenue information contained herein pursuant to sections 0.459, 52.17, 54.711 and 64.604 of the Commission's Rules.				<input checked="" type="checkbox"/>
I certify that I am an officer of the above-named reporting entity, that I have examined the foregoing report and to the best of my knowledge, information and belief, all statements of fact contained in this Worksheet are true, that said Worksheet is an accurate statement of the affairs of the above-named company for the quarter and that the projections of gross-billed and collected revenues represent a good-faith estimate based on company procedures and policies.				
122	Signature			
123	Printed name of officer	First Nita	MI R	Last Putnam
124	Position with reporting entity	President		
125	Email of officer (Required if available)	nitaputnam@esitd.com		
126	Date			
127	This filing is:	<input type="checkbox"/> Original filing <input checked="" type="checkbox"/> Revised filing [revisions due within 45 days of original filing deadline]		

Do not mail checks with this form. Send this form to: Form 499 Data Collection Agent c/o USAC 700 12th Street, N.W. Suite 900 Washington DC 20005

For additional information regarding this worksheet contact: Telecommunications Reporting Worksheet Info: (888)641-8722 or via e-mail: Form499@universalservice.org

PERSONS WILLFULLY MAKING FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. §1001

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