

FCC Form 2301 (a)

In the Matter of Interstate Inmate Calling Services
WC Docket No. 12-375
Annual Reporting Form

OMB Control No. 3060-1222

Instructions: Please read this form carefully before completing. This form is to be completed by an officer of each provider of inmate calling services (ICS). If the provider seeks confidential treatment of any information, consistent with our rules and the Protective Order in place in this proceeding, it should identify the specific information which it claims is subject to confidential treatment.

I. Basic Information

1. Provider Name: ATN, Inc	2. Reporting Period: 01/01/2018 - 12/31/2018
3. Officer Name, Title: Wyman Westberry, CEO	
4. Officer Telephone Number: 800-849-6081	5. Officer E-Mail Address: mompop@net-magic.net
6. Total Number of Correctional Facilities Served by Provider: ***	
7. Number of Prisons Served by Provider: ***	
8. Number of Jails Served by Provider with Average Daily Population (ADP) of 0-350: ***	
9. Number of Jails Served by Provider with ADP of 350-999: ***	
10. Number of Jails Served by Provider with ADP of 1000 or more: ***	

II(a). Narrative Description of ICS Rates

- 1. In this space, please list all per-minute intrastate rates that are different from the provider's average Intrastate Rate (*see* Section II, Column 4):**



- 2. In this space, please list all per-minute interstate rates that are different from the provider's average Interstate Rate (*see* Section II, Column 6):**



III. Ancillary Service Charges

[illegible]

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[illegible]

[illegible]

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[illegible]

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[illegible]

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[illegible]

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[illegible]

IV. Variable Site Commission Payments

[illegible]

REDACTED - FOR PUBLIC INSPECTION

V. Fixed Site Commission Payments

[illegible]

[illegible]

