## OFGINAL

L 001035-7X

## **APPLICATION**

	1.	This	is an application for √	(check one):	DEPOSIT	DATE		
		(1)	Original certificate	(new company).	D341	AUG 0 4 2000		
		<ul> <li>Approval of transfer of existing certificate: <u>Example</u>, a non-certificated company purchases an existing company and desires to retain the original certificate of authority.</li> </ul>						
		( )		nment of existing cert is an existing company a company.				
	•	( )		er of control: Example y. The Commission mo				
:	2.	Namo	e of company: Budge 1	1 Comm				
NPP; CAF CMP	3.	Name under which the applicant will do business (fictitious name, etc.):  Same  Official mailing address (including street name & number, post office box, city, state, zip code):  601 N. Tennille Ave.						
COMCTRCTRCCRCCRCDPC								
PAI RGO SEC		<del></del>	P. O. Box	573				
SER	•		_	16, GA 317				
		Florio	•	street name & number	, post office box, city	΄, state, zip	pak ayir ka	
		TH TENI	COMMUNICATIONS FEI #58-3347535 NILLE AVENUE PH. 912-524-00 P. O. BOX 573 LSONVILLE, GA 31745		Date <u>8-/-</u>	120 64-11477		
Pay to the order of	F	Tori	1 Public- So	ervice (ommiss		<u>        \$ 250 ∞                                    </u>		
- 100 /		FEDERA	MERCIAL STATE BANK IL DEPOSIT INSURANCE CORPORATIO DNALSONVILLE, GEORGIA	DOCUMENT NUM	BER-DATE	Dollars 🗗	Andre on back.	
or for	F	<u>ee</u>	<b>117∩∩</b> ••©	09454	AUG-20Ey	Lonus	MP	
		11-11	TECHNICS C.		(2.10)		94 and 24	

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## **APPLICATION**

This is an application for √ (check one):	DEPOSIT	DATE
( V) Original certificate (new company).	D341	AUG 0 4 2000
Name of company:  Budget Comm		
Name under which the applicant will do business (fi	•	.):
zip code):  601 N. Tennille Aue.  P. O Box 573		
,	oost office box, city	, state, zip
	( ) Approval of transfer of existing certificate company purchases an existing company ar certificate of authority.  ( ) Approval of assignment of existing certificate company purchases an existing company are of authority of that company.  ( ) Approval of transfer of control: Example, a certificated company. The Commission must entity.  Name of company:  Budget Comm  Name under which the applicant will do business (for Same)  Official mailing address (including street name & not zip code):  Box 573  Donalsonville, GA 3174  Florida address (including street name & number, pecode):  No Office in Florida	( ) Approval of transfer of existing certificate: Example, a non-company purchases an existing company and desires to retain certificate of authority.  ( ) Approval of assignment of existing certificate: Example, a company purchases an existing company and desires to retain of authority of that company.  ( ) Approval of transfer of control: Example, a company purchase certificated company. The Commission must approve the new entity.  Name of company:  Budget Comm  Name under which the applicant will do business (fictitious name, etc.  Same  Official mailing address (including street name & number, post office trip code):  Box 573  Donalsonville, G A 31745  Florida address (including street name & number, post office box, city code):  No Office in Florida