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January 18, 2005
Arizona Corporation Commission
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Mr. Stanley H. Golove
Econodial, LLC
50 Broadway, Suite 1205
New York, New York 10004

RE: Staff's Letter of Insufficiency and First Set of Data Requests to Econodial, LLC Docket
No. T-04116A-05-0009

Dear Mr. Golove:

On January 10, 2005, Econodial, LLC. ("Applicant") filed an application for a Certificate of Convenience and Necessity ("CC&N") to discontinue telecommunication services in the State of Arizona. The application is not yet sufficient. This data request lists the information Staff needs to complete its analysis of your application. Please treat this, as Staff's first set of data requests to the Applicant in the above-referenced matter.

For purposes of this data request set, the words "Applicant", "the Company", "you", and "your" refer to Econodial, LLC and any representative, including every person and/or entity acting with, under the control of, or on behalf of Econodial, LLC. For each answer, please identify by name, title, and address each person providing information that forms the basis for the response provided.

These data requests are continuing, and your answers or any documents supplied in response to these data requests should be supplemented with any additional information or documents that come to your attention after you have provided your initial responses.

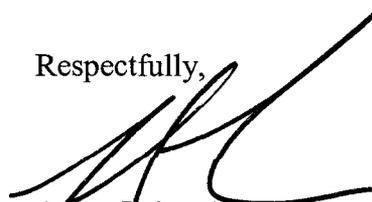
Please provide Docket Control with the information being requested within **10 days** of the date of this letter. Mail an original plus 13 copies to Docket Control, Arizona Corporation Commission, 1200 W. Washington Street, Phoenix, AZ 85007-2927. If no response is received or all deficiencies are not remedied within 10 days, Staff will recommend that the application be terminated as per Rule R14-2-1103(B)3 and R14-2-510(E)3. If the application is terminated, the Applicant cannot provide the same telecommunications services in Arizona for which it is currently applying, until such time as a new application is filed with and approved by the Commission.

January 18, 2005

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Remember that information submitted for a CC&N will be made a part of the public record (including financial statements). Any information designated as confidential will not be accepted by Docket Control. If you have any questions, please contact me at (602) 364-0235. Thank you for your prompt response to this request.

Respectfully,

A handwritten signature in black ink, appearing to read 'AL', written over the printed name 'Adam Lebrecht'.

Adam Lebrecht
Executive Consultant I
Utilities Division

Enclosure(s)

CC: Docket Control Center (Original and Thirteen Copies)

STAFFS FIRST SET OF DATA REQUESTS FOR
ECONODIAL, LLC
DOCKET NO. T-04116A-05-0009

Please make sure each numbered item and each part of the item is answered completely. In order for Staff to continue with its review of this application, the following information must be submitted:

1. Has the Applicant ever had any customers? If yes, please continue. If no, there is no need to answer the following questions.
2. Please indicate the service(s) the Applicant wishes to cancel its authority to provide.
3. Please indicate if the Applicant's performance bond (if required) is still valid.
4. Please indicate if the Applicant has ever collected advances, deposits and/or prepayments. Indicate if the advances, deposits and/or prepayments were returned to customers prior to the discontinuance of the service(s) indicated in question No. 2.
5. Please indicate when (year and month) the Applicant discontinued providing the services indicated in question No. 2.
6. Please indicate the number of residential and business customers the Applicant had in the Applicant's last month of providing service.
7. Please indicate if customers were notified of the Applicant's discontinuance of service. Please provide a copy of the customer notification sent and indicate the date it was sent. If no notice was sent, please explain why.
8. Please indicate if customers were transferred to another telecommunications carrier. Indicate the telecommunications carrier the customers were transferred to and the number of customers transferred.
9. Please indicate if there are any affiliates of the Applicant currently offering telecommunications service in Arizona.
10. Please indicate any other states the Applicant is currently providing the telecommunications services indicated in question No. 2.
11. Please provide a copy of the legal notice of the Application to cancel in all counties affected by the Application. Counties affected are those that the Applicant is certificated to provide service in. Refer to Arizona Administrative code R14-2-1107(B).