



Filing Receipt

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Control Number - 48411

Item Number - 190



Public Utility Commission of Texas

1701 N. Congress Avenue or P.O. Box 13326

Austin, Texas 78711-3326

512-936-7180

Web Site: www.puc.texas.gov

Project No. 48411, Item No. _____

REGISTRATION FOR AN INTEREXCHANGE CARRIER, PREPAID CALLING SERVICES COMPANY AND OTHER UNCERTIFICATED NONDOMINANT TELECOMMUNICATIONS CARRIER

Registrant Name (Name under which services will be provided):

Wes-Tex Telecommunications Ltd

Legal Name of Registrant and all assumed names under which the Registrant conducts business in Texas or any other state, if any:

Wes-Tex Telecommunications Ltd

Assumed Name:

Westex Telecom

1. Type of Registration (mark ALL that apply):

☒

IXC (Long Distance Carrier)

☐ Pre Paid Calling Card Provider

☐ Pre Paid Local Calling Services

☐ Pre Paid Domestic Long Distance Calling Services

☐ Pre Paid International Long Distance Calling Services

☐ Other: _____

2. Company Contact Information

Company Contact Name: Liz Kayser

Company Title: Interim General Manager

Company/Physical Address (Street Address): 1500 West Business 20

(Suite, Floor, Apartment Number, etc.): _____

(City, State, Zip Code): Stanton TX 79782

Phone Number: 432-756-3393

Email Address: lkayser@reglp.com

Fax Number (Optional): 432-756-2659

Toll-free Customer Service Phone Number: 888-221-8984

Company Website Address (Optional): www.westex.coop

3. Mailing Address (If different from the Physical Address):

(Street Address/P.O. Box): PO Box 1329

(Suite, Floor, Apartment Number, etc.): _____

(City, State, Zip Code): Stanton TX 79782

4. Authorized Representative:

Name: Liz Kayser
Company Title: Interim General Manager
Address (Street Address): 1500 West Business 20
(Suite, Floor, Apartment Number, etc.): _____
(City, State, Zip Code): Stanton TX 79782
Phone Number: 432-756-3393
Fax Number (Optional): 432-756-2659
Email Address: lkayser@regllp.com

5. Regulatory Representative:

Name: Liz Kayser
Company Title: Interim General Manager
Address (Street Address): 1500 West Business 20
(Suite, Floor, Apartment Number, etc.): _____
(City, State, Zip Code): Stanton TX 79782
Phone Number: 432-756-3393
Fax Number (Optional): 432-756-2659
Email Address: lkayser@regllp.com
L.kayser@regllp.com

6. Complaint Representative:

Name: Connie Weaver
Company Title: Customer Service Manager
Address (Street Address): 1500 West Business 20
(Suite, Floor, Apartment Number, etc.): _____
(City, State, Zip Code): Stanton TX 79782
Complaint Phone Number: 432-756-3393
Phone Number: 888-221-8984
Fax Number (Optional): 432-756-2659
Email Address: cweaver@westex.coop

7. Emergency Contact (List a primary and a secondary contact)

Name: Mike Moreno and Connie Weaver
Company Title: Central Office Supervisor / Customer Service Manager
Phone Number: 432-756-3393
Fax Number (Optional): 432-756-2659
Cell Phone Number (Optional): _____
Home Phone Number (Optional): _____
Email Address: mmoreno@westex.coop / cweaver@westex.coop

8. **Form of Business** (corporation, partnership, sole proprietorship, etc.): Corporation
State and Date where registered business was formed: Texas
Texas Secretary of State (or County) File Number: 800040329
Texas Comptroller's office Tax Id. No.: 75-2231229

9. **Carrier Identification:**

FCC Carrier Identification Code (CIC) (if available): WEA
National Exchange Carriers Association (NECA) Operating Carrier Numbers (OCNs) (if available): 3282

10. **Affiliates:**

Names of all Telecommunications Affiliates: Wes-Tex Telephone Cooperative, Inc
States where Affiliates are Providing Services: Texas
Affiliates in Texas -- Provide Certification/Registration Number and relationship to registrant:

Provide Organizational Chart (if available).

11. **Owners, Directors, Officers, or Partners Information (List the information requested below for each person):**

Name: Joe D Schwartz
Company Title: President (Board of Directors)
Phone Number: 432-756-3393
Email Address: _____

12. **Legal Status:**

Are any owners, directors, officers, or partners in the organization convicted felons? If yes, provide a detailed explanation:

No

AFFIDAVIT

STATE OF Texas §
§
COUNTY OF Martin §

1. My name is Ann Quaid. I am the
Chief Financial Officer of the reporting company
Wps-Tex Telecommunications Ltd

2. I swear or affirm that I have personal knowledge of the facts stated in this report on Non-dominant Carriers, that I am competent to testify to them, and that I have the authority to make this report on behalf of the company. I further swear or affirm that all of the statements and representations made in this report are true and correct. I swear or affirm that the company understands and will continue to comply with all requirements of law applicable to Non-dominant Carriers.

Ann Quaid
Signature

Ann Quaid
Typed or Printed Name

SWORN TO AND SUBSCRIBED before me on the 19th day of May, 2023.

Brandy Harvick
Notary Public In and For the
State of Texas

My commission expires: 03/23/26

