

SERVICE AREA: 0621 0362
CELLCOM GREEN BAY

SERVICE ORDER REPORT
COMPLETE ORDER - OFFICE COPY
ORDER #: 66651

DATE: 03/09/95
TIME: 10:18

Type: C CHANGE Issued: 03/09/95 Completed: 03/09/95 Cust Rep: COLLE
Last Order #:60712 Due: 03/09/95 Effective: 03/06/95 Batch ID: 950007

--- CUSTOMER INFORMATION ---

CUST # 414 621 8768 BILL TO: CUST # 999 999 0875
MS DATE 05/29/92 MS DATE 05/29/92

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|------------------|--|--|
| BIL NAME/ADDRESS | CURT WATSON 4019 BUCKEYE WAY GREEN BAY WI 543110000 | CURT WATSON 4019 BUCKEYE WAY GREEN BAY WI 543110000 |
| HOM NAME/ADDRESS | CURT WATSON 4019 BUCKEYE WAY GREEN BAY WI 543110000 | CURT WATSON 4019 BUCKEYE WAY GREEN BAY WI 543110000 |

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|------------------|-----------------|-----------------|
| * WELCOME PACKET | N | Y |
| * PROMOTIONAL | | MR95 |
| * PHONE MAKE | NOVAT | MOTOR |
| * PHONE MODEL | PTR800 | ALPHA FLIP |
| * MODEL NUMBER | 722052 | 6746VAQL32 |
| * UNIT CK CODE | 768 | 504 |
| * ELEC SERIAL NO | 14201131755 | 19516009271 |

---- CHARGE INFORMATION ----

| ACT | TYP | ITEM CODE | DESCRIPTION | FIELD | OLD DATA | NEW DATA |
|-----|-----|-----------|-------------|-------|----------|----------|
|-----|-----|-----------|-------------|-------|----------|----------|

----- COMMENTS -----

```
DATE: 01/25/95          01  CELLCOM                      cdb053  1.1
2:.....:3
6  MOBILE: (715) 493-2965      MS DATE: 01/10/95      6
6  BILL TO:                      FINAL:                  6
6  NAME: BRULE RIVER SNOWMOBILE  LAST SO: 01/11/95     6
6  NAME2: CLUB INC.           CONTACT:                6
6  ADDR: 7915 4TH STREET      6
6  ADDR2:                      6
6  CITY: ALVIN                WI  54542-0000        6
6  TERRITORY: 30              6
6  AGENT: 00911 RHINELANDER TELEPHON  UNLOCK: 00000        6
6  ESN: 13004788194          SERIAL #:              6
6  HOME PHONE: (000) 000-0000  WORK PHONE: (715) 545-2456 6
6  BALANCE: 0.00              MAKE: MOTOROLA        6
6PAST DUE 30: 0.00           MODEL:                 6
6PAST DUE 60: 0.00           MODEL-NUM: 781GSC7713 6
6PAST DUE 90: 0.00           TYPE: T                6
6PAYMENT-AMT: 0.00          6
1:.....:5
```

Press space bar to continue.

SERVICE AREA: 0621 0362
CELLCOM GREEN BAY

SERVICE ORDER REPORT
COMPLETE ORDER - OFFICE COPY
ORDER #: 66652

DATE: 03/09/95
TIME: 10:23

| | |
|----------------|--------------------|
| PHONE MODEL | BC901 |
| MODEL NUMBER | 04115881 |
| PHONE TYPE | T |
| ANTENNA TYPE | ROOF |
| ELEC SERIAL NO | <u>16202648783</u> |

---- CHARGE INFORMATION ----

| ACT | TYP | ITEM CODE | DESCRIPTION | FIELD | OLD DATA | NEW DATA |
|-----|-----|-----------|-------------|-------|----------|----------|
|-----|-----|-----------|-------------|-------|----------|----------|

Cust #: 414 600 3376 MS Date: 3/06/95 Order #: 66652 Page: 2

| | | | | | | |
|----|-----|-------|-------------------------------|------------|----------|----------|
| IN | REF | ACTSA | TIMESAVER PLAN MO SERVICE CHG | QTY | 0.00 | 1.00 |
| | | | | RATE | 0.00 | 18.00 |
| | | | | EFF DATE | 00/00/00 | 03/06/95 |
| | | | | FINAL DATE | 00/00/00 | 99/99/99 |
| | | | | SLSP | | 00055 |

| | | | | | | |
|----|-----|------|------------------------------|------------|----------|----------|
| IN | REF | FAST | FAST TRACK/FOLLOW ME ROAMING | QTY | 0.00 | 1.00 |
| | | | | RATE | 0.00 | 0.00 |
| | | | | EFF DATE | 00/00/00 | 03/06/95 |
| | | | | FINAL DATE | 00/00/00 | 99/99/99 |
| | | | | SLSP | | 00055 |

| | | | | | | |
|----|-----|-------|----------------|------------|----------|----------|
| IN | NRC | ACTIV | ACTIVATION FEE | QTY | 0.00 | 1.00 |
| | | | | RATE | 0.00 | 35.00 |
| | | | | EFF DATE | 00/00/00 | 03/06/95 |
| | | | | FINAL DATE | 00/00/00 | 99/99/99 |
| | | | | SLSP | | 00055 |

----- COMMENTS -----

ACTIVATE NEW CUSTOMER 3-6-95.

SERVICE AREA: 0621 0362
CELLCOM GREEN BAY

SERVICE ORDER REPORT
COMPLETE ORDER - OFFICE COPY
ORDER #: 66638

DATE: 03/09/95
TIME: 9:17

Type: I INSTALL Issued: 03/09/95 Completed: 03/09/95 Cust Rep: COLLE
Due: 03/09/95 Effective: 03/06/95 Batch ID: 950007

--- CUSTOMER INFORMATION ---

CUST # 414 600 3354
MS DATE 03/06/95

BILL TO: CUST # 999 999 2214
MS DATE 10/15/94

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|------------------|-----------------|---|
| BIL NAME/ADDRESS | | WPS-EMPLOYEES JULIE HALLET N 7173 CTY RD C CASCO WI 542050000 |
| HOM NAME/ADDRESS | | JULIE HALLET N 7173 CTY RD C CASCO WI 542050000 |

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|----------------------|-----------------|-----------------------------|
| SALES AGENT ID | | 00054 |
| INSTALLER | | 00054 |
| RATE PLAN | | ASP |
| SORT NAME | | WPS-EMPLOYEES |
| BILL CYCLE | 0 | 16 |
| IN-SERVICE DATE | 00/00/00 | 03/06/95 |
| ORIGINAL INSTALL DAT | 00/00/00 | 03/06/95 |
| CREDIT CLASS | | 1 |
| SERVICE CLASS | | B BUSINESS |
| ADVANCE BILL? | | Y |
| WELCOME PACKET | | N |
| FEDERAL TAX CODE | | 01 |
| STATE TAX CODE | | 02 |
| MALE/FEMALE | | F |
| LATE PAY EXEMPT? | | N |
| DETAIL AIRTIME FLAG | | N |
| HOME PHONE # | 0000000000 | 4148377533 |
| TERRITORY | 0 | 11 |
| CONTRACT EXPIRE | 00/00/00 | 03/06/96 |
| CONTACT | | JULIE |
| PROMOTION# | | NR95 |
| SOCIAL SECURITY # | | 392747302 H4304216168066 |
| DATE OF BIRTH | 00/00/00 | 05/20/61 |
| PHONE MAKE | | TANDY |
| PHONE MODEL | | CT-350 |
| MODEL NUMBER | | 0657755 |
| PHONE TYPE | | M |
| UNLOCK CODE | 0 | 1234 |

SERVICE AREA: 0621 0362
CELLCOM GREEN BAY

SERVICE ORDER REPORT
COMPLETE ORDER - OFFICE COPY
ORDER #: 66657

DATE: 03/09/95
TIME: 10:28

Type: I INSTALL Issued: 03/09/95 Completed: 03/09/95 Cust Rep: COLLE
Due: 03/09/95 Effective: 03/06/95 Batch ID: 950007

--- CUSTOMER INFORMATION ---

CUST # 414 680 3290 BILL TO: CUST # 414 680 3290
MS DATE 03/06/95 MS DATE 03/06/95

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|------------------|-----------------|--|
| BIL NAME/ADDRESS | | ROBERT L. JULIUS 525 ROLLING GREEN DR. GREEN BAY WI 543130000 |
| HOM NAME/ADDRESS | | ROBERT L. JULIUS 525 ROLLING GREEN DR. GREEN BAY WI 543130000 |

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|----------------------|-----------------|-----------------------------|
| SALES AGENT ID | | 00015 |
| INSTALL FR | | 00015 |
| RATE PLAN | | EMG |
| SOFT NAME | | JULIUS ROBERT L |
| BILL CYCLE | 0 | 16 |
| IN-SERVICE DATE | 00/00/00 | 03/06/95 |
| ORIGINAL INSTALL DAT | 00/00/00 | 03/06/95 |
| CREDIT CLASS | | 1 |
| SERVICE CLASS | | B BUSINESS |
| ADVANCE BILL? | | Y |
| WELCOME PACKET | | Y |
| FEDERAL TAX CODE | | 01 |
| STATE TAX CODE | | 02 |
| MALE/FEMALE | | M |
| LATE PAY EXEMPT? | | N |
| DETAIL AIRTIME FLAG | | N |
| HOME PHONE # | 0000000000 | 4144946524 |
| TERRITORY | 0 | 6 |
| CONTRACT EXPIRE | 00/00/00 | 03/06/96 |
| PHONE PRICE | 0.00 | 99.00 |
| CONTACT | | ROBERT |
| SOCIAL SECURITY # | | 398186235 J4207722742405 |
| DATE OF BIRTH | 00/00/00 | 11/24/27 |
| PHONE MAKE | | MOTOR |
| PHONE MODEL | | TOTF |
| MODEL NUMBER | | 7816UZ0971 |
| PHONE TYPE | | T |
| UNI CK CODE | 0 | 123 |
| ELEC SERIAL NO | | 19513646544 |

SERVICE AREA: 0621 0362
CELLCOM GREEN BAY

SERVICE ORDER REPORT
COMPLETE ORDER - OFFICE COPY
ORDER #: 66657

DATE: 03/09/95
TIME: 10:28

---- CHARGE INFORMATION ----

| ACT | TYP | ITEM CODE | DESCRIPTION | FIELD | OLD DATA | NEW DATA |
|-----|-----|-----------|--------------------------|----------|----------|----------|
| IN | REC | ACCEMG | EMERGENCY PLAN MO. SERVC | CHRG | QTY 0.00 | 1.00 |
| | | | | RATE | 0.00 | 11.00 |
| | | | | EFF DATE | 00/00/00 | 03/05/95 |

Cust #: 414 600 3290

MS Date: 3/06/95

Order #: 66657

Page: 2

FINAL DATE 00/00/00 99/99/99

SI SP 00015

| | | | | | | |
|----|-----|-------|----------------|------------|----------|----------|
| IN | NRC | ACTIV | ACTIVATION FEE | QTY | 0.00 | 1.00 |
| | | | | RATE | 0.00 | 35.00 |
| | | | | EFF DATE | 00/00/00 | 03/05/95 |
| | | | | FINAL DATE | 00/00/00 | 99/99/99 |
| | | | | SLSP | | 00015 |

----- COMMENTS -----

ACTIVATE NEW CUSTOMER 3-6-95.

SERVICE AREA: 0621 0362
CELLCOM GREEN BAY

SERVICE ORDER REPORT
COMPLETE ORDER - OFFICE COPY
ORDER #: 66652

DATE: 03/09/95
TIME: 10:23

Type: I INSTALL Issued: 03/09/95 Completed: 03/09/95 Cust Rep: COLLE
Due: 03/09/95 Effective: 03/06/95 Batch ID: 950007

--- CUSTOMER INFORMATION ---

CUST # 414 680 3376 BILL TO: CUST # 414 680 3376
MS DATE 03/06/95 MS DATE 03/06/95

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|------------------|-----------------|--|
| BIL NAME/ADDRESS | | SCOTT E. BEINING 1641 ELKAY LANE APT. 3 GREEN BAY WI 543020000 |
| HOM NAME/ADDRESS | | SCOTT E. BEINING 1641 ELKAY LANE APT. 3 GREEN BAY WI 543020000 |

| FIELD NAME | OLD INFORMATION | NEW INFORMATION |
|----------------------|-----------------|-----------------|
| SALES AGENT ID | | 00055 |
| INSTALL FR | | 00055 |
| RATE PLAN | | TSA |
| SORT NAME | | BEINING SCOTT E |
| RTN CYCLE | 0 | 16 |
| IN-SERVICE DATE | 00/00/00 | 03/06/95 |
| ORIGINAL INSTALL DAT | 00/00/00 | 03/06/95 |
| CREDIT CLASS | | 1 |
| SERVICE CLASS | | B BUSINESS |
| ADVANCE BILL? | | Y |
| WI HOME PACKET | | N |
| FEDERAL TAX CODE | | 01 |
| STATE TAX CODE | | 02 |
| MALE/FEMALE | | M |
| LATE PAY EXEMPT? | | N |
| DETAIL AIRTIME FLAG | | N |
| HOME PHONE # | 0000000000 | 414692089 |
| TERRITORY | 0 | 11 |
| CONTRACT EXPIRE | 00/00/00 | 03/06/97 |
| PHONE PRICE | 0.00 | 29.99 |
| CONTACT | | SCOTT |
| PROMOTIONAL | | MR95 |
| SOCIAL SECURITY # | | 389743101 |
| BUSINESS TYPE | | COMPUTER ENTRY |
| OFFICE PHONE # | 0000000000 | 4143352174 |
| DATE OF BIRTH | 00/00/00 | 05/24/70 |
| PHONE MAKE | | TECHN |



CELLCOM
 P.O. BOX 12680
 GREEN BAY, WI. 54307
 (414) 339-4010

PAGE : 1
 DATE : 03/01/95
 INVOICE : 022958
 ORDER : 000000

FRANKLIN JOBELIUS

3275 NAUTICAL CT.
 GREEN BAY, WI 54311-

CREDIT MEMO

Invoiced By: WLK

MOBILE # (414) 621-4539

| LOC | QTY | DESCRIPTION | UNIT PRICE | EXTENDED PRICE |
|--|-----|--|-----------------|----------------|
| 001 | 1 | MOT-P-F09HGD8432 MOTOROLA ALPHA DPC FLIP PHONE → ESN. 19508025794 SERIAL NO. F09HLD8443BG | -379.00 | -379.00 |
| 001 | 1 | AMS-A-FLIP FLIP CASE W/KEYPAD & FLIP DOOR | -20.00 | -20.00 |
| | 1 | LESS DENIL. CERT. | 99.00 | 99.00 |
| APPLIES TO INVOICE 022375 INVOICE AMOUNT WAS TRANSFERED TO BILLING BILLED TO: (222) 222-2223 | | | | |
| PICKED UP EQUIPMENT - HELD 30 DAYS | | | SUBTOTAL | -300.00 |
| | | | TAX | -15.00 |
| | | | DUE | -315.00 |

DUPLICATE COPY

Date: 1/21/95

- Green Bay
- Shawano
- Oconto Falls
- Manitowoc
- Iowa Falls
- Benton
- Rhinelander
- Marinette
- Iron Mountain
- Sturgeon Bay
- Marshalltown
- Grundy

Cellcom

Clearly The Best

SERVICE AGREEMENT

1556 Hwy 41 • De Pere WI 54115 • 414-339-4000 • Fax 414-339-4018 • 1-800-236-0055
 Park Plaza 1100 S. 30th St. • Manitowoc WI 54220 • 414-684-0565 • Fax 414-684-3893 • 1-800-236-9490
 507 W. High St. • Marshalltown IA 50158 • 515-752-0852 • Fax 515-753-0136 • 1-800-280-4692
 960 Frontage Road • Peshtigo, WI 54157 • 715-582-4884 • 1-800-236-4740
 Sunrise Plaza Hwy 8 East • Rhinelander WI 54501 • 715-365-1700 • Fax 715-365-1788 • 1-800-236-9333

MOBILE # (414) 373-3527

MAIN ACCT # ()

SUMMARY ACCT. NAME

CUSTOMER FINANCIAL RESPONSIBILITY

Name of Business/Individ. (First, MI, Last) Financially Responsible
Jeffrey A Jarvey

Address/City/State/Zip
156 N. Main St.

Tax Exempt # (Tax exempt certificate(s) required)
Oconto Falls, WI 54154

Work Phone # ()
Home Phone # (414) 946 3269

MAIL BILL TO:

Name John

Address [Signature]

City/State/Zip

BUSINESS CREDIT APPLICATION

Attach business credit application to service agreement.

CELLULAR USER

Name Jane

Address [Signature]

City/State/Zip/County

INDIVIDUAL CREDIT APPLICATION

Social Security No. 388-74-5709 Driver's License # J610 4216517001

Date of Birth 5, 30, 65 Sex: M F

DEPOSIT INFORMATION (required before activation)

Amount _____ Date Paid ____/____/____

FEATURES AND OPTIONS

- Detailed Billing (DB) \$ _____
- Follow - Me - Roaming (FMR) \$ 0
- Voice Mail (MM) \$ _____
Voice Mail # _____
- Call FWD Delayed (CFD) \$ _____
- Call FWD Immediate (CFW) \$ _____
- Call FWD Busy (CFB) \$ _____
- Call Transfer (TXR) \$ _____
- 3-Way Calling (3WC) \$ _____
- Call Waiting (CWT) \$ 0
- Wide Area Calling (WAC) \$ _____
(Iowa RSA11 Only)

SERVICE PLAN

Time Saver \$ 18.00

- New line Conversion Change of equipment
- One year agreement Two year agreement

BILLING PLANS

- SNOBL Combo SSUM Individual

EQUIPMENT INFORMATION:

ESN# 16202184090
 Serial # 1633207
 Manufacturer Techno Model BC901
 Unlock Code 0000 Phone Type M P
 Rent-to-Own/Line Only/Purchase Warranty _____
 Antenna Type G R M Handsfree N
 Install (Loc/Date/Time) _____

EQUIPMENT BILLING:

Phone \$ _____
 Antenna \$ _____
 Battery/Charger \$ _____
 _____ \$ _____
 _____ \$ _____
 Trade In (\$ _____)
 SUBTOTAL \$ _____
 Sales Tax \$ _____
 TOTAL DUE \$ _____
 Payment \$ _____
 cash check # _____
 VISA/MC P.O. # _____
BALANCE DUE \$ _____

Special Instructions/Comments

A.S.B. P.S.

Adv. Dept 59532

HOW DID YOU FIND OUT ABOUT CELLCOM?

- TV Ad Newspaper Ad Referral Yellow Pages
- Radio Ad Billboard Add-on Other _____
- Previous Customer (Mobile # _____)

Primary purpose of Cellular Phone? Business Personal

Occupation _____ SIC _____

Activation Date March 9, 1995

Agent # 50

Agent Phone # 498-2795

Territory # _____

Salesperson TOM

For Office Use Only

| | | | |
|-----------|------------|---------|--------|
| Sales | Credit | Number | Active |
| Promo ID | Voice Mail | Billing | WP |
| Inventory | TC | Invoice | |

As the responsible party or an authorized representative, my signature binds the responsible party to pay all charges according to the terms and conditions described more fully on the reverse side. By selecting this package, I agree to the minimum term I have chosen. I am fully aware that my signature makes this a BINDING CONTRACT.

Authorized Representative Name (please print)

Signature [Signature]

Title

Date 1-21-95

I understand that I will be charged a \$35 Activation Fee that will appear on my first billing statement.

Initials J.J.

White • Office

Yellow • Sales

Pink • Customer

Gold • Billing/Marketing

Date: 3-7-95



- Green Bay
- Shawano
- Oconto Falls
- Manitowoc
- Iowa Falls
- Benton
- Rhinelander
- Marinette
- Iron Mountain
- Sturgeon Bay
- Marshalltown
- Grundy

SERVICE AGREEMENT
 1556 Hwy 41 • De Pere WI 54115 • 414-339-4000 • Fax 414-339-4018 • 1-800-236-0055
 Park Plaza 1100 S. 30th St. • Manitowoc WI 54220 • 414-684-0565 • Fax 414-684-3893 • 1-800-236-9490
 507 W. High St • Marshalltown IA 50158 • 515-752-0852 • Fax 515-753-0136 • 1-800-280-4692
 960 Frontage Road • Peshtigo, WI 54157 • 715-582-4884 • 1-800-236-4740
 Sunrise Plaza Hwy 8 East • Rhinelander WI 54501 • 715-365-1700 • Fax 715-365-1788 • 1-800-236-9333

MOBILE # (680-3383)
 MAIN ACCT # (_____)
 SUMMARY ACCT. NAME _____

CUSTOMER FINANCIAL RESPONSIBILITY

Name of Business/Individ. (First, MI, Last) Financially Responsible
John P. Hovick

Address/City/State/Zip
1300 2nd Street NW
 Carey, WI 54203

Tax Exempt # (Tax exempt certificate(s) required)
 (_____) (_____)

Work Phone # _____ Home Phone # _____

MAIL BILL TO:

Name _____
 Address _____
 City/State/Zip _____

BUSINESS CREDIT APPLICATION
 Attach business credit application to service agreement.

CELLULAR USER

Name _____
 Address _____
 City/State/Zip/County _____

INDIVIDUAL CREDIT APPLICATION

Social Security No. _____ Driver's License # _____
 Date of Birth 10/1/52 Sex: M F

DEPOSIT INFORMATION (required before activation)

Amount _____ Date Paid _____ / _____ / _____

FEATURES AND OPTIONS

- Detailed Billing (DB) \$ _____
- Follow - Me - Roaming (FMR) \$ NIC
- Voice Mail (MM) \$ _____
 Voice Mail # _____
- Call FWD Delayed (CFD) \$ _____
- Call FWD Immediate (CFW) \$ _____
- Call FWD Busy (CFB) \$ _____
- Call Transfer (TXR) \$ _____
- 3-Way Calling (3WC) \$ _____
- Call Waiting (CWT) \$ _____
- Wide Area Calling (WAC) \$ _____
 (Iowa RSA11 Only)

SERVICE PLAN

EMT \$ 10.00

- New line Conversion Change of equipment
- One year agreement Two year agreement

BILLING PLANS

- SNOBL Combo SSUM Individual

EQUIPMENT INFORMATION:

ESN# 13013581425
 Serial # 7816TXL4354
 Manufacturer _____ Model 2102SP
 Unlock Code 383 Phone Type M T P
 Rent-to-Own/Line Only/Purchase Warranty _____
 Antenna Type G R M Handsfree Y N
 Install (Loc/Date/Time) local - weekly

EQUIPMENT BILLING:

Phone 400 \$ 850
 Antenna \$ _____
 Battery/Charger \$ _____
 _____ \$ _____
 _____ \$ _____
 Trade In (\$ _____)
 SUBTOTAL \$ _____
 Sales Tax \$ _____
 TOTAL DUE \$ _____
 Payment \$ _____
 cash check
 VISA/MC P.O. # _____
BALANCE DUE \$ _____

Special Instructions/Comments _____
3745

HOW DID YOU FIND OUT ABOUT CELLCOM?

- TV Ad Newspaper Ad Referral Yellow Pages
- Radio Ad Billboard Add-on Other _____
- Previous Customer (Mobile # _____)

Primary purpose of Cellular Phone? Business Personal

Occupation cashier SIC 48

Activation Date 3/7/95

Agent # _____
 Agent Phone # _____
 Territory # _____
 Salesperson 002

| For Office Use Only | | | |
|----------------------|------------|----------------------|--------|
| Sales | Credit | Number | Active |
| Promo ID | Voice Mail | Billing | WP |
| Inventory <u>776</u> | TC | Invoice <u>23095</u> | |

As the responsible party or an authorized representative, my signature binds the responsible party to pay all charges according to the terms and conditions described more fully on the reverse side. By selecting this package, I agree to the minimum term I have chosen. I am fully aware that my signature makes this a BINDING CONTRACT.

I understand that I will be charged a \$35 Activation Fee that will appear on my first billing statement.

Initials _____

Authorized Representative Name (please print) _____ Title _____
 Signature _____ Date _____

White • Office Yellow • Sales Pink • Customer Gold • Billing/Marketing