

COMPETITIVE TELECOMMUNICATIONS SERVICE PROVIDERS

For the provision of (check all that apply):

INTEREXCHANGE CARRIER

COMPETITIVE ACCESS

ALTERNATIVE OPERATOR SERVICE PROVIDER

COMPETITIVE LOCAL
EXCHANGE CARRIERS

OTHER (Describe):

ANNUAL REPORT

OF

Combined Public Communications, Inc.

(Exact legal name of respondent)

If name was changed during year, show also the
previous name and date of change.

Website URL

Address

City

County

State

Zip Code

Phone: (Area Code) Number

4271 Hanley Road Cincinnati, OH 45247

(Address of principal business office at end of year)

TO THE
PUBLIC UTILITIES COMMISSION OF OHIO



FOR THE
YEAR ENDED DECEMBER 31, 2010

Name, title, address, e-mail address and telephone number (including area code) of the person to be contacted concerning this report.

Email: , Phone: , Fax:

IDENTITY OF RESPONDENT

1. Identify respondent's form of business organization: sole proprietorship, partnership, corporation, or other (explain).

corporation

2. If a consolidated, merged, or reorganized company, briefly provide particulars of such transactions, the date of the transactions, and PUCO authority. If a reorganized company, give name of original company.

M & M Payphones INC

3. Identify any other names (other than shown on title page) under which respondent conducted any part of its business during the year.

4. If incorporated specify:

- a. Date of filing articles of incorporation: November 29, 1994
b. State in which incorporated: Ohio

5. Identify PUCO Case Number (and date issued) granting operating authority and identify certificate number(s) issued.

04309-0469 11/29/94

6. State whether respondent is operational in Ohio (actually providing service and the date operations began), or available (but not currently providing service).

yes 6/1/94

Instructions:

Schedule 1 is used for PUCO annual assessment purposes pursuant to Section 4905.10, RC. The reporting company shall maintain supporting and/or subsidiary records to separately record revenues derived from total operations and from its Ohio intrastate operations. Information presented herein is subject to audit by the PUCO.

The jurisdictional separation of revenues reported in this schedule should conform, to the extent applicable, to the procedures and instructions of CFR 47 Parts 32 and 36.

For interexchange carriers, intrastate refers to messages originating and terminating in Ohio.

For cellular, competitive access, and paging providers, intrastate refers to amounts billed to an Ohio account.

SCHEDULE: 1

STATEMENT OF INTRASTATE GROSS EARNINGS (REVENUE)

1	Operating and Miscellaneous Revenue - Wholesale Cellular Communications, Radio Common Carrier, Directory Revenue, Rent Revenue, Special Billings (revenue from work performed for others, rent revenue-nonoperating return on regulated investment used to provide nonregulated products and services, etc.)	\$1,235,076
2	Other Revenue, Dividend and Interest Income, Gains From Disposition of Property -- Operating and Nonoperating, Other Operating or Nonoperating Gains (foreign currency exchange or transfer, extinguishment of debt, company's share of earnings of affiliated company accounted for on equity method, income from sinking and other funds, etc.)	\$1,235,076
3	SUBTOTAL (1) + (2)	\$2,470,152
4	Earnings or receipts from sales to other public utilities for resale	\$1,235,076
5	TOTAL (3) - (4)	\$1,235,076

IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE/INVOICES IS/ARE DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING.

Name, Title, E-mail, Address, and Phone Number of the Company's Contact Persons

Melody Weil
Name

President
Title

mweil@combinedpublic.com
E-mail

PO Box 76573 Highland Heights, KY 41076
Address

859-547-5446
Phone Number (Including Area Code)

**Name, Title, E-mail, Address, and Phone Number of Person to whom Invoice
should be Directed**

none
Name

none
Title

none
E-mail

none
Address

000-000-0000
Phone Number (Including Area Code)

Name and Address of the President

Melody Weil
Name

PO Box 76573 Highland Heights, KY 41076
Address

VERIFICATION

The foregoing report must be verified by the President or Chief Officer of the company.

OATH

State of Ohio
County of Hamilton

Melody Weil makes oath and says that

s/he is President

of Combined Public Communications, Inc.

that s/he has examined the foregoing report; that to the best of her/his knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from and including January 1, 2010 to and including December 31, 2010.

Melody Weil
(Signature of affiant.)

Sworn and subscribed before me this 27 day of April, 2011 Month/Year

Patricia Lynn Duffel
Signature of notary

My commission expires on 2/19/2014

This foregoing document was electronically filed with the Public Utilities

Commission of Ohio Docketing Information System on

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in

Case No(s). 11-0005-TP-RPT

Summary: Annual Report Combined Public Communications INC
2010 Annual Report electronically filed by Linda Rientjes on behalf of Rientjes, Linda Ms.