

COMPANY NAME 3110 Fairview Park Drive, Ste. 570
 ADDRESS Falls Church, VA 22042
 CITY Falls Church STATE VA ZIP 22042
 INITIATOR Rick Adams
 TITLE President, COO
 TELEPHONE NO 703/204-1000 FAX NO 703/204-1001
 CUSTOMER PON _____
 CUSTOMER CRT NO _____

CARDER NO _____ SLIP _____ CUSTOMER NO _____
 3E _____ YES _____ JAS _____
 CIRCUIT NO _____
 QUANTITY 1 DS 10 Kbps SERVICE TYPE _____ FT TO FT _____ HUB _____ MUX _____ FLEX _____ END LINK _____
 ORDER DATE _____ CUST. DESIRED DUE DATE 12/30/92
 RELATED ORDER NO _____ HUB/RELATED CRT NO _____

LOCATION 1
 NAME UNNET
 STREET 8100 Boone Blvd.
 FLOOR _____ ROOM _____
 CITY VIENNA, VA STATE VA ZIP _____
 TECHNICAL CONTACT Bury Tech
 TELEPHONE NO _____ FAX NO _____
 BUILDING CODE 811B LOCATION CODE _____ MUX _____

LOCATION 2
 NAME UNNET (See Remarks Section)
 STREET 1120 G St. NW
 FLOOR B-1 ROOM 8105
 CITY Wash DC STATE DC ZIP _____
 TECHNICAL CONTACT Duty Tech
 TELEPHONE NO _____ FAX NO _____
 BUILDING CODE AWW LOCATION CODE _____ MUX _____

TERMINATING INFORMATION

DS-0
 1. 2WIRE 4WIRE
 2. LOOP START GROUND START
 3. MFS PROVIDES RING NO RING PROVIDED
 4. FOREIGN EXCHANGE CLOSED (FXC) OPEN (FXO)
 5. OFF PREMISE EXTENSION (OPX)
 6. TIE LINE (TL)
 7. ANALOG DATA RATE _____ Kbps
 8. DIGITAL DATA SERVICE ASYNCH SYNCH
 9. DIGITAL DATA RATE _____ Kbps
 10. DIGITAL INTERFACE RS-232 RS-485 V.35 OCU-OP

DS-1
 1. BR25 2. D4
 AMI ESF
 DS-3
 1. FRAMED UNFRAMED
 OTHER
 1. E-1
 2. BROADCAST VIDEO ONE-WAY TWO-WAY
 3. INTERCONNECT SERVICE
 4. NRMS: DEDICATED DIAL-UP ATTENDANT
 5. MULTI-MEGABIT DATA SERVICES: FDDI COMPUTER CHANNEL EXTENSION
 ETHERNET: FRACTIONAL DEDICATED VIRTUAL
 TOKEN RING: FRACTIONAL DEDICATED VIRTUAL

REMARKS *
 SERVICE CHARGES AND AVAILABILITY PENDING MFS SERVICE MANAGEMENT APPROVAL
 ** LOCATION 2) 3110 FAIRVIEW PARK DRIVE, FALLS CHURCH, VA
 3) 8400 BALTIMORE BLVD. COLLEGE PARK, MD
 4) 1050 CONN AVE. NW WASH DC

BILLING INFORMATION
 BILL TO UNNET/INTERNAL
 ADDRESS _____
 CITY VIENNA VA STATE VA ZIP _____
 LENGTH OF CONTRACT _____ MONTH(S) YEAR(S)

ACCOUNTS PAYABLE
 BILLING CONTACT _____
 FLOOR _____ ROOM _____ TELEPHONE NO. _____

SERVICE CHARGES *		NON-RECURRING CHARGES	
FACILITY CHARGES		FACILITY CHARGES	
INITIAL SERVICE	<u>1 @ 2,000.00 = 2,000.00</u>	INITIAL SERVICE	<u>1 @ 2,000.00 = 2,000.00</u>
ADDITIONAL SERVICE	_____ @ _____ = _____	ADDITIONAL SERVICE	_____ @ _____ = _____
SUBTOTAL \$ _____		SUBTOTAL \$ _____	
EQUIPMENT CHARGES		EQUIPMENT CHARGES	
TYPE _____	_____ @ _____ = _____	TYPE _____	_____ @ _____ = _____
TYPE _____	_____ @ _____ = _____	TYPE _____	_____ @ _____ = _____
SUBTOTAL \$ _____		SUBTOTAL \$ _____	
SPECIAL FEES & EXPEDITING COSTS _____ @ _____ = _____		SPECIAL FEES & EXPEDITING COSTS _____ @ _____ = _____	
OTHER SPECIAL CHARGES _____ @ _____ = _____		OTHER SPECIAL CHARGES _____ @ _____ = _____	
TOTAL NON-RECURRING CHARGES \$ <u>2,000.00</u>		TOTAL RECURRING CHARGES \$ <u>2,000.00</u>	

RECURRING CHARGES	
FACILITY CHARGES	
INITIAL SERVICE	<u>1 @ 2,000.00 = 2,000.00</u>
ADDITIONAL SERVICE	_____ @ _____ = _____
SUBTOTAL \$ _____	
EQUIPMENT CHARGES	
TYPE _____	_____ @ _____ = _____
TYPE _____	_____ @ _____ = _____
SUBTOTAL \$ _____	
SPECIAL FEES & EXPEDITING COSTS _____ @ _____ = _____	
OTHER SPECIAL CHARGES _____ @ _____ = _____	
TOTAL RECURRING CHARGES \$ <u>2,000.00</u>	

CUSTOMER APPROVAL _____ SIGNATURE _____ TITLE _____ DATE _____

FOR MFS INTERNAL USE ONLY
 ACCOUNT EXECUTIVE [Signature] DATE 9/29/92
 ACCOUNT EXECUTIVE _____ DATE _____
 ACCOUNT EXECUTIVE _____ DATE _____
 CITY DIRECTOR APPROVAL [Signature] DATE 9/30/92
 OPERATIONS APPROVAL [Signature] DATE 9/30/92

SALES SOURCE CODE CITY NAME NAME NAME OCC OCC COMP CARRIER INFO OTHER LOA ATTACHED YES NO ASP YES NO