

**EXHIBIT
A**



COMMONWEALTH OF KENTUCKY
UNIVERSIAL SERVICE FUND

Reporting Month April 2016

Carrier Information

Company Name	East Kentucky Network, LLC, dba Appalachian Wireless		
Company Address	101 TECHNOLOGY TRAIL IVEL, KY 41642		
Telephone / Fax	(606)791-2375	/	(606)791-2225
Vendor Number			

03-4010-5000 7,625.34 +
 04-4010-5000 4,834.56 +
 05-4010-5000 723.34 +
 00-5200-0000 1,183.42 +
 14,366.66 *

Classification			<input checked="" type="checkbox"/> Cellular	
Please Circle One	ILEC	CLEC		PCS

Monthly Access Line Data

1.	Total Access Lines in Service.....	102,619
2.	Surcharge Per Access Line.....	\$0.14
3.		
4.	Amount of Surcharge Remitted to Kentucky USF.....	\$14,366.66
5.	Number of Access Lines Receiving Lifeline Support.....	178
6.	Amount of Reimbursement Requested from Kentucky USF.....	\$623.00
7.		

Signature Block

I hereby attest that the information reported herein is true and accurate to the best of my knowledge.

Company Official Mary Brescoach Title Accting Manager Company Official Mary Brescoach
 (Printed) (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:

Finance and Administration Cabinet
 ATTN: KY USF
 702 Capitol Ave.
 Capitol Annes, Room 488A
 Frankfort, KY 40601

Send a copy of this report to:

Kentucky Public Service Commission
 ATTN: Jim Stevens
 211 Sower Blvd.
 P.O. Box 615
 Frankfort, KY 40602



AN EQUAL OPPORTUNITY EMPLOYER M/F/D



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UNIVERSIAL SERVICE FUND

Reporting Month May 2016

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Company Address	101 TECHNOLOGY TRAIL IVEL, KY 41642
Telephone / Fax	(606)791-2375 / (606)791-2225
Vendor Number	

03-4010-5000 7:644-14 +
 04-4010-5000 4:823-84 +
 05-4010-5000 728-42 +
 00-5208-0000 1:173-90 +
 14:370-30

Classification				
Please Circle One	ILEC	CLEC	<input checked="" type="checkbox"/> Cellular	PCS

Monthly Access Line Data	
1. Total Access Lines in Service.....	102,645
2. Surcharge Per Access Line.....	\$0.14
3.	
4. Amount of Surcharge Remitted to Kentucky USF.....	\$14,370.30
5. Number of Access Lines Receiving Lifeline Support.....	170
6. Amount of Reimbursement Requested from Kentucky USF.....	\$595.00
7.	

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official <u>Mary Brescoach</u> (Printed)	Title <u>Accting Manager</u> Company Official <u>Mary Brescoach</u> (Signed)

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