

COMMONWEALTH OF KENTUCKY
BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

AN INQUIRY INTO THE STATE) CASE NO. 2016-00059
UNIVERSAL SERVICE FUND)

BLUE JAY WIRELESS, LLC'S RESPONSES
TO COMMISSION STAFF'S FIRST REQUESTS FOR INFORMATION

Blue Jay Wireless, LLC ("Blue Jay" or the "Company"), hereby serves its Responses to the Kentucky Public Service Commission Request for Information dated April 6, 2016.

VERIFICATION

STATE OF TEXAS)
) ss.
County of Denton)

I, David Wareikis, being first duly sworn upon oath, depose and say that I am the Chief Executive Officer of Blue Jay Wireless, LLC, and as such am authorized to make this verification on its behalf; that I have read the foregoing responses; that I know the contents thereof; and that the facts set forth in the foregoing responses are true and correct to the best of my knowledge, information and belief formed after a reasonable inquiry.

David A. Wareikis

Subscribed and sworn to before me this 20th day of April, 2016

Michelle Reneau

Notary Public

My Commission expires: 10/17/18



DATA RESPONSES

REQUESTS FOR INFORMATION TO PARTIES THAT RECEIVED PAYMENT FROM THE KENTUCKY UNIVERSAL SERVICE FUND ("KUSF")

REQUEST NO. 1. Provide the KUSF reimbursement forms submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.

RESPONSE: KUSF reimbursement forms submitted by Blue Jay from January 2014 to present are attached hereto as **Attachment A**.

RESPONSIBLE WITNESS: Daniel Stark, Chief Financial Officer

REQUEST NO. 2. Provide the Federal Communication Commission ("FCC") Form 497 submitted to the FCC from January 2014 to the present.

RESPONSE: FCC Forms 497 submitted by Blue Jay from January 2014 to present are attached hereto as **Attachment B**.

RESPONSIBLE WITNESS: Daniel Stark, Chief Financial Officer

REQUEST NO. 3. Refer to the Lifeline plans you filed with the Commission with your Application for Designation as an Eligible Telecommunications Carrier ("ETC"). State whether there have been changes to these Lifeline plans since the Commission entered an Order designating you as an ETC for the purpose of offering Lifeline service in Kentucky. If there have been changes to the Lifeline plans, provide:

- a. Copies of all Lifeline plans currently offered to Kentucky subscribers.
- b. For each new or modified Lifeline plan, explain in detail:
 - i. How the current Lifeline plan modifies the Lifeline plan in effect when you were designated as an ETC:
 - ii. Whether the current Lifeline plan was offered in addition to Lifeline plans in effect when you were designated as an ETC.
- c. An explanation for why existing Lifeline plans were changed or additional Lifeline plans were added.

RESPONSE:

In its Application, Blue Jay applied to provide two plans at no cost to eligible customers. These plans were approved by the Commission in Blue Jay's ETC Designation Order on May 19, 2014:¹

- 1) 125 monthly local and long distance minutes or text messages (1:1) that carry over at the end of each month
- 2) 250 monthly local and long-distance minutes or text messages (1:1) which may not be carried over to the next month.

On June 5, 2014, Blue Jay submitted a letter proposing a specific Lifeline plan for Kentucky customers. This plan provides a total of 350 minutes or texts (1:1) per month at no cost to the subscriber. This plan was approved on June 26, 2014.

On April 27, 2015, Blue Jay submitted a Notice of Modification letter to the Commission's Executive Director, proposing a new Lifeline plan for Kentucky customers ("April 2015 Letter"). This plan provides a total of 500 minutes or texts (1:1) per month at no cost to the subscriber. This plan is called the Lifeline 500 Total Plan.

- a. Copies of all Lifeline plans currently offered to Kentucky subscribers.

Currently, Blue Jay only offers its Lifeline 500 Total Plan to eligible subscribers in Kentucky. Please see attached screen shot of Blue Jay's Kentucky plans page (**Attachment C**). Blue Jay offers Lifeline customers a variety of top-up options whereby Lifeline customers may add, for an additional cost, additional minutes/texts and/or data, should they chose to do so.

- b. For each new or modified Lifeline plan, explain in detail:

¹ In the Matter of Application of Blue Jay Wireless for Designation as an Eligible Telecommunications Carrier in the Commonwealth of Kentucky, Case No. 2013-00377, Order (May 19, 2014).

- i. How the current Lifeline plan modifies the Lifeline plan in effect when you were designated as an ETC:

The Lifeline 500 Total Plan doubles the number of minutes/texts that the Company originally offered when designated as an ETC in 2014.

- ii. Whether the current Lifeline plan was offered in addition to Lifeline plans in effect when you were designated as an ETC.

The Lifeline 500 Total Plan has never been offered at the same time as the Lifeline plans in effect when Blue Jay was designated as an ETC. The 350 minute/ text plan approved by the Commission on June 26, 2014 replaced both plans in effect when Blue Jay was designated as an ETC (the 125 minute/text plan with rollover and the 250 minute/text plan). Similarly, the Lifeline 500 Total Plan currently being offered by Blue Jay replaced the 350 minute/text plan.

- c. An explanation for why existing Lifeline plans were changed or additional Lifeline plans were added.

As explained in the April 2015 Letter, due to market considerations, Blue Jay's Lifeline service offering was changed to provide additional value to Kentucky Lifeline subscribers.

RESPONSIBLE WITNESS: David Wareikis, Chief Executive Officer

REQUEST NO. 4. If the Commission's decision is to maintain state Lifeline support for only voice service, describe how that decision would affect whether and how you provide Lifeline service in Kentucky.

RESPONSE: Blue Jay's Lifeline 500 Total Plan offers 500 units to Lifeline customers in Kentucky. Customers may choose to use their 500 units as either a voice-only plan or as a voice and text plan. Therefore, should the Commission decide to maintain state Lifeline support for voice-only service, Blue Jay's current service offerings would not be affected. Moreover, Blue Jay offers Lifeline customers a variety of top-up options whereby Lifeline customers may add, for an additional cost, additional minutes/texts and/or data, should they chose to do so.

RESPONSIBLE WITNESS: David Wareikis, Chief Executive Officer

REQUEST NO. 5. Identify any cost-effective procedures that you believe should be implemented by the Commission to increase oversight of the Lifeline program.

RESPONSE: Blue Jay does not have specific suggestions for cost-effective procedures that the Commission could implement at this time. However, Blue Jay believes that one option that could assist the Commission in developing such procedures would be to direct staff to hold regular meetings with the management teams of the various Lifeline providers in the state in order to create an open dialogue about internal company processes, best practices, concerns, and experiences.

RESPONSIBLE WITNESS: David Wareikis, Chief Executive Officer

REQUEST NO. 6. If the Commission's decision is to change the amount of Lifeline support, state how soon upon the issuance of an Order by the Commission changing the Lifeline support amount that you are or anticipate being able to implement the changes on customer bills.

RESPONSE: The timing for implementation of any changes made to the current Lifeline support amount will depend on the type of changes made. Depending on the type of change, Blue Jay would be required to not only make changes to its internal billing systems but also likely with its vendors and underlying service provider(s). In addition, any changes to prices, etc. pertaining to a Lifeline service plan triggers mandatory notification requirements and the opportunity for customers to make changes to their selected service offerings. At a minimum, Blue Jay believes that implementation of any changes to the Lifeline support amount in Kentucky would require a minimum of 120 days.

RESPONSIBLE WITNESS: David Wareikis, Chief Executive Officer

REQUEST NO. 7. Provide, in detail, the methods employed to verify the eligibility of customers who participate in the Lifeline program.

RESPONSE:

Since Blue Jay began providing Lifeline service, Blue Jay corporate staff (internal auditors) have been responsible for verifying consumer eligibility. With Blue Jay employee internal auditors making the final determination as to whether proof of eligibility is acceptable and compliant and the applicant is eligible to receive Lifeline service from Blue Jay. This is accomplished using a real-time corporate review queue for all Lifeline enrollments

As stated in Blue Jay's Compliance Plan, approved by the FCC's Wireline Competition Bureau on December 26, 2012 (DA 12-2063), Blue Jay routes all enrollment documentation through a common validation backbone that performs five relevant verification checks in real-time before approving qualifying subscribers for Lifeline service. These five checks are: 1) Service Availability Verification (validates the availability of service to qualifying subscribers through a database of approved Blue Jay service areas); 2) Service Address Verification (validates the service address of qualifying subscribers through USPS and/or Melissa databases); 3) Non-Duplicate Subscriber Verification (confirms internal non-duplicate status of qualifying subscribers by a combination of name, address, telephone number, date of birth and last four digits of Social Security number); 4) Identity Verification (validates the identity of qualifying subscribers through viewing government-issued identification or Lexis Nexis); and 5) Eligibility Verification (where available, validates the eligibility of qualifying subscribers through state-specific and program-specific Internet databases). In the event that such web services are unavailable or the qualifying subscriber shows proof of eligibility via physical documentation, Blue Jay will note the type of documentation presented; the timestamp of presentation; the Blue Jay employee, agent or representative to whom the documentation was presented; and the deletion timestamp (for documentation that was physically received by Blue Jay). Blue Jay also validates the eligibility and non-duplication of qualifying subscribers through the National Lifeline Accountability Database ("NLAD") in all states that have not opted out of the NLAD. All Blue Jay representatives (employees and agents) are thoroughly trained on the enrollment process to ensure all five relevant verification checks are made before approving qualified subscribers for Lifeline service.

If Blue Jay cannot determine a prospective subscriber's eligibility for Lifeline by accessing eligibility databases, Blue Jay representatives review documentation establishing eligibility pursuant to the Lifeline rules. All subscribers are required to demonstrate eligibility based at least on: (1) household income at or below 135% of the Federal Poverty Guidelines for a household of that size; or (2) the household's participation in one of the federal assistance programs listed in sections 54.409(a)(2) or state programs referenced in 54.409(a)(3) of the Commission's rules.

All Blue Jay representatives who interact with current or prospective customers are trained to assist Lifeline applicants in determining whether they are eligible to participate based on the federal and state-specific income-based and/or program-based criteria. These personnel are trained to answer questions about Lifeline eligibility, and review required documentation to determine whether it satisfies the Lifeline rules and state-specific eligibility requirements using state-specific checklists.

The CGM electronic Lifeline application process allows Blue Jay representatives to take pictures of the actual proof of eligibility documentation provided by the applicant at the time of enrollment. These images are captured in the electronic application and transmitted to the corporate staff (all Blue Jay employees) for review and final determination. An auditor can either deny or approve an order based on whether the documentation provided by the representative, on the applicant's behalf, is acceptable. All images of applicant proof of eligibility are subsequently deleted.

In addition to the CGM enrollment process and the traditional paper enrollment process, Blue Jay has rolled out an Online Enrollment Process ("OEP") that allows applicants to apply for Lifeline in Kentucky online. Along with in-person applications, applicants enrolling via paper applications or online are required to submit proof that they meet the income-based eligibility requirements for their respective state or participate in a Lifeline qualifying federal or state program as well as proof of ID. Applications excluding proof of eligibility are not processed. An application and accompanying eligibility documentation are received by the Blue Jay internal auditors either a) on behalf of an agent via fax or email, b) directly from the subscriber via fax, email, or postal mail, or c) via Blue Jay's OEP system. Internal auditors review the eligibility documentation and determine whether the document is acceptable and compliant. After the determination, the auditor completes the required section on the application/certification form and saves the final version for Blue Jay's records.

RESPONSIBLE WITNESS: Lauren Moxley, Chief Compliance Officer

REQUEST NO. 8. State whether you have been subjected to FCC investigation, action, and/or penalties relating to participation in the Lifeline program. If you have been so subjected, provide in detail, including citations to the FCC action, the investigation, action, and/or penalties to which you were subjected.

RESPONSE:

Blue Jay has not been subject to a Notice of Apparent Liability or penalties related to participation in the Lifeline program. **[BEGIN CONFIDENTIAL]** [REDACTED]

[REDACTED]

[REDACTED]

[END CONFIDENTIAL]

RESPONSIBLE WITNESS: David Wareikis, Chief Executive Officer

REQUEST NO. 9. Describe, in detail your current marketing programs for Lifeline service in Kentucky, including, but not limited to, person-to-person sales.

RESPONSE:

Blue Jay utilizes a variety of methods to market its Lifeline service in Kentucky. To promote its on-going enrollment events, sales staff in Kentucky regularly utilizes brochures and flyers. These flyers are approved by Blue Jay's Compliance Department. An example of one such flyer that sales staff may use to advertise enrollments events is attached hereto as **Attachment D**. Moreover, Blue Jay's mobile sales staff ("Samaritans") utilize Blue Jay-branded tents, banners signs, etc. (all approved by Blue Jay's Compliance Department) at mobile enrollment events throughout the state to advertise the Company's presence and service offerings.

Blue Jay also frequently advertises its services on social media websites, such as Facebook, and lists its available Kentucky Lifeline plan and optional top-ups on its website.² While Blue Jay established a Facebook presence in 2012, the site has been utilized as a means of reaching eligible consumers more frequently over the course of the past year. An example of such social media advertising is attached hereto as **Attachment E**. Currently Blue Jay focuses its digital advertising efforts in Kentucky on branding and online enrollments, with the majority of digital advertising efforts going towards efforts to build the Blue Jay Wireless brand as a socially aware and accessible Lifeline Service company.

RESPONSIBLE WITNESS: Lauren Moxley, Chief Compliance Officer

² See <https://www.bluejaywireless.com/our-plans/kentucky/>

REQUESTS FOR INFORMATION TO ALL PARTIES

REQUEST NO. 1. Provide the KUSF reimbursement forms submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.

RESPONSE: See Attachment A.

RESPONSIBLE WITNESS: Daniel Stark, Chief Financial Officer

REQUEST NO. 2. Explain how the total number of subscriber lines is calculated for the KUSF reimbursement form when a new customer receives service in the middle of a month.

RESPONSE: To complete its KUSF reimbursement forms, Blue Jay pulls subscriber records from its internal billing system based on date range. Active Lifeline subscribers with an activation date on or before the last day of the month and no disconnect date prior to the current month are listed. Records are excluded when the disconnect date is prior to the monthly service activation date. For example, if a subscriber activates on the 15th of Month-1, they will be reflected on the KUSF reimbursement form for Month-1. If the subscriber should de-enroll prior to the 15th of a subsequent month, then the subscriber will not be included on the subsequent month's KUSF reimbursement form. However, if the subscriber de-enrolls on or after the 15th of the subsequent month, they will be included on the subsequent month's KUSF reimbursement form.

RESPONSIBLE WITNESS: Lauren Moxley, Chief Compliance Officer

REQUEST NO. 3. Explain how the total number of subscriber lines is calculated for the KUSF reimbursement form when a customer leaves in the middle of a month.

RESPONSE: As explained above, for the purposes of completing KUSF reimbursement forms, subscriber records are excluded when the disconnect date is prior to the monthly service activation date. Using the above example, if a subscriber activates on the 15th of Month-1 but then de-enrolls prior to the 15th of the subsequent month, then the subscriber will not be included on the subsequent month's KUSF reimbursement form. However, if the subscriber de-enrolls on or after the 15th of the subsequent month, they will be included on the subsequent month's KUSF reimbursement form.

RESPONSIBLE WITNESS: Lauren Moxley, Chief Compliance Officer

REQUEST NO. 4. Explain how the KUSF surcharge remittance is calculated when you experience a bad debt. Explain whether none of the surcharge amount or the full surcharge amount billed to, but not paid by, the customer is remitted.

RESPONSE: Because Blue Jay's Lifeline plans are offered at no cost to Lifeline-eligible consumers in Kentucky, the KUSF surcharge is paid regardless of payment by the customer. The Company calculates this amount based on subscriber lines and does not factor bad debt as a way to reduce our lines.

RESPONSIBLE WITNESS: Daniel Stark, Chief Financial Officer

REQUEST NO. 5. State whether you believe the Commission should wait until the FCC's investigation of Lifeline Reform' is concluded before rendering a decision in this proceeding, and explain the basis for your response.

RESPONSE: The FCC's Order was adopted on March 31, 2016. However, as of the date of this Response, the text of the Order has yet to be released. Given the breadth of issues that Blue Jay believes will be covered in the Order, the Company urges the Commission to wait to implement new state-specific rules until it has been able to assess what changes, if any, it is required to make under the Order. This is necessary in order to avoid numerous rule changes that could lead to confusion for Kentucky Lifeline customers and to ensure regulatory certainty for ETCs serving those customers.

RESPONSIBLE WITNESS: Melissa Slawson, General Counsel

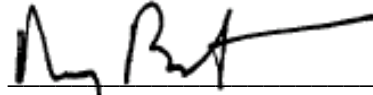
REQUEST NO. 6. State how soon upon the issuance of an Order by the Commission changing the KUSF surcharge that you are or anticipate being able to implement the changes on customer bills. If it differs by type of account, provide the information for each type of account, along with the number of access lines for each account type.

RESPONSE: See Blue Jay's Response to Question 6, above. At a minimum, Blue Jay believes that implementation of any changes to the Lifeline support amount in Kentucky would require a minimum of 120 days.

RESPONSIBLE WITNESS: David Wareikis, Chief Executive Officer

CERTIFICATE OF SERVICE

In accordance with 807 KAR 5:001, Section 8, I certify that the April 27, 2016 electronic filing of these Data Responses is a true and accurate copy of the same document being filed in paper medium; that the electronic filing was transmitted to the Commission on April 27, 2016; that there are currently no parties that the Commission has excused from participation by electronic means in this proceeding; and that an original paper medium of these Data Responses will be mailed to the Commission by first class United States mail, postage prepaid, on April 27, 2016.



Douglas F. Brent

ATTACHMENT A



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2014-07

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	51010 Addison Circle Addison, TX 75001
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	1676
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$134.08
4. Number of Access Lines Receiving Lifeline Support.....	1674
5. Amount of Reimbursement Requested from Kentucky USF.....	\$5,859.00

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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

Finance and Administration Cabinet
ATTN: KY USF
702 Capital Ave.
Capitol Annex, 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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2014-08

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	51010 Addison Circle Addison, TX 75001
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	4725
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$378.00
4. Number of Access Lines Receiving Lifeline Support.....	4691
5. Amount of Reimbursement Requested from Kentucky USF.....	\$16,418.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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

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Capitol Annex, Room 488A
Frankfort, KY 40601

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P.O. Box 615
Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2014-09

Carrier Information
Company Name: Blue Jay Wireless
Company Address: 51010 Addison Circle Addison, TX 75001
Telephone / Fax: 214-448-4172 / 972-387-4830
Vendor Number: [Redacted]

Classification
Please Circle One ILEC CLEC cellular PCS

Monthly Access Line Data
1. Total Access Lines in Service..... 6837
2. Surcharge Per Access Line..... \$0.08
3. Amount of Surcharge Remitted to Kentucky USF..... \$546.96
4. Number of Access Lines Receiving Lifeline Support..... 6808
5. Amount of Reimbursement Requested from Kentucky USF..... \$23,828.00

Signature Block
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.
Company Official (Printed) Title Company Official (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:
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P.O. Box 615
Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2014-10

Carrier Information
Company Name: Blue Jay Wireless
Company Address: 51010 Addison Circle Addison, TX 75001
Telephone / Fax: 214-448-4172 / 972-387-4830
Vendor Number: [Redacted]

Classification
Please Circle One ILEC CLEC cellular PCS

Monthly Access Line Data
Table with 5 rows: Total Access Lines in Service (8089), Surcharge Per Access Line (\$0.08), Amount of Surcharge Remitted to Kentucky USF (\$647.12), Number of Access Lines Receiving Lifeline Support (7933), Amount of Reimbursement Requested from Kentucky USF (\$27,765.50)

Signature Block
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.
Company Official (Printed) Title Company Official (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:
Finance and Administration Cabinet
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Frankfort, KY 40601

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P.O. Box 615
Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2014-11

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	51010 Addison Circle Addison, TX 75001
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	cellular	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	8414
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$673.12
4. Number of Access Lines Receiving Lifeline Support.....	8263
5. Amount of Reimbursement Requested from Kentucky USF.....	\$28,920.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2014-12

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	51010 Addison Circle Addison, TX 75001
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	8386
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$670.88
4. Number of Access Lines Receiving Lifeline Support.....	8039
5. Amount of Reimbursement Requested from Kentucky USF.....	\$28,136.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-01

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	51010 Addison Circle Addison, TX 75001
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	8007
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$640.56
4. Number of Access Lines Receiving Lifeline Support.....	7836
5. Amount of Reimbursement Requested from Kentucky USF.....	\$27,426.00

Signature Block	
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COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-02

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	XXXXXXXXXX

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	7955
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$636.40
4. Number of Access Lines Receiving Lifeline Support.....	7787
5. Amount of Reimbursement Requested from Kentucky USF.....	\$27,252.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
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Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-03

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	cellular	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	8512
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$680.96
4. Number of Access Lines Receiving Lifeline Support.....	8378
5. Amount of Reimbursement Requested from Kentucky USF.....	\$29,323.00

Signature Block	
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Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-04

Carrier Information
Company Name: Blue Jay Wireless
Company Address: 4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax: 214-448-4172 / 972-387-4830
Vendor Number: [Redacted]

Classification
Please Circle One: ILEC, CLEC, cellular, PCS

Monthly Access Line Data
1. Total Access Lines in Service: 10188
2. Surcharge Per Access Line: \$0.08
3. Amount of Surcharge Remitted to Kentucky USF: \$815.04
4. Number of Access Lines Receiving Lifeline Support: 7812
5. Amount of Reimbursement Requested from Kentucky USF: \$27,342.00

Signature Block
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.
Company Official (Printed) Title Company Official (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:
Finance and Administration Cabinet
ATTN: KY USF
702 Capital Ave.
Capitol Annex, 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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-05

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	cellular	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	10389
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$831.12
4. Number of Access Lines Receiving Lifeline Support.....	9954
5. Amount of Reimbursement Requested from Kentucky USF.....	\$34,839.00

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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

Finance and Administration Cabinet
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Capitol Annex, Room 488A
Frankfort, KY 40601

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P.O. Box 615
Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-06

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	12,312
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$984.96
4. Number of Access Lines Receiving Lifeline Support.....	11,844
5. Amount of Reimbursement Requested from Kentucky USF.....	\$41,454.00

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-07

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	16.351
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$1308.08
4. Number of Access Lines Receiving Lifeline Support.....	15,818
5. Amount of Reimbursement Requested from Kentucky USF.....	\$55,363.00

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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Frankfort, KY 40601

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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-08

Carrier Information
Company Name: Blue Jay Wireless
Company Address: 4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax: 214-448-4172 / 972-387-4830
Vendor Number: [Redacted]

Classification
Please Circle One: ILEC, CLEC, cellular, PCS

Monthly Access Line Data
1. Total Access Lines in Service: 20.072
2. Surcharge Per Access Line: \$0.08
3. Amount of Surcharge Remitted to Kentucky USF: \$1605.76
4. Number of Access Lines Receiving Lifeline Support: 20,018
5. Amount of Reimbursement Requested from Kentucky USF: \$70,063.00

Signature Block
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.
Company Official (Printed) Title Company Official (Signed)

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Frankfort, KY 40601

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211 Sower Blvd.
P.O. Box 615
Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-09

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	cellular	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	23,885
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$1910.80
4. Number of Access Lines Receiving Lifeline Support.....	23,021
5. Amount of Reimbursement Requested from Kentucky USF.....	\$80,573.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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

Finance and Administration Cabinet
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702 Capital Ave.
Capitol Annex, 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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-10

Carrier Information
Company Name: Blue Jay Wireless
Company Address: 4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax: 214-448-4172 / 972-387-4830
Vendor Number: [Redacted]

Classification
Please Circle One: ILEC, CLEC, cellular, PCS

Monthly Access Line Data
1. Total Access Lines in Service: 25,457
2. Surcharge Per Access Line: \$0.08
3. Amount of Surcharge Remitted to Kentucky USF: \$2036.56
4. Number of Access Lines Receiving Lifeline Support: 24,206
5. Amount of Reimbursement Requested from Kentucky USF: \$84,721.00

Signature Block
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.
Company Official (Printed) Title Company Official (Signed)

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Frankfort, KY 40601

Send a copy of this report to:
Kentucky Public Service Commission
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P.O. Box 615
Frankfort, KY 40602



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-11

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	cellular	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	25,908
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$2,072.64
4. Number of Access Lines Receiving Lifeline Support.....	24,873
5. Amount of Reimbursement Requested from Kentucky USF.....	\$87,055.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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Frankfort, KY 40601

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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2015-12

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	XXXXXXXXXX

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
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Monthly Access Line Data	
1. Total Access Lines in Service.....	25,932
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$2,074.56
4. Number of Access Lines Receiving Lifeline Support.....	25,065
5. Amount of Reimbursement Requested from Kentucky USF.....	\$87,727.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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

Finance and Administration Cabinet
ATTN: KY USF
702 Capital Ave.
Capitol Annex, 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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016

Reporting Month 2016-01

Carrier Information	
Company Name	Blue Jay Wireless
Company Address	4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax	214-448-4172 / 972-387-4830
Vendor Number	[REDACTED]

Classification Please Circle One	ILEC	CLEC	<u>cellular</u>	PCS
-------------------------------------	------	------	-----------------	-----

Monthly Access Line Data	
1. Total Access Lines in Service.....	26,309
2. Surcharge Per Access Line.....	\$0.08
3. Amount of Surcharge Remitted to Kentucky USF.....	\$2,104.72
4. Number of Access Lines Receiving Lifeline Support.....	25,111
5. Amount of Reimbursement Requested from Kentucky USF.....	\$87,888.50

Signature Block	
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.	
Company Official _____ (Printed)	Title _____ Company Official _____ (Signed)

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

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

Send a copy of this report to:

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



COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 3/8/2016

Reporting Month 2016-02

Carrier Information
Company Name: Blue Jay Wireless
Company Address: 4240 International Parkway, Suite 140, Carrollton, TX 75007
Telephone / Fax: 214-448-4172 / 972-387-4830
Vendor Number: [Redacted]

Classification
Please Circle One: ILEC, CLEC, cellular, PCS

Monthly Access Line Data
1. Total Access Lines in Service: 25,640
2. Surcharge Per Access Line: \$0.08
3. Amount of Surcharge Remitted to Kentucky USF: \$
4. Number of Access Lines Receiving Lifeline Support: 25,111
5. Amount of Reimbursement Requested from Kentucky USF: \$87,888.50

Signature Block
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.
Company Official (Printed) Title Company Official (Signed)

Make check payable to: "Kentucky State Treasurer" and send with this report to:
Finance and Administration Cabinet
ATTN: KY USF
702 Capital Ave.
Capitol Annex, Room 488A
Frankfort, KY 40601

Send a copy of this report to:
Kentucky Public Service Commission
ATTN: Executive Director
211 Sower Blvd.
P.O. Box 615
Frankfort, KY 40602

ATTACHMENT B

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	09/07/2014
Contact Name:	CAITLYN LUMPKIN	b) Data Month	August 2014
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>4691</u>	x \$ <u>9.25</u>	= \$ <u>43392</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>43392</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 43392 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 43392

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

09/07/2014

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

NOTICE: To implement section 254 of the Communications Act of 1934, as amended, the Federal Communications Commission has adopted changes to the federal low-income programs.

The following worksheet provides the means by which eligible telecommunications carriers will be reimbursed by the Universal Service Administrative Company (USAC) for their participation in these programs. Failing to collect the information, or collecting it less frequently, would prevent the Commission from implementing sections 214 and 254 of the Act, would thwart Congress' goals of providing affordable service and access to advanced services throughout the nation, and would result in eligible telecommunications carriers not receiving universal service support reimbursements in a timely fashion.

We have estimated that each response to this collection of information will take, on average, three hours for each respondent. Our estimate includes the time to read this data request, review existing records, gather and maintain required data, and complete and review the response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PER, Washington, D.C. 20554, Paperwork Reduction Project (3060-0819). We will also accept your comments on the burden estimate via the Internet if you send them to PRA@fcc.gov. Please DO NOT SEND the data requested to this e-mail address.

Remember -- An agency may not conduct or sponsor, and a person is not required to respond to a collection of information sponsored by the Federal government unless it displays a currently valid OMB control number. This information collection has been assigned OMB Control Number: 3060-0819.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your worksheet may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your worksheets may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

If you do not provide the information we request on the form, the FCC may delay processing of your worksheet or may return your worksheet without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. Section 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. Section 3501, et seq.

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	10/08/2014
Contact Name:	CAITLYN LUMPKIN	b) Data Month	September 2014
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024		
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>6808</u>	x \$ <u>9.25</u>	= \$ <u>62974</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>62974</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 62974 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 62974

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

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Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

10/08/2014

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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The following worksheet provides the means by which eligible telecommunications carriers will be reimbursed by the Universal Service Administrative Company (USAC) for their participation in these programs. Failing to collect the information, or collecting it less frequently, would prevent the Commission from implementing sections 214 and 254 of the Act, would thwart Congress' goals of providing affordable service and access to advanced services throughout the nation, and would result in eligible telecommunications carriers not receiving universal service support reimbursements in a timely fashion.

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The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your worksheet may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your worksheets may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

If you do not provide the information we request on the form, the FCC may delay processing of your worksheet or may return your worksheet without action.

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	11/10/2014
Contact Name:	CAITLYN LUMPKIN	b) Data Month	October 2014
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>7933</u>	x \$ <u>9.25</u>	= \$ <u>73380</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>73380</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 73380 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 73380

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

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11/10/2014

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

NOTICE: To implement section 254 of the Communications Act of 1934, as amended, the Federal Communications Commission has adopted changes to the federal low-income programs.

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	12/08/2014
Contact Name:	CAITLYN LUMPKIN	b) Data Month	November 2014
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>8263</u>	x \$ <u>9.25</u>	= \$ <u>76433</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>76433</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 76433 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 76433

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

12/08/2014

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	01/08/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	December 2014
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024		
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>8039</u>	x \$ <u>9.25</u>	= \$ <u>74361</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>74361</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 74361 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 74361

(20) CERTIFICATIONS AND SIGNATURES

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I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

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01/08/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	02/09/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	January 2015
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>7836</u>	x \$ <u>9.25</u>	= \$ <u>72483</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>72483</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 72483 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 72483

(20) CERTIFICATIONS AND SIGNATURES

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02/09/2015

David Wareikis

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OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	03/09/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	February 2015
Mailing Address:	5010 ADDISON CIRCLE	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	ADDISON, TX 75001		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>7787</u>	x \$ <u>9.25</u>	= \$ <u>72030</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>72030</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 72030 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 72030

(20) CERTIFICATIONS AND SIGNATURES

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03/09/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	04/07/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	March 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>8378</u>	x \$ <u>9.25</u>	= \$ <u>77497</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>77497</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 77497 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 77497

(20) CERTIFICATIONS AND SIGNATURES

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04/07/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	05/07/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	April 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024		
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>7812</u>	x \$ <u>9.25</u>	= \$ <u>72261</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>72261</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 72261 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 72261

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

05/07/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	06/08/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	May 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024		
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>9954</u>	x \$ <u>9.25</u>	= \$ <u>92075</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>92075</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 92075 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 92075

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

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06/08/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	07/14/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	June 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>11844</u>	x \$ <u>9.25</u>	= \$ <u>109557</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>109557</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 109557 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 109557

(20) CERTIFICATIONS AND SIGNATURES

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07/14/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	08/07/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	July 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>15818</u>	x \$ <u>9.25</u>	= \$ <u>146317</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>146317</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 146317 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 146317

(20) CERTIFICATIONS AND SIGNATURES

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I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

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08/07/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	09/03/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	August 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>20018</u>	x \$ <u>9.25</u>	= \$ <u>185167</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>185167</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 185167 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 185167

(20) CERTIFICATIONS AND SIGNATURES

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09/03/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	10/06/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	September 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>23021</u>	x \$ <u>9.25</u>	= \$ <u>212944</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>212944</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 212944 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 212944

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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10/06/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	11/04/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	October 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>24206</u>	x \$ <u>9.25</u>	= \$ <u>223906</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>223906</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 223906 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 223906

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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11/04/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	12/03/2015
Contact Name:	CAITLYN LUMPKIN	b) Data Month	November 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>24873</u>	x \$ <u>9.25</u>	= \$ <u>230075</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>230075</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 230075 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 230075

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

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12/03/2015

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	01/08/2016
Contact Name:	CAITLYN LUMPKIN	b) Data Month	December 2015
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>25065</u>	x \$ <u>9.25</u>	= \$ <u>231851</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>231851</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 231851 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 231851

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

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01/08/2016

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	02/03/2016
Contact Name:	CAITLYN LUMPKIN	b) Data Month	January 2016
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>25111</u>	x \$ <u>9.25</u>	= \$ <u>232277</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>232277</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 232277 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 232277

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

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02/03/2016

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	03/03/2016
Contact Name:	CAITLYN LUMPKIN	b) Data Month	February 2016
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>24865</u>	x \$ <u>9.25</u>	= \$ <u>230001</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>230001</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 230001 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 230001

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

03/03/2016

David Wareikis

DATE

OFFICER SIGNATURE

CEO

David Wareikis

OFFICER TITLE

OFFICER NAME

NOTICE: To implement section 254 of the Communications Act of 1934, as amended, the Federal Communications Commission has adopted changes to the federal low-income programs.

The following worksheet provides the means by which eligible telecommunications carriers will be reimbursed by the Universal Service Administrative Company (USAC) for their participation in these programs. Failing to collect the information, or collecting it less frequently, would prevent the Commission from implementing sections 214 and 254 of the Act, would thwart Congress' goals of providing affordable service and access to advanced services throughout the nation, and would result in eligible telecommunications carriers not receiving universal service support reimbursements in a timely fashion.

We have estimated that each response to this collection of information will take, on average, three hours for each respondent. Our estimate includes the time to read this data request, review existing records, gather and maintain required data, and complete and review the response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PER, Washington, D.C. 20554, Paperwork Reduction Project (3060-0819). We will also accept your comments on the burden estimate via the Internet if you send them to PRA@fcc.gov. Please DO NOT SEND the data requested to this e-mail address.

Remember -- An agency may not conduct or sponsor, and a person is not required to respond to a collection of information sponsored by the Federal government unless it displays a currently valid OMB control number. This information collection has been assigned OMB Control Number: 3060-0819.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your worksheet may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your worksheets may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

If you do not provide the information we request on the form, the FCC may delay processing of your worksheet or may return your worksheet without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. Section 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. Section 3501, et seq.

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143037125 (2) Study Area Code 269047

(3) Filer 499 ID 829394 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Blue Jay Wireless LLC	a) Submission Date	04/04/2016
Contact Name:	CAITLYN LUMPKIN	b) Data Month	March 2016
Mailing Address:	4240 International Parkway Suite 140	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	Carrollton, TX 75007		
Telephone Number:	678-389-6024	d) State Reporting	KENTUCKY
Fax Number:	770-594-3878		
E-mail Address:	caitlyn.lumpkin@cgminc.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>24976</u>	x \$ <u>9.25</u>	= \$ <u>231028</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>231028</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 231028 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 231028

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04/04/2016

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ATTACHMENT C

[APPLY NOW](#)

[About Us](#)

[Plans](#)

[News](#)

[Contact](#)



Kentucky

Kentucky Lifeline & Low Income Cell Phone Plans

Are you a beneficiary of one of the government programs below?
OR Is your household income at or below 135% of the federal poverty level?
If so, you may be eligible to receive our amazing FREE phone and monthly service!

[GET STARTED](#)

[TERMS & CONDITIONS](#)

Qualifying Government Programs in Kentucky:

In order to qualify for cell phone service through the Lifeline program you must be a current participant of one of the following programs in Kentucky or have Income at or below 135% Federal Poverty Guidelines.

SNAP or Food Stamps
NSLP

KenPAC / Medicaid
SSI

FPHA or Section 8
K-TAP / TANF

LIHEAP

Current Blue Jay Wireless Cell Phone Plans in Kentucky

[All](#) [Data Reloads](#) [Lifeline Plans](#) [Minute Top-ups](#) [Non-Lifeline Plans](#)

Lifeline 500 Total Plan

👉 **Cost:** FREE

👉 **Minutes:** 500

👉 **Texts:** 1 text = 1 minute
(sending or receiving)

[APPLY NOW](#)

Prices exclude fees and taxes, where applicable. Some restrictions apply. Visit Blue Jay Wireless' [Terms and Conditions](#) for more information.



ATTACHMENT D

Free phone. Free service. Sounds good.



If you are enrolled in any of these programs, you qualify for Lifeline in Kentucky:

KenPAC (Medicaid, not Medicare) • Supplemental Nutrition Assistance Program (SNAP) • Kentucky Transitional Assistance Program (K-TAP / TANF)
Federal Public Housing Assistance (FPHA or Section 8) • Low-Income Home Energy Assistance Program (LIHEAP)
National School Lunch Program's Free Lunch Program (NSLP) • Supplemental Security Income (SSI) • Ask about Income Based Eligibility too!

KY Lifeline Plans

FREE 500 Total Plan
500 free anytime voice minutes*

KY Lifeline Top-ups

\$26 Unlimited Voice and Text Top-up
Unlimited minutes & texts

\$30.75 Unlimited Voice and Text w/ 500 MB Data Top-up
Unlimited minutes & texts
+ 500 MB of data

\$40 Unlimited Voice and Text w/ 5 GB Data Top-up
Unlimited minutes & texts
+ 5 GB of data

Don't Qualify?

Don't qualify for Lifeline? Our prepaid options will still fit the bill.

\$12.75 a month 500 Total Plan
500 anytime voice minutes*

\$35.25 a month Unlimited Voice and Text Plan
Unlimited minutes & texts

\$40 a month Unlimited Voice and Text w/ 500 MB Data Plan
Unlimited minutes & texts
+ 500 MB of data

\$49.25 a month Unlimited Voice and Text w/ 5 GB Data Plan
Unlimited minutes & texts
+ 5 GB of data

Need Minutes?

Need more minutes or text? Our top-up options keep you going.

\$5 100 Total Top-Up
+ 100 anytime voice minutes*

\$10 200 Total Top-Up
+ 200 anytime voice minutes*

\$20 500 Total Top-Up
+ 500 anytime voice minutes*

*Text messaging will be assessed at a rate of 1 minute per text message for sending and 1 minute per text message for receiving text messages

Need Data?

Need more data? Our data options keep you surfing.

\$5 50 MB Top-Up
+ 50 MB of data

\$10 100 MB Top-Up
+ 100 MB of data

\$20 250 MB Top-Up
+ 250 MB of data

\$30 1 GB Top-Up
+ 1 GB of data

\$40 5 GB Top-Up
+ 5 GB of data

This is a Lifeline service provided by Blue Jay Wireless, LLC, which is an eligible telecommunications carrier. (1) Lifeline is a government assistance program. (2) Service is non-transferable. (3) Only one Lifeline discount (wireless or wireline) may be received per household. (4) Only eligible consumers may enroll in the program. (5) Consumers who willfully make a false statement in order to obtain the Lifeline benefit can be punished by fine or imprisonment or can be barred from the program. (6) Customers must present proper documentation confirming eligibility for the Lifeline program through participation in Federal Public Housing Assistance or Section 8, Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps), Low-Income Home Energy Assistance Program (LIHEAP), income at or below 135% of the Federal Poverty Guidelines (may vary by state), Medicaid, National School Lunch Program's Free Lunch Program, Supplemental Security Income (SSI), Temporary Assistance to Needy Families (TANF), Bureau of Indian Affairs general assistance, Tribally administered Temporary Assistance for Needy Families, Head Start (only those households meeting its income qualifying standard) or the Food Distribution Program on Indian Reservations. Program based eligibility criteria varies by state. Proof of eligibility includes an eligible program card or statement of benefits.

Prices subject to fees and taxes. See terms and conditions for additional information on our website at www.bluejaywireless.com.

ATTACHMENT E



Blue Jay Wireless ✓

Written by Jerome Banks [?] · 4 hrs · 🌐



Special offer! If you submit a copy of your tax return when you apply, you can earn up to an additional 500 free minutes.

Earn more from your tax return.

Now that's a smart idea.



 bluejay wireless



Tax Day Special Offer

BLUEJAYWIRELESS.COM

[Apply Now](#)

4,219 people reached



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