COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

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

TAG MOBILE LLC’S RESPONSES
TO COMMISSION STAFF’S FIRST REQUESTS FOR INFORMATION

TAG Mobile, LLC (“TAG”) 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, Mary Calderon, being first duly sworn upon oath, depose and say that I am the Vice President of Legal, Regulatory and Compliance of Tag Mobile, 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.

\[\text{Signature: Mary Calderon}\]

Subscribed and sworn to before me this 24 day of April, 2016

\[\text{Signature: Araceli Aguilar}\]

Notary Public

My Commission expires: 3-11-2018
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.


RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, &
Compliance
REQUEST NO. 2.  Provide the Federal Communication Commission ("FCC") Form 497 submitted to the FCC from January 2014 to the present.


RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: Please see “Exhibit C” (Kentucky Revised Plan, Effective December 15, 2015) for a copy of the lifeline plan currently offered to Kentucky subscribers.

When Tag Mobile, LLC was designated an ETC, “Under TAG Mobile’s current Wireless Lifeline plan, qualified Lifeline customers who reside in the State of Kentucky will be provided with sixty-eight (68) minutes of free anytime local and long distance minutes each month.”

On December 15, 2015, Tag Mobile, LLC notified the Commission via electronic mail and UPS Overnight Delivery that Tag Mobile, LLC will offer Kentucky Lifeline subscribers the Lifeline Base Plan. The plan includes 500 local voice minutes, $1.50 calling credit for international calling, and unlimited global text messaging every 30 days from date of activation, and a free 911/E911 compliant feature handset ("new" or in “like new” condition will be provided based on availability).

The current Lifeline plan was not offered at the time Tag Mobile, LLC was designated as an ETC.

The Lifeline Base Plan was changed on December 15, 2015 to enhance the customer’s experience.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: Tag Mobile, LLC would continue to provide Lifeline voice only support.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: Ease in changing providers has created some incentives for abuse by Lifeline eligible subscribers. One procedure that might reduce the abuse could be a Commission requirement for a port freeze process.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: TAG Mobile does not issue bills.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
REQUEST NO. 7. Provide, in detail, the methods employed to verify the eligibility of customers who participate in the Lifeline program.

RESPONSE: Tag Mobile, LLC eligibility requirements include proof of identity, proof of subsidy, and proof of income.

Proof of identity must be in the form of a state issued identification card. The following information submitted on our customer’s Lifeline application must match the identification card:

- The customer’s full name
- The customer’s full residential address
- The customer’s date of birth

If the customer wishes to subscribe for Lifeline by subsidy eligibility, the customer must provide proof. The customer’s name on the proof of subsidy must match the application and state issued identification card.

If the customer wishes to subscribe for Lifeline by income eligibility, the customer must provide proof (i.e., income tax return, paystub). The customer’s name on the proof of income must match the application and state issued identification card.

The information provided is then entered into the National Lifeline Accountability Database (NLAD) to prevent duplicate subscriber, confirm number in household, income, and identity.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: TAG Mobile has not been subjected to penalties related to participation in the Lifeline program. [BEGIN CONFIDENTIAL] [END CONFIDENTIAL]

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: Tag Mobile, LLC is currently marketing in Kentucky via its website, www.tagmobile.com.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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.


RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: The line receives a full month subsidy.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: It depends on the day of the month the line started and the day of the month the line cancelled. If line cancels on a day of the month after the start day, they receive full subsidy. If the line cancels a day of the month prior to the start day of the month, no subsidy will be requested. Here is an example:

- If line activates 1/15/2015 and disconnects 5/7/2015, line is NOT eligible for subsidy on the way out.
- If line activates 1/15/2015 and disconnects 5/27/2015, line IS eligible for lifeline subsidy on the way out

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: Tag Mobile, LLC is only pre-paid. The customer does not receive a bill. We would not experience a “bad debt.”

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: FCC action appears imminent, so there appears to be little harm if the PSC chooses to wait.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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: Tag Mobile, LLC treats the monthly customer charge as a business expense and reports it to the PSC. No customer is billed.

RESPONSIBLE WITNESS: Mary Calderon, Vice President of Legal Regulatory, & Compliance
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
Exhibit A
**Carrier Information**

<table>
<thead>
<tr>
<th>Company Name</th>
<th>TAG MOBILE, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Address</td>
<td>1330 CAPITAL PARKWAY CARROLLTON, TX 75006</td>
</tr>
<tr>
<td>Telephone / Fax</td>
<td>214-453-0640 / 469-574-7931</td>
</tr>
</tbody>
</table>

**Classification**

Please Circle One

- [ ] ILEC
- [ ] CLEC
- [x] cellular
- [ ] PCS

**Monthly Access Line Data**

1. Total Access Lines in Service .................................................. 8,404
2. Surcharge Per Access Line .......................................................... $0.08
3. Amount of Surcharge Remitted to Kentucky USF .............................. $672.32
4. Number of Access Lines Receiving Lifeline Support ........................ 7,057
5. Amount of Reimbursement Requested from Kentucky USF ................... $24,699.50

**Signature Block**

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

Company Official _______________________ 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

Revised 03-13-2008
COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date _______4/26/2016_________ Reporting Month _______2014-02_________

Carrier Information

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Classification

Please Circle One

| ILEC | CLEC | cellular | PCS |

Monthly Access Line Data

1. Total Access Lines in Service…………………………………………____ 7,568________
2. Surcharge Per Access Line……………………………………………__________ $0.08_________
3. Amount of Surcharge Remitted to Kentucky USF…………………….____ $605.44_________
4. Number of Access Lines Receiving Lifeline Support…………………___ 6,559________
5. Amount of Reimbursement Requested from Kentucky USF…………._________ $22,956.50________________

Signature Block

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

Company Official _______________________Title_______________________ Company Official_________________________
(Printed) (Signed)

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Revised 03-13-2008
Date 4/26/2016 Reporting Month 2014-03

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<td>Telephone / Fax</td>
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Classification
Please Circle One
ILEC  CLEC  cellular  PCS

Monthly Access Line Data

1. Total Access Lines in Service…………………………………………____ 6,353
2. Surcharge Per Access Line…………………………………………….____ $0.08
3. Amount of Surcharge Remitted to Kentucky USF……………………____ $508.24
4. Number of Access Lines Receiving Lifeline Support…………………___ 6,292
5. Amount of Reimbursement Requested from Kentucky USF………….____ $22,022.00

Signature Block

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Company Official _______________________Title_______________________Company Official_________________________
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Revised 03-13-2008
**COMMONWEALTH OF KENTUCKY**
**UNIVERSAL SERVICE FUND**

Date: 4/26/2016  
Reporting Month: 2014-04

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- [ ] ILEC
- [ ] CLEC
- [x] cellular
- [ ] PCS

**Monthly Access Line Data**

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<td>1. Total Access Lines in Service</td>
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<td>2. Surcharge Per Access Line</td>
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<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
<td>$505.04</td>
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<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>5654</td>
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<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
<td>$19,789.00</td>
</tr>
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</table>

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**Monthly Access Line Data**

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<td>1. Total Access Lines in Service</td>
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<td>2. Surcharge Per Access Line</td>
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<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
<td>$438.64</td>
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<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>5130</td>
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<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
<td>$17,955.00</td>
</tr>
</tbody>
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Revised 03-13-2008
Date 4/26/2016 Reporting Month 2014-06

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Classification
Please Circle One
ILEC   CLEC   cellular   PCS

Monthly Access Line Data

1. Total Access Lines in Service...........................................4974
2. Surcharge Per Access Line..............................................$0.08
3. Amount of Surcharge Remitted to Kentucky USF....................$ 397.92
4. Number of Access Lines Receiving Lifeline Support..............4,618
5. Amount of Reimbursement Requested from Kentucky USF...........$16,163.00

Signature Block

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Revised 03-13-2008
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**Classification**

Please Circle One

- [ ] ILEC
- [ ] CLEC
- [ ] cellular
- [ ] PCS

**Monthly Access Line Data**

1. Total Access Lines in Service…………………………………………_______ 4077____
2. Surcharge Per Access Line……………………………………………__________ $0.08 _________
3. Amount of Surcharge Remitted to Kentucky USF…………………….____ $326.16 ___________
4. Number of Access Lines Receiving Lifeline Support…………………___ 3906 _________
5. Amount of Reimbursement Requested from Kentucky USF…………._________ $13,671.00 ___________

**Signature Block**

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Company Official _______________________Title_______________________Company Official_________________________
(Printed) (Signed)

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Revised 03-13-2008
Date _4/26/2016_ Reporting Month _2014-08_

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<td>Vendor Number</td>
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| Classification       | ILEC       CLEC      cellular    PCS |
|----------------------|------------|---------|-----------|
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<tbody>
<tr>
<td>1. Total Access Lines in Service…………………………………………___<strong><strong>3784</strong></strong></td>
</tr>
<tr>
<td>2. Surcharge Per Access Line……………………………………………<strong><strong><strong><strong><strong>$0.08</strong></strong></strong></strong></strong></td>
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<td>3. Amount of Surcharge Remitted to Kentucky USF…………………….____$302.72______________</td>
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<td>4. Number of Access Lines Receiving Lifeline Support…………………<em><strong>3600</strong></em>______</td>
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<td>5. Amount of Reimbursement Requested from Kentucky USF………….<em><strong><strong><strong><strong>$12,600.00</strong></strong></strong></strong></em>_________</td>
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Revised 03-13-2008
Date: 4/26/2016  
Reporting Month: 2014-09

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Classification

Please Circle One

ILEC  
CLEC  
Cellular  
PCS

Monthly Access Line Data

1. Total Access Lines in Service…………………………………………_______3790____
2. Surcharge Per Access Line……………………………………………_________ $0.08__________
3. Amount of Surcharge Remitted to Kentucky USF……………………____$303.20________
4. Number of Access Lines Receiving Lifeline Support…………………__3353____
5. Amount of Reimbursement Requested from Kentucky USF…………____$11,735.50________

Signature Block

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

Company Official _______________________Title_______________________Company Official_________________________
(Printed)  
(Signed)

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<td>1. Total Access Lines in Service</td>
<td>3263</td>
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<td>2. Surcharge Per Access Line</td>
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<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
<td>$261.04</td>
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<tr>
<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>3121</td>
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<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
<td>$10,923.50</td>
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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

Revised 03-13-2008
**Date** 4/26/2016  
**Reporting Month** 2014-11

### Carrier Information

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<tr>
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</tr>
<tr>
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<td>214-453-0640 / 469-574-7931</td>
</tr>
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</table>

### Classification

Please Circle One

- [ ] ILEC
- [ ] CLEC
- [ ] Cellular
- [ ] PCS

### Monthly Access Line Data

1. Total Access Lines in Service .................................................. ____3020____
2. Surcharge Per Access Line ......................................................... $0.08
3. Amount of Surcharge Remitted to Kentucky USF .............................. $241.60
4. Number of Access Lines Receiving Lifeline Support ........................ ____2817____
5. Amount of Reimbursement Requested from Kentucky USF ........................ $9,859.50

### Signature Block

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

Company Official ___________________ Title ___________________ Company Official ___________________  
(Printed) (Signed)

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

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Revised 03-13-2008
**COMMONWEALTH OF KENTUCKY**  
**UNIVERSAL SERVICE FUND**

| Date       | 4/26/2016       | Reporting Month | 2014-12 |

## Carrier Information

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### Classification

Please Circle One

- ILEC
- CLEC
- **cellular**
- PCS

## Monthly Access Line Data

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<tr>
<td>1.</td>
<td>Total Access Lines in Service ........................................ 2790</td>
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<td>2.</td>
<td>Surcharge Per Access Line ............................................. $0.08</td>
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<tr>
<td>3.</td>
<td>Amount of Surcharge Remitted to Kentucky USF ....................... $223.20</td>
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<td>4.</td>
<td>Number of Access Lines Receiving Lifeline Support ................. 2679</td>
</tr>
<tr>
<td>5.</td>
<td>Amount of Reimbursement Requested from Kentucky USF .............. $9,376.50</td>
</tr>
</tbody>
</table>

## Signature Block

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Revised 03-13-2008
Date 4/26/2016 Reporting Month 2015-01

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Classification

Please Circle One

ILEC  CLEC  cellular  PCS

Monthly Access Line Data

1. Total Access Lines in Service…………………………………………_______ 2684____
2. Surcharge Per Access Line……………………………………………________ $0.08________
3. Amount of Surcharge Remitted to Kentucky USF…………………____$214.72____________
4. Number of Access Lines Receiving Lifeline Support…………………____1905____
5. Amount of Reimbursement Requested from Kentucky USF………..____$6,667.50____________

Signature Block

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### Classification

Please Circle One
- ILEC
- CLEC
- Cellular
- PCS

### Monthly Access Line Data

1. Total Access Lines in Service: 1837
2. Surcharge Per Access Line: $0.08
3. Amount of Surcharge Remitted to Kentucky USF: $146.96
4. Number of Access Lines Receiving Lifeline Support: 1807
5. Amount of Reimbursement Requested from Kentucky USF: $6,324.50

### Signature Block

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(Printed) (Signed)

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### Classification

Please Circle One

- ILEC
- CLEC
- cellular
- PCS

### Monthly Access Line Data

1. Total Access Lines in Service ........................................... 1799
2. Surcharge Per Access Line ............................................. $0.08
3. Amount of Surcharge Remitted to Kentucky USF .................. $143.92
4. Number of Access Lines Receiving Lifeline Support .......... 1743
5. Amount of Reimbursement Requested from Kentucky USF ...... $6,100.50

### Signature Block

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Company Official ___________________ Title __________________ Company Official __________________ (Signed)

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Revised 03-13-2008
COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date 4/26/2016 Reporting Month 2015-04

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Classification

Please Circle One ILEC CLEC cellular PCS

Monthly Access Line Data

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<td>1. Total Access Lines in Service</td>
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<td>2. Surcharge Per Access Line</td>
<td>$0.08</td>
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<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
<td>$130.72</td>
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<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>1523</td>
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<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
<td>$5,330.50</td>
</tr>
</tbody>
</table>

Signature Block

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

Company Official _______________________Title_______________________Company Official _______________________
(Printed) (Signed)

Exhibit A
Page 16

Send a copy of this report to:
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Revise 03-13-2008

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Capitol Annex, Room 488A
Frankfort, KY 40601
Date: 4/26/2016 Reporting Month: 2015-05

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### Classification

| Please Circle One | ILEC | CLEC | cellular | PCS |

### Monthly Access Line Data

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<tbody>
<tr>
<td>1.</td>
<td>Total Access Lines in Service: 1501</td>
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<td>2.</td>
<td>Surcharge Per Access Line: $0.08</td>
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<td>3.</td>
<td>Amount of Surcharge Remitted to Kentucky USF: $120.08</td>
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<td>4.</td>
<td>Number of Access Lines Receiving Lifeline Support: 1436</td>
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<tr>
<td>5.</td>
<td>Amount of Reimbursement Requested from Kentucky USF: $5,026.00</td>
</tr>
</tbody>
</table>

### Signature Block

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

Company Official: [Name]  Title: [Title]  Company Official: [Name]  (Signed)

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P.O. Box 615
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Revised 03-13-2008
Date 4/26/2016 Reporting Month 2015-06

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</table>

**Classification**

| Please Circle One | ILEC | CLEC | cellular | PCS |

**Monthly Access Line Data**

1. Total Access Lines in Service ........................................ 1388
2. Surcharge Per Access Line ........................................... $0.08
3. Amount of Surcharge Remitted to Kentucky USF ................. $111.04
4. Number of Access Lines Receiving Lifeline Support .......... 1364
5. Amount of Reimbursement Requested from Kentucky USF ....... $4,774.00

**Signature Block**

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

Company Official ____________________ 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

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211 Sower Blvd.
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Revised 03-13-2008
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### Classification

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<th>Please Circle One</th>
<th>ILEC</th>
<th>CLEC</th>
<th>cellular</th>
<th>PCS</th>
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### Monthly Access Line Data

1. Total Access Lines in Service…………………………………………_______ 1278____
2. Surcharge Per Access Line……………………………………………__________ $0.08___________
3. Amount of Surcharge Remitted to Kentucky USF…………………….____$102.24________________
4. Number of Access Lines Receiving Lifeline Support……………………____1228____
5. Amount of Reimbursement Requested from Kentucky USF…………._________ $4,298.00____________

### Signature Block

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Company Official _______________________Title_______________________Company Official_________________________
(Printed) (Signed)

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

Revised 03-13-2008
Date: 4/26/2016  Reporting Month: 2015-08

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<tr>
<th>Monthly Access Line Data</th>
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<tr>
<td>1. Total Access Lines in Service: 1162</td>
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<tr>
<td>2. Surcharge Per Access Line: $0.08</td>
</tr>
<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF: $92.96</td>
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<tr>
<td>4. Number of Access Lines Receiving Lifeline Support: 1160</td>
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<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF: $4,060.00</td>
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Revised 03-13-2008
Date: 4/26/2016  
Reporting Month: 2015-09  

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**Classification**

Please Circle One  
ILEC  
CLEC  
Cellular  
PCS

**Monthly Access Line Data**

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<tr>
<td>1.</td>
<td>Total Access Lines in Service: 1105</td>
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<td>2.</td>
<td>Surcharge Per Access Line: $0.08</td>
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<td>3.</td>
<td>Amount of Surcharge Remitted to Kentucky USF: $88.40</td>
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<td>4.</td>
<td>Number of Access Lines Receiving Lifeline Support: 1102</td>
</tr>
<tr>
<td>5.</td>
<td>Amount of Reimbursement Requested from Kentucky USF: $3,857.00</td>
</tr>
</tbody>
</table>

**Signature Block**

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Company Official: __________________________ Title: __________________________ Company Official: __________________________
(Printed) (Signed)

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Revised 03-13-2008
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Classification

Please Circle One

- ILEC
- CLEC
- **cellular**
- PCS

Monthly Access Line Data

1. Total Access Lines in Service…………………………………………_______1116____
2. Surcharge Per Access Line……………………………………………__________ $0.08
3. Amount of Surcharge Remitted to Kentucky USF…………………….____$89.28________________
4. Number of Access Lines Receiving Lifeline Support…………………______1092____
5. Amount of Reimbursement Requested from Kentucky USF………….____$3,822.00____________

Signature Block

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Company Official ___________________ Title ___________________ Company Official ___________________
(Printed) (Signed)

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Classification

Please Circle One

ILEC  CLEC  cellular  PCS

Monthly Access Line Data

1. Total Access Lines in Service.................................................. 1114
2. Surcharge Per Access Line...................................................... $0.08
3. Amount of Surcharge Remitted to Kentucky USF.............................. $89.12
4. Number of Access Lines Receiving Lifeline Support......................... 1083
5. Amount of Reimbursement Requested from Kentucky USF...................... $3,790.50

Signature Block

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Company Official ___________________ Title ___________________ Company Official ___________________ (Signed)

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Revised 03-13-2008
### COMMONWEALTH OF KENTUCKY
### UNIVERSAL SERVICE FUND

**Date**: 4/26/2016  
**Reporting Month**: 2015-12

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

**Monthly Access Line Data**

1. Total Access Lines in Service…………………………………………___ **850**
2. Surcharge Per Access Line…………………………………………… **$0.08**
3. Amount of Surcharge Remitted to Kentucky USF…………………… **$68.00**
4. Number of Access Lines Receiving Lifeline Support………………… **823**
5. Amount of Reimbursement Requested from Kentucky USF………… **$2880.50**

**Signature Block**

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

Company Official _______________________Title_______________________Company Official_________________________

(Printed) (Signed)

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<thead>
<tr>
<th>Company Name</th>
<th>TAG MOBILE, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Address</td>
<td>1330 CAPITAL PARKWAY CARROLLTON, TX 75006</td>
</tr>
<tr>
<td>Telephone / Fax</td>
<td>214-453-0640 / 469-574-7931</td>
</tr>
<tr>
<td>Vendor Number</td>
<td></td>
</tr>
</tbody>
</table>

### Classification

<table>
<thead>
<tr>
<th>Please Circle One</th>
<th>ILEC</th>
<th>CLEC</th>
<th>cellular</th>
<th>PCS</th>
</tr>
</thead>
</table>

### Monthly Access Line Data

1. Total Access Lines in Service…………………………………………___ 195 ________
2. Surcharge Per Access Line…………………………………………… $0.08 ________
3. Amount of Surcharge Remitted to Kentucky USF…………………… $15.60 ________
4. Number of Access Lines Receiving Lifeline Support………………… 195 ________
5. Amount of Reimbursement Requested from Kentucky USF………… $682.50 ________

### Signature Block

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

Company Official _______________________Title_______________________Company Official_________________________
(Printed)  (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

Revised 03-13-2008
Date: 4/26/2016  
Reporting Month: 2016-02

### Carrier Information

<table>
<thead>
<tr>
<th>Company Name</th>
<th>TAG MOBILE, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Address</td>
<td>1330 CAPITAL PARKWAY CARROLLTON, TX 75006</td>
</tr>
<tr>
<td>Telephone / Fax</td>
<td>214-453-0640 / 469-574-7931</td>
</tr>
<tr>
<td>Vendor Number</td>
<td></td>
</tr>
</tbody>
</table>

### Classification

Please Circle One:  
- ILEC  
- CLEC  
- PCS  
- **cellular**  

### Monthly Access Line Data

1. Total Access Lines in Service: 178
2. Surcharge Per Access Line: $0.08
3. Amount of Surcharge Remitted to Kentucky USF: $14.24
4. Number of Access Lines Receiving Lifeline Support: 176
5. Amount of Reimbursement Requested from Kentucky USF: $616.00

### Signature Block

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

Company Official: ____________________  
Title: ____________________  
Company Official: ____________________  
(Printed)  
(Signed)

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Frankfort, KY 40601

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

Revised 02-15-2016
COMMONWEALTH OF KENTUCKY
UNIVERSAL SERVICE FUND

Date: 4/11/2016 Reporting Month: 2016-03

<table>
<thead>
<tr>
<th>Carrier Information</th>
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</thead>
<tbody>
<tr>
<td>Company Name</td>
</tr>
<tr>
<td>Company Address</td>
</tr>
<tr>
<td>Telephone/ Fax</td>
</tr>
<tr>
<td>Vendor Number</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Classification</th>
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</table>

<table>
<thead>
<tr>
<th>Monthly Access Line Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total Access Lines in Service</td>
</tr>
<tr>
<td>2. Surcharge Per Acess Line</td>
</tr>
<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
</tr>
<tr>
<td>4. Number of Access Lines Receiving Lifeline Support</td>
</tr>
<tr>
<td>5. Amount of Reimbursement requested from Kentucky USF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature Block</th>
</tr>
</thead>
<tbody>
<tr>
<td>I hereby attest that the information reported herein is true and accurate to the best of my knowledge.</td>
</tr>
<tr>
<td>Company Official__________________________ Title____________________________ Company Official____________________________</td>
</tr>
<tr>
<td>(Printed) (Signed)</td>
</tr>
</tbody>
</table>

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
### Carrier Information

<table>
<thead>
<tr>
<th>Company Name</th>
<th>TAG MOBILE, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Address</td>
<td>1330 CAPITAL PARKWAY CARROLLTON, TX 75006</td>
</tr>
<tr>
<td>Telephone/ Fax</td>
<td>214-453-0640 / 469-574-7931</td>
</tr>
<tr>
<td>Vendor Number</td>
<td></td>
</tr>
</tbody>
</table>

### Classification

Please Circle One  
ILEC  
CLEC  
**CELLULAR**  
PCS

### Monthly Access Line Data

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total Access Lines in Service</td>
<td>122</td>
</tr>
<tr>
<td>2. Surcharge Per Acess Line</td>
<td>$0.14</td>
</tr>
<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
<td>$17.08</td>
</tr>
<tr>
<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>120</td>
</tr>
<tr>
<td>5. Amount of Reimbursement requested from Kentucky USF</td>
<td>$420.00</td>
</tr>
</tbody>
</table>

### Signature Block

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

Company Official: ___________________________ Title: ___________________________ Company Official: ___________________________

(Printed) (Signed)

---

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Capitol Annex, Room 488A  
Frankfort, KY 40601

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

(1) USAC Service Provider Identification Number: 143035649
(2) Study Area Code: 269034
(3) Filer 499 ID: 828932
(4) Technology Type (check one): Wireline [☐] Wireless [✓]
(5) ETC Designation Type (Check one): Lifeline Only [☐] High Cost/Low Income [✓]
(6) Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name: TAG Mobile LLC</th>
<th>a) Submission Date: 02/07/2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name: Caitlyn Lumpkin</td>
<td>b) Data Month: January 2014</td>
</tr>
<tr>
<td>Mailing Address: 1330 Capital Parkway</td>
<td>c) Type of Filing (check one)</td>
</tr>
<tr>
<td>Carrollton, TX 75006</td>
<td>Original Revision [✓]</td>
</tr>
<tr>
<td>Telephone Number: 678-389-6024</td>
<td>d) State Reporting: KENTUCKY</td>
</tr>
<tr>
<td>Fax Number: 770-594-3878</td>
<td></td>
</tr>
<tr>
<td>E-mail Address: <a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
<td></td>
</tr>
</tbody>
</table>

Lifeline

<table>
<thead>
<tr>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers</td>
<td>Receiving federal Lifeline Support</td>
<td></td>
</tr>
<tr>
<td>(8) 7057</td>
<td>x $ 9.25</td>
<td>=$ 65277</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers</td>
<td>Receiving federal Lifeline Support</td>
<td></td>
</tr>
<tr>
<td>(9) 0</td>
<td>x $ 0.00</td>
<td>=$ 0</td>
</tr>
<tr>
<td>Total Federal Lifeline Support Claimed (10) $ 65277</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>(11) Cost of Providing TLS per Subscriber</th>
<th>(12) Number of TLS Subscribers</th>
</tr>
</thead>
<tbody>
<tr>
<td>(the lesser of incremental cost or $3 in 2012 /$2 in 2013)</td>
<td>0</td>
</tr>
<tr>
<td>Total TLS Support Claimed (13) $ 0</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(14) Number of Connections Waived</th>
<th>(15) Charges Waived per Connection</th>
<th>(16) Total Connection Charges Waived</th>
<th>(17) Deferred Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>$ 0.00</td>
<td>for multiple rates, use an average amount</td>
<td>($not to exceed $100)</td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed (18) $ 0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ETC Payment

<table>
<thead>
<tr>
<th>Total Lifeline $ 65277</th>
<th>Total TLS $ 0</th>
<th>Total Tribal Link Up $ 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Dollars (19) $ 65277</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you have any questions, please call USAC at (866) 873-4727 Toll Free
(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.

______________________________
DATE 	 OFFICER SIGNATURE

President & CEO 	 Charles L Schneider Jr

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-PERM, 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.

FCC Form 497  
April 2012 Edition

**LIFELINE WORKSHEET**  
OMB Approval  
3060-0819  
Avg. Burden Est. per Respondent: 2.5 Hrs.

<table>
<thead>
<tr>
<th>(1) USAC Service Provider Identification Number</th>
<th>143035649</th>
<th>(2) Study Area Code</th>
<th>269034</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3) Filer 499 ID</td>
<td>828932</td>
<td>(4) Technology Type (check one)</td>
<td>Wireline ☐  Wireless ✓</td>
</tr>
<tr>
<td>(5) ETC Designation Type (Check one):</td>
<td>Lifeline Only ☐  High Cost/Low Income ✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(6) Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name</th>
<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>1330 Capital Parkway, Carrollton, TX 75006</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>678-389-6024</td>
</tr>
<tr>
<td>Fax Number</td>
<td>770-594-3878</td>
</tr>
<tr>
<td>E-mail Address</td>
<td><a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
</tr>
</tbody>
</table>

### Lifeline

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) # Lifeline</td>
<td>(b) Lifeline Support/ Subscriber Support</td>
</tr>
<tr>
<td>(c) Total Lifeline</td>
<td></td>
</tr>
<tr>
<td>(8) 6559</td>
<td>x $ 9.25</td>
</tr>
<tr>
<td>(9) 0</td>
<td>x $ 0.00</td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed</td>
<td>(10) $ 60671</td>
</tr>
</tbody>
</table>

### Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Cost of Providing TLS per Subscriber</th>
<th>(11) 0.000000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of TLS Subscribers</td>
<td>(12) 0</td>
</tr>
<tr>
<td>Total TLS Support Claimed</td>
<td>(13) 0</td>
</tr>
</tbody>
</table>

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

| Number of Connections Waived | (14) 0 |
| Charges Waived per Connection | (15) $ 0.00 |
| Total Connection Charges Waived | (16) 0.0 |
| Deferred Interest             | (17) 0.00 |
| Total Tribal Link Up Support Claimed | (18) 0 |

### ETC Payment

| Total Lifeline | 60671 |
| Total TLS    | 0.00 |
| Total Tribal Link Up | 0.00 |
| Total Dollars | 60671 |

*If you have any questions, please call USAC at (866) 873-4727 Toll Free*
(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.

03/08/2014

Charles L. Schneider, Jr.

DATE

President & CEO

OFFICER TITLE

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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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.

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649 (2) Study Area Code 269034

(3) Filer 499 ID 828932 (4) Technology Type (check one) Wireline ☐ Wireless ☑

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

<table>
<thead>
<tr>
<th>(6) Organization Information</th>
<th>(7) Filing Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Legal Name: TAG Mobile LLC</td>
<td>a) Submission Date 04/07/2014</td>
</tr>
<tr>
<td>Contact Name: Caitlyn Lumpkin</td>
<td>b) Data Month March 2014</td>
</tr>
<tr>
<td>Mailing Address: 1330 Capital Parkway</td>
<td>c) Type of Filing (check one)</td>
</tr>
<tr>
<td></td>
<td>Original</td>
</tr>
<tr>
<td></td>
<td>Revision</td>
</tr>
<tr>
<td>Telephone Number: 678-389-6024</td>
<td>d) State Reporting KENTUCKY</td>
</tr>
<tr>
<td>Fax Number: 770-594-3878</td>
<td></td>
</tr>
<tr>
<td>E-mail Address: <a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
<td></td>
</tr>
</tbody>
</table>

**Lifeline**

(a) # Lifeline Subscribers | (b) Lifeline Support/Subscriber Support | (c) Total Lifeline
--- | --- | ---
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support | (8) 6292 | $9.25 | $58201
Tribal Low-Income Subscribers Receiving federal Lifeline Support | (9) 0 | $0.00 | $0

Total Federal Lifeline Support Claimed (10) $58201

**Toll Limitation Services (TLS)**

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

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)

Total Connection Charges Waived (16) $0.00

Deferred Interest (17) $0.00

Total Tribal Link Up Support Claimed (18) $0

**ETC Payment**

Total Lifeline $58201 Total TLS $0 Total Tribal Link Up $0

Total Dollars (19) $58201

*If you have any questions, please call USAC at (866) 873-4727 Toll Free*
(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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DATE

04/07/2014

President & CEO

Charles L. Schneider, Jr.

OFFICER SIGNATURE

Charles L. Schneider, Jr.

OFFICER NAME

OFFICER TITLE

LIFELINE WORKSHEET

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**LIFELINE WORKSHEET**

| (1) USAC Service Provider Identification Number | 143035649 |
| (2) Study Area Code | 269034 |
| (3) Filer 499 ID | 828932 |
| (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: | TAG Mobile LLC |
| Contact Name: | Caitlyn Lumpkin |
| Mailing Address: | 1330 Capital Parkway |
| | Carrollton, TX 75006 |
| Telephone Number: | 678-389-6024 |
| Fax Number: | 770-594-3878 |
| E-mail Address: | caitlyn.lumpkin@cgminc.com |
| a) Submission Date | 01/28/2015 |
| b) Data Month | April 2014 |
| c) Type of Filing (check one) | Original Revision ✔ |
| d) State Reporting | KENTUCKY |

### Lifeline

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8) 5667</td>
<td>x $ 9.25 = $ 52420</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9) 0</td>
<td>x $ 0.00 = $ 0</td>
</tr>
</tbody>
</table>

**Total Federal Lifeline Support Claimed** (10) $ 52420

### 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) |

| Total Connection Charges Waived | (16) $ 0.0 |
| Deferred Interest | (17) $ 0.00 |
| Total Tribal Link Up Support Claimed | (18) $ 0 |

### ETC Payment

| Total Lifeline | $ 52420 |
| Total TLS | $ 0 |
| Total Tribal Link Up | $ 0 |

**Total Dollars** (19) $ 52420

*If you have any questions, please call USAC at (866) 873-4727 Toll Free*
(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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01/28/2015 Charles L. Schneider, Jr.

DATE OFFICER SIGNATURE
President & CEO Charles L. Schneider, Jr.

OFFICER TITLE OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649
(2) Study Area Code 269034
(3) Filer 499 ID 828932
(4) Technology Type (check one) Wireline ☐ Wireless ☑
(5) ETC Designation Type (Check one): Lifeline Only ☐ High Cost/Low Income ☑
(6) Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name:</th>
<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Caitlyn Lumpkin</td>
</tr>
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</tr>
<tr>
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<td><a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
</tr>
</tbody>
</table>

**Lifeline**

(a) # Lifeline Subscribers  
(b) Lifeline Support/Subscriber Support  
(c) Total Lifeline Support

Non-Tribal Low-Income Subscribers  
Receiving federal Lifeline Support  
(8) 5130 x $9.25 = $47453

Tribal Low-Income Subscribers  
Receiving federal Lifeline Support  
(9) 0 x $0.00 = $0

Total Federal Lifeline Support Claimed (10) $47453

**Toll Limitation Services (TLS)**

<table>
<thead>
<tr>
<th>Cost of Providing TLS per Subscriber (the lesser of incremental cost or $3 in 2012 /$2 in 2013)</th>
<th>$0.000000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of TLS Subscribers</td>
<td>0</td>
</tr>
</tbody>
</table>

Total TLS Support Claimed (13) $0

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

<table>
<thead>
<tr>
<th>Number of Connections Waived</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charges Waived per Connection</td>
<td>$0.00 (for multiple rates, use an average amount)</td>
</tr>
</tbody>
</table>

Total Connection Charges Waived (16) $0.00

Deferred Interest (17) $0.00

Total Tribal Link Up Support Claimed (18) $0

**ETC Payment**

<table>
<thead>
<tr>
<th>Total Lifeline $47453</th>
<th>Total TLS $0</th>
<th>Total Tribal Link Up $0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Dollars (19)</td>
<td>$47453</td>
<td></td>
</tr>
</tbody>
</table>

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LIFELINE WORKSHEET

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06/06/2014

DATE

President & CEO

OFFICER TITLE

Charles L. Schneider, Jr.

OFFICER NAME

OFFICER SIGNATURE

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**LIFELINE WORKSHEET**

(1) USAC Service Provider Identification Number 143035649

(2) Study Area Code 269034

(3) Filer 499 ID 828932

(4) Technology Type (check one) Wireline ☐ Wireless ☑

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

(6) Organization Information

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</tr>
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</table>

(7) Filing Information

<table>
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<tr>
<th>a) Submission Date</th>
<th>07/07/2014</th>
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<tr>
<td>b) Data Month</td>
<td>June 2014</td>
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<tr>
<td>c) Type of Filing</td>
<td>Original Revision ☑</td>
</tr>
<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

**Lifeline**

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</th>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/ Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8) 4618</td>
<td>x $ 9.25</td>
<td>= $ 42717</td>
<td></td>
</tr>
</tbody>
</table>

| Tribal Low-Income Subscribers Receiving federal Lifeline Support     | (9) 0                      | x $ 0.00                                | = $ 0              |

Total Federal Lifeline Support Claimed (10) $ 42717

**Toll Limitation Services (TLS)**

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

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)

Deferred Interest (17) $ 0.00

Total Tribal Link Up Support Claimed (18) $ 0

**ETC Payment**

Total Lifeline $ 42717 Total TLS $ 0 Total Tribal Link Up $ 0

Total Dollars (19) $ 42717

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07/07/2014
Charles L. Schneider, Jr.

DATE
OFFICER TITLE
President & CEO

OFFICER SIGNATURE
Charles L. Schneider, Jr.

OFFICER NAME
### LIFELINE WORKSHEET

#### (1) USAC Service Provider Identification Number
143035649

#### (2) Study Area Code
269034

#### (3) Filer 499 ID
828932

#### (4) Technology Type (check one)
- Wireline
- Wireless

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

#### (6) Organization Information
- Company Legal Name: TAG Mobile LLC
- Contact Name: Caitlyn Lumpkin
- Mailing Address: 1330 Capital Parkway, Carrollton, TX 75006
- Telephone Number: 678-389-6024
- Fax Number: 770-594-3878
- E-mail Address: caitlyn.lumpkin@cgminc.com

#### (7) Filing Information
- Submission Date: 08/07/2014
- Data Month: July 2014
- Type of Filing: Original
- State Reporting: KENTUCKY

---

**Lifeline**

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) # Lifeline Subscribers</td>
<td>(b) Lifeline Support/Subscriber Support</td>
</tr>
<tr>
<td>(8) 3906</td>
<td>x $9.25</td>
</tr>
</tbody>
</table>

**Toll Limitation Services (TLS)**

- Cost of Providing TLS per Subscriber: 0.000000 (the lesser of incremental cost or $3 in 2012 /$2 in 2013)
- Number of TLS Subscribers: 0

**Total TLS Support Claimed**: 0

---

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

- Number of Connections Waived: 0
- Charges Waived per Connection: $0.00 (not to exceed $100)
- Total Connection Charges Waived: 0
- Deferred Interest: 0

**Total Tribal Link Up Support Claimed**: 0

---

**ETC Payment**

- Total Lifeline: 36131
- Total TLS: 0
- Total Tribal Link Up: 0
- Total Dollars: 36131

---

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08/07/2014
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DATE
OFFICER SIGNATURE

President & CEO
Charles L. Schneider, Jr.

OFFICER TITLE
OFFICER NAME

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### LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649  
(2) Study Area Code 269034

(3) Filer 499 ID 828932  
(4) Technology Type (check one)  
- Wireline ☐  
- Wireless ☑

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

(6) Organization Information

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<tr>
<th>Field</th>
<th>Information</th>
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</thead>
<tbody>
<tr>
<td>a) Submission Date</td>
<td>09/04/2014</td>
</tr>
<tr>
<td>b) Data Month</td>
<td>August 2014</td>
</tr>
<tr>
<td>c) Type of Filing (check one)</td>
<td>Original Revision ☑</td>
</tr>
<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

### Lifeline

<table>
<thead>
<tr>
<th>Category</th>
<th>Quantity</th>
<th>Unit Price</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers</td>
<td>3600</td>
<td>$9.25</td>
<td>$33300</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers</td>
<td>0</td>
<td>$0.00</td>
<td>$0</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed (10) $33300

### Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Cost of Providing TLS per Subscriber</th>
<th>0.000000</th>
</tr>
</thead>
</table>

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) $0

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

<table>
<thead>
<tr>
<th>Number of Connections Waived</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charges Waived per Connection</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Total Connection Charges Waived (16) $0.0

Deferred Interest (17) $0.00

Total Tribal Link Up Support Claimed (18) $0

### ETC Payment

Total Lifeline $33300  
Total TLS $0  
Total Tribal Link Up $0

Total Dollars (19) $33300

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**LIFELINE WORKSHEET**

| (1) USAC Service Provider Identification Number | 143035649 |
| (2) Study Area Code | 269034 |
| (3) Filer 499 ID | 828932 |
| (4) Technology Type (check one) | Wireless |
| (5) ETC Designation Type (Check one): | Lifeline Only |
| (6) Organization Information | TAG Mobile LLC |
| | Caitlyn Lumpkin |
| | 1330 Capital Parkway |
| | Carrollton, TX 75006 |
| | 678-389-6024 |
| | 770-594-3878 |
| | caitlyn.lumpkin@cgminc.com |

**Lifeline**

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8) 3353</td>
<td>x $ 9.25 = $ 31015</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9) 0</td>
<td>x $ 0.00 = $ 0</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed (10) $ 31015

**Toll Limitation Services (TLS)**

Cost of Providing TLS per Subscriber (11) 0.000000

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 (not to exceed $100)

Total Connection Charges Waived (16) $ 0.0

Deferred Interest (17) $ 0.0

Total Tribal Link Up Support Claimed (18) $ 0

**ETC Payment**

Total Lifeline $ 31015

Total TLS $ 0

Total Tribal Link Up $ 0

Total Dollars (19) $ 31015

*If you have any questions, please call USAC at (866) 873-4727 Toll Free*
(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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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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10/03/2014
Charles L. Schneider, Jr.

DATE
President & CEO

OFFICER SIGNATURE
Charles L. Schneider, Jr.

OFFICER NAME

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### LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649  
(2) Study Area Code 269034  
(3) Filer 499 ID 828932  
(4) Technology Type (check one)  
- Wireline [ ]  
- Wireless [✓]  
(5) ETC Designation Type (Check one):  
- Lifeline Only [ ]  
- High Cost/Low Income [✓]  
(6) Organization Information  
Company Legal Name: TAG Mobile LLC  
Contact Name: Caitlyn Lumpkin  
Mailing Address: 1330 Capital Parkway, Carrollton, TX 75006  
Telephone Number: 678-389-6024  
Fax Number: 770-594-3878  
E-mail Address: caitlyn.lumpkin@cgminc.com  
(7) Filing Information  
- a) Submission Date 11/05/2014  
- b) Data Month October 2014  
- c) Type of Filing (check one)  
- Original [✓]  
- d) State Reporting KENTUCKY  

### Lifeline

<table>
<thead>
<tr>
<th>Subscribers</th>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>3121</td>
<td>$9.25</td>
<td>$28869</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>0</td>
<td>$0.00</td>
<td>$0</td>
</tr>
<tr>
<td>Total Federal Lifeline Support Claimed</td>
<td>(10)</td>
<td>$28869</td>
<td></td>
</tr>
</tbody>
</table>

### Toll Limitation Services (TLS)

- Cost of Providing TLS per Subscriber (11)  
  (the lesser of incremental cost or $3 in 2012 /$2 in 2013)  
  0.000000  
- Number of TLS Subscribers (12)  
  0  
- Total TLS Support Claimed (13)  
  0  

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

<table>
<thead>
<tr>
<th>(14)</th>
<th>Number of Connections Waived</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15)</td>
<td>Charges Waived per Connection</td>
<td>$0.00</td>
</tr>
<tr>
<td></td>
<td>(not to exceed $100)</td>
<td></td>
</tr>
<tr>
<td>(16)</td>
<td>Total Connection Charges Waived</td>
<td>0.0</td>
</tr>
<tr>
<td>(17)</td>
<td>Deferred Interest</td>
<td>0.00</td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed</td>
<td>(18)</td>
<td>0</td>
</tr>
</tbody>
</table>

### ETC Payment

Total Lifeline $28869  
Total TLS $0  
Total Tribal Link Up $0  
Total Dollars (19) $28869

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11/05/2014 Charles L. Schneider, Jr.

DATE OFFICER SIGNATURE

President & CEO Charles L. Schneider, Jr.

OFFICER TITLE OFFICER NAME

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### Lifeline Worksheet

#### Company Information
- **Company Legal Name**: TAG Mobile LLC
- **Contact Name**: Caitlyn Lumpkin
- **Mailing Address**: 1330 Capital Parkway, Carrollton, TX 75006
- **Telephone Number**: 678-389-6024
- **Fax Number**: 770-594-3878
- **E-mail Address**: caitlyn.lumpkin@cgminc.com

#### Lifeline

<table>
<thead>
<tr>
<th>Category</th>
<th>Subscribers</th>
<th>Lifeline Support/Subscriber Support</th>
<th>Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers</td>
<td>2817</td>
<td>$9.25 x 2817 = $26057</td>
<td></td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers</td>
<td>0</td>
<td>$0.00 x 0 = $0</td>
<td></td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed (10)</td>
<td>$26057</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Toll Limitation Services (TLS)

- **Cost of Providing TLS per Subscriber (11)**: $0.000000
- **Number of TLS Subscribers (12)**: 0
- **Total TLS Support Claimed (13)**: $0

#### Tribal Link Up

- **Number of Connections Waived (14)**: 0
- **Charges Waived per Connection (15)**: $0.00
- **Total Connection Charges Waived (16)**: $0.00
- **Deferred Interest (17)**: $0.00
- **Total Tribal Link Up Support Claimed (18)**: $0

#### ETC Payment

- **Total Lifeline $26057**
- **Total TLS $0**
- **Total Tribal Link Up $0**
- **Total Dollars (19)**: $26057

---

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12/04/2014
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DATE

President & CEO

OFFICER TITLE

OFFICER SIGNATURE

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LIFELINE WORKSHEET

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(2) Study Area Code 269034

(3) Filer 499 ID 828932  
(4) Technology Type (check one) Wireline ❑  Wireless ❑

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

(6) Organization Information

<table>
<thead>
<tr>
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<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name:</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>1330 Capital Parkway, Carrollton, TX 75006</td>
</tr>
<tr>
<td>Telephone Number:</td>
<td>678-389-6024</td>
</tr>
<tr>
<td>Fax Number:</td>
<td>770-594-3878</td>
</tr>
<tr>
<td>E-mail Address:</td>
<td><a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
</tr>
</tbody>
</table>

(a) # Lifeline Subscribers  
(b) Lifeline Support/Subscriber Support  
(c) Total Lifeline Support

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8) 2679</td>
<td>x $9.25</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9) 0</td>
<td>x $0.00</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed (10) $24781

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000

<table>
<thead>
<tr>
<th>Number of TLS Subscribers</th>
<th>(12) 0</th>
</tr>
</thead>
</table>

Total TLS Support Claimed (13) $0

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

<table>
<thead>
<tr>
<th>Number of Connections Waived</th>
<th>(14) 0</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Charges Waived per Connection</th>
<th>(15) $0.00</th>
</tr>
</thead>
</table>

Total Connection Charges Waived (16) $0.00

Deferred Interest (17) $0.00

Total Tribal Link Up Support Claimed (18) $0

ETC Payment

<table>
<thead>
<tr>
<th>Total Lifeline</th>
<th>Total TLS</th>
<th>Total Tribal Link Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>$24781</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

Total Dollars (19) $24781

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01/07/2015

Charles L. Schneider, Jr.

DATE

OFFICER SIGNATURE

President & CEO

Charles L. Schneider, Jr.

OFFICER TITLE

OFFICER NAME

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**LIFELINE WORKSHEET**

(1) USAC Service Provider Identification Number: 143035649  
(2) Study Area Code: 269034

(3) Filer  499 ID: 828932  
(4) Technology Type (check one): Wireline ☐  Wireless ☑

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

### Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name: TAG Mobile LLC</th>
<th>Contact Name: Caitlyn Lumpkin</th>
<th>Telephone Number: 678-389-6024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address: 1330 Capital Parkway, Carrollton, TX 75006</td>
<td>E-mail Address: <a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
<td></td>
</tr>
</tbody>
</table>

### Filing Information

<table>
<thead>
<tr>
<th>Submission Date: 02/09/2015</th>
<th>Data Month: January 2015</th>
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</thead>
<tbody>
<tr>
<td>Data Month: January 2015</td>
<td>Type of Filing: Original</td>
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<tr>
<td>State Reporting: KENTUCKY</td>
<td></td>
</tr>
</tbody>
</table>

### Lifeline

<table>
<thead>
<tr>
<th>Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers</td>
<td>1905 x $9.25 = $17621</td>
<td></td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers</td>
<td>0 x $0.00 = $0</td>
<td></td>
</tr>
</tbody>
</table>

**Total Federal Lifeline Support Claimed (10) $17621**

### Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Cost of Providing TLS per Subscriber (11)</th>
<th>0.000000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of TLS Subscribers (12)</td>
<td>0</td>
</tr>
</tbody>
</table>

**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 (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

<table>
<thead>
<tr>
<th>Total Lifeline $17621</th>
<th>Total TLS $0</th>
<th>Total Tribal Link Up $0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Dollars (19) $17621</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you have any questions, please call USAC at (866) 873-4727 Toll Free
(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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02/09/2015
Charles L. Schneider, Jr.

DATE

President & CEO

OFFICER SIGNATURE

Charles L. Schneider, Jr.

OFFICER TITLE

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**LIFELINE WORKSHEET**

**1(1) USAC Service Provider Identification Number**: 143035649

**2(2) Study Area Code**: 269034

**3(3) Filer 499 ID**: 828932

**4(4) Technology Type (check one)**: Wireline [☐] Wireless [☑]

**5(5) ETC Designation Type (Check one)**: Lifeline Only [☐] High Cost/Low Income [☑]

**6(6) Organization Information**

<table>
<thead>
<tr>
<th>Company Legal Name:</th>
<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name:</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>1330 Capital Parkway, Carrollton, TX 75006</td>
</tr>
<tr>
<td>Telephone Number:</td>
<td>678-389-6024</td>
</tr>
<tr>
<td>Fax Number:</td>
<td>770-594-3878</td>
</tr>
<tr>
<td>E-mail Address:</td>
<td><a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
</tr>
</tbody>
</table>

**7(7) Filing Information**

<table>
<thead>
<tr>
<th>a) Submission Date</th>
<th>03/06/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Data Month</td>
<td>February 2015</td>
</tr>
<tr>
<td>c) Type of Filing</td>
<td>(check one)</td>
</tr>
<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

**Lifeline**

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8) 1807 x $9.25 = $16715</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9) 0 x $0.00 = $0</td>
</tr>
</tbody>
</table>

**Toll Limitation Services (TLS)**

<table>
<thead>
<tr>
<th>Number of TLS Subscribers</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) 0</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Number of Connections Waived</th>
</tr>
</thead>
<tbody>
<tr>
<td>(14) 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Charges Waived per Connection</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15) $0.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Connection Charges Waived</th>
</tr>
</thead>
<tbody>
<tr>
<td>(16) $0.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Deferred Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>(17) $0.00</td>
</tr>
</tbody>
</table>

**ETC Payment**

<table>
<thead>
<tr>
<th>Total Lifeline $</th>
<th>16715</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total TLS $</td>
<td>0</td>
</tr>
<tr>
<td>Total Tribal Link Up $</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total Dollars (19)**

| $16715 |

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03/06/2015 Charles L. Schneider, Jr.

DATE OFFICER SIGNATURE

President & CEO Charles L. Schneider, Jr.

OFFICER TITLE OFFICER NAME

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### Lifeline

<table>
<thead>
<tr>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Non-Tribal Low-Income Subscribers</strong> Receiving federal Lifeline Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) 1743</td>
<td>x $9.25</td>
<td>= $16123</td>
</tr>
<tr>
<td><strong>Tribal Low-Income Subscribers</strong> Receiving federal Lifeline Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) 0</td>
<td>x $0.00</td>
<td>= $0</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total Federal Lifeline Support Claimed (10) $16123</strong></td>
</tr>
</tbody>
</table>

### Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (the lesser of incremental cost or $3 in 2012 /$2 in 2013)  
(11) 0.000000  
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)  
Deferred Interest (17) 0.00  
**Total Tribal Link Up Support Claimed (18) $0**

### ETC Payment

<table>
<thead>
<tr>
<th>Total Lifeline</th>
<th>Total TLS</th>
<th>Total Tribal Link Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>$16123</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

**Total Dollars (19) $16123**

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04/07/2015 Charles L. Schneider, Jr.

DATE OFFICER SIGNATURE

President & CEO Charles L. Schneider, Jr.

OFFICER TITLE OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649
(2) Study Area Code 269034

(3) Filer 499 ID 828932
(4) Technology Type (check one) Wireline ☐ Wireless ☑

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

(6) Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name: TAG Mobile LLC</th>
<th>a) Submission Date 05/07/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name: Caitlyn Lumpkin</td>
<td>b) Data Month April 2015</td>
</tr>
<tr>
<td>Mailing Address: 1330 Capital Parkway</td>
<td>c) Type of Filing (check one) Original Revision ☑</td>
</tr>
<tr>
<td></td>
<td>d) State Reporting KENTUCKY</td>
</tr>
<tr>
<td>Telephone Number: 678-389-6024</td>
<td></td>
</tr>
<tr>
<td>Fax Number: 770-594-3878</td>
<td></td>
</tr>
<tr>
<td>E-mail Address: <a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
<td></td>
</tr>
</tbody>
</table>

**Lifeline**

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</th>
<th>(a) # Lifeline Subscribers 1523</th>
<th>(b) Lifeline Support/Subscriber Support $9.25</th>
<th>(c) Total Lifeline $14088</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>(9) 0</td>
<td>$0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Total Federal Lifeline Support Claimed (10) $14088</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Toll Limitation Services (TLS)**

- Cost of Providing TLS per Subscriber (the lesser of incremental cost or $3 in 2012 /$2 in 2013) (11) $0.000000
- 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 (not to exceed $100)
- Total Connection Charges Waived (16) $0.0
- Deferred Interest (17) $0.0
- Total Tribal Link Up Support Claimed (18) $0

**ETC Payment**

- Total Lifeline $14088
- Total TLS $0
- Total Tribal Link Up $0
- Total Dollars (19) $14088

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Avg. Burden Est. per Respondent: 2.5 Hrs.
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05/07/2015  
Chuck Schneider

DATE  

OFFICER SIGNATURE  

CEO  

OFFICER TITLE  

Chuck Schneider  

OFFICER NAME

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**LIFELINE WORKSHEET**

| (1) USAC Service Provider Identification Number | 143035649 |
| (3) Filer 499 ID | 828932 |
| (4) Technology Type (check one) | Wireless ✔ |
| (5) ETC Designation Type (Check one): | Lifeline Only ☑, High Cost/Low Income ☑ |

### Organization Information
- **Company Legal Name:** TAG Mobile LLC
- **Contact Name:** Caitlyn Lumpkin
- **Mailing Address:** 1330 Capital Parkway, Carrollton, TX 75006
- **Telephone Number:** 678-389-6024
- **Fax Number:** 770-594-3878
- **E-mail Address:** caitlyn.lumpkin@cgminc.com

### Lifeline

#### Non-Tribal Low-Income Subscribers
- **Receiving federal Lifeline Support**
  - (8) 1436
  - (b) Lifeline Support/Subscriber Support: $9.25
  - (c) Total Lifeline Support: $13283

#### Tribal Low-Income Subscribers
- **Receiving federal Lifeline Support**
  - (9) 0
  - (b) Lifeline Support/Subscriber Support: $0.00
  - (c) Total Lifeline Support: $0 (not to exceed $34.25)

**Total Federal Lifeline Support Claimed** (10) $13283

### Toll Limitation Services (TLS)

- **Cost of Providing TLS per Subscriber** (11) 0.000000
- **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)
- **Total Connection Charges Waived** (16) $0.00
- **Deferred Interest** (17) $0.00

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

### ETC Payment

- **Total Lifeline** $13283
- **Total TLS** $0
- **Total Tribal Link Up** $0

**Total Dollars** (19) $13283

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06/04/2015
Nicholas Metherd

DATE
OFFICER SIGNATURE

USAC Administrator
Nicholas Metherd

OFFICER TITLE
OFFICER NAME

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<table>
<thead>
<tr>
<th>Subscribers</th>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>1364</td>
<td>$9.25</td>
<td>$12617</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>0</td>
<td>$0.00</td>
<td>$0</td>
</tr>
</tbody>
</table>

**Total Federal Lifeline Support Claimed** (10) $12617

### 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)
- **Total Connection Charges Waived** (16) $0.0
- **Deferred Interest** (17) $0.0

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

### ETC Payment

- **Total Lifeline** $12617
- **Total TLS** $0
- **Total Tribal Link Up** $0

**Total Dollars** (19) $12617

---

If you have any questions, please call USAC at (866) 873-4727 Toll Free
(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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I acknowledge the Fund Administrator’s authority to request additional supporting information as may be necessary.

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07/03/2015
Stuart McCallum

DATE
OFFICER SIGNATURE

VP of Finance
Stuart McCallum

OFFICER TITLE
OFFICER NAME

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### LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number  143035649

(2) Study Area Code 269034

(3) Filer 499 ID 828932

(4) Technology Type (check one)  
- Wireline ☐
- Wireless ☑

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

### Organization Information

| Company Legal Name: TAG Mobile LLC        | a) Submission Date 08/07/2015 |
| Contact Name: Caitlyn Lumpkin             | b) Data Month July 2015       |
| Mailing Address: 1330 Capital Parkway     | c) Type of Filing (check one)  |
| Telephone Number: 678-389-6024            | d) State Reporting KENTUCKY   |
| Fax Number: 770-594-3878                  |                             |
| E-mail Address: caitlyn.lumpkin@cgminc.com|                             |

### Lifeline

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</th>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8)</td>
<td>1228</td>
<td>$9.25</td>
<td>$11359</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>(9)</td>
<td>$0.00</td>
<td>$0</td>
</tr>
<tr>
<td>Total Federal Lifeline Support Claimed (10) $ 11359</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Toll Limitation Services (TLS)

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

Total Connection Charges Waived (16) $ 0.0

Deferred Interest (17) | $ 0.00 |

Total Tribal Link Up Support Claimed (18) $ 0

### ETC Payment

Total Lifeline $ 11359  
Total TLS $ 0  
Total Tribal Link Up $ 0  
Total Dollars (19) $ 11359

If you have any questions, please call USAC at (866) 873-4727 Toll Free
LIFELINE WORKSHEET

(20) CERTIFICATIONS AND SIGNATURES

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08/07/2015
Stuart McCallum

DATE
OFFICER SIGNATURE
CFO
Stuart McCallum

OFFICER TITLE
OFFICER NAME

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### LIFELINE WORKSHEET

#### (1) USAC Service Provider Identification Number

143035649

#### (2) Study Area Code

269034

#### (3) Filer 499 ID

828932

#### (4) Technology Type (check one)

Wireline ❑ Wireless ❑

#### (5) ETC Designation Type (Check one):

Lifeline Only ❑ High Cost/Low Income ❑

#### (6) Organization Information

**Company Legal Name:** TAG Mobile LLC  
**Contact Name:** Caitlyn Lumpkin  
**Mailing Address:** 1330 Capital Parkway, Carrollton, TX 75006  
**Telephone Number:** 678-389-6024  
**Fax Number:** 770-594-3878  
**E-mail Address:** caitlyn.lumpkin@cgminc.com

#### (7) Filing Information

**a) Submission Date:** 09/03/2015  
**b) Data Month:** August 2015  
**c) Type of Filing (check one):** Original ❑ Revision ❑

#### (8) Non-Tribal Low-Income Subscribers

**Receiving federal Lifeline Support:**

(a) # Lifeline Subscribers: 1160  
(b) Lifeline Support/Subscriber Support: $9.25  
(c) Total Lifeline Support: $10730

#### (9) Tribal Low-Income Subscribers

**Receiving federal Lifeline Support:**

(a) # Lifeline Subscribers: 0  
(b) Lifeline Support/Subscriber Support: $0  
(c) Total Lifeline Support: $0

**Total Federal Lifeline Support Claimed:** $10730

#### Toll Limitation Services (TLS)

- **Cost of Providing TLS per Subscriber:** 0.000000

**Number of TLS Subscribers:** 0

**Total TLS Support Claimed:** 0

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

- **Number of Connections Waived:** 0  
- **Charges Waived per Connection:** $0.00  

**Total Connection Charges Waived:** $0  
**Deferred Interest:** $0

**Total Tribal Link Up Support Claimed:** 0

#### ETC Payment

- **Total Lifeline:** $10730  
- **Total TLS:** $0  
- **Total Tribal Link Up:** $0

**Total Dollars:** $10730

---

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(20) CERTIFICATIONS AND SIGNATURES

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<table>
<thead>
<tr>
<th>DATE</th>
<th>OFFICER SIGNATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/03/2015</td>
<td>Stuart McCallum</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OFFICER TITLE</th>
<th>OFFICER NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFO</td>
<td>Stuart McCallum</td>
</tr>
</tbody>
</table>

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### LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649
(2) Study Area Code 269034

(3) Filer 499 ID 828932
(4) Technology Type (check one) Wireline ❑ Wireless ❑

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

<table>
<thead>
<tr>
<th>Organization Information</th>
<th>Filing Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Legal Name: TAG Mobile LLC</td>
<td>a) Submission Date 10/08/2015</td>
</tr>
<tr>
<td>Contact Name: Nicholas Metherd</td>
<td>b) Data Month September 2015</td>
</tr>
<tr>
<td>Mailing Address: 1330 Capital Parkway</td>
<td>c) Type of Filing (check one) Original ✓ Revision ❑</td>
</tr>
<tr>
<td>Mailing Address: Carrollton, TX 75006</td>
<td>d) State Reporting KENTUCKY</td>
</tr>
<tr>
<td>Telephone Number: 214-390-7982</td>
<td></td>
</tr>
<tr>
<td>Fax Number: 770-594-3878</td>
<td></td>
</tr>
<tr>
<td>E-mail Address: <a href="mailto:nicholas.metherd@tagmobile.com">nicholas.metherd@tagmobile.com</a></td>
<td></td>
</tr>
</tbody>
</table>

### Lifeline

<table>
<thead>
<tr>
<th>Subscribers</th>
<th>Lifeline Support/Subscriber Support</th>
<th>Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) # Lifeline Subscribers</td>
<td>(b) Lifeline Support/Subscriber Support</td>
<td>(c) Total Lifeline</td>
</tr>
<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) 1102 x $9.25 = $10194</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) 0 x $0.00 = $0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Federal Lifeline Support Claimed (10) $10194</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Subscribers</th>
<th>Lifeline Support/Subscriber Support</th>
<th>Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) 0.000000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of TRLS Subscribers (12) 0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total TLS Support Claimed (13) $0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Subscribers</th>
<th>Lifeline Support/Subscriber Support</th>
<th>Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Connections Waived</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) 0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Charges Waived per Connection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) $0.00</td>
<td>(not to exceed $100)</td>
<td></td>
</tr>
<tr>
<td>Total Connection Charges Waived</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16) $0.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deferred Interest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) $0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed (18) $0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### ETC Payment

<table>
<thead>
<tr>
<th>Subscribers</th>
<th>Lifeline Support/Subscriber Support</th>
<th>Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Lifeline $10194</td>
<td>Total TLS $0</td>
<td>Total Tribal Link Up $0</td>
</tr>
<tr>
<td>Total Dollars (19) $10194</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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10/08/2015  

Nicholas Metherd

DATE  

OFFICER SIGNATURE

USAC Administrator  

Nicholas Metherd

OFFICER TITLE  

OFFICER NAME

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FCC Form 497
April 2012 Edition

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Contact Name: Caitlyn Lumpkin
Mailing Address: 1330 Capital Parkway
Carrollton, TX 75006
Telephone Number: 678-389-6024
Fax Number: 770-594-3878
E-mail Address: caitlyn.lumpkin@cgminc.com

(7) Filing Information
a) Submission Date 11/05/2015
b) Data Month October 2015
c) Type of Filing (check one)
Original ❑ Revision ❑
d) State Reporting KENTUCKY

Lifeline

(a) # Lifeline Subscribers (b) Lifeline Support/Subscriber Support (c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support
(8) 1092 x $ 9.25 = $ 10101
Tribal Low-Income Subscribers Receiving federal Lifeline Support
(9) 0 x $ 0.00 = $ 0
Total Federal Lifeline Support Claimed (10) $ 10101

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (the lesser of incremental cost or $3 in 2012 /$2 in 2013)
(11) 0.000000
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 $ 10101 Total TLS $ 0 Total Tribal Link Up $ 0
Total Dollars (19) $ 10101

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11/05/2015   Nicholas Metherd

DATE      OFFICER SIGNATURE

USAC Administrator   Nicholas Metherd

OFFICER TITLE      OFFICER NAME

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FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143035649
(2) Study Area Code 269034

(3) Filer 499 ID 828932
(4) Technology Type (check one) Wireline ☐ Wireless ☑

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

(6) Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name</th>
<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>1330 Capital Parkway</td>
</tr>
<tr>
<td></td>
<td>Carrollton, TX 75006</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>678-389-6024</td>
</tr>
<tr>
<td>Fax Number</td>
<td>770-594-3878</td>
</tr>
<tr>
<td>E-mail Address</td>
<td><a href="mailto:caitlyn.lumpkin@cgminc.com">caitlyn.lumpkin@cgminc.com</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Organization Information</th>
<th>Filing Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Submission Date</td>
<td>12/03/2015</td>
</tr>
<tr>
<td>b) Data Month</td>
<td>November 2015</td>
</tr>
<tr>
<td>c) Type of Filing</td>
<td>Original Revision ☑</td>
</tr>
<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

Lifeline

(8) Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support
   (a) # Lifeline Subscribers 1083
   (b) Lifeline Support/Subscriber Support 9.25
   (c) Total Lifeline 10018

(9) Tribal Low-Income Subscribers Receiving federal Lifeline Support
   (a) # Lifeline Subscribers 0
   (b) Lifeline Support/Subscriber Support 0.00
   (c) Total Lifeline 0

Total Federal Lifeline Support Claimed (10) $10018

Toll Limitation Services (TLS)

(11) Cost of Providing TLS per Subscriber 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)

(14) Number of Connections Waived 0
(15) Charges Waived per Connection 0.00
     (for multiple rates, use an average amount)

Total Connection Charges Waived (16) 0.0
Deferring Interest (17) 0.00

Total Tribal Link Up Support Claimed (18) $0

ETC Payment

Total Lifeline $10018 Total TLS $0 Total Tribal Link Up $0
Total Dollars (19) $10018

If you have any questions, please call USAC at (866) 873-4727 Toll Free
(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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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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12/03/2015            Stuart McCallum

DATE                 OFFICER SIGNATURE

CFO                   Stuart McCallum

OFFICER TITLE        OFFICER NAME

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**LIFELINE WORKSHEET**

**USAC Service Provider Identification Number**: 143035649

**Study Area Code**: 269034

**Filer 499 ID**: 828932

**Technology Type**: Wireless

**ETC Designation Type**: High Cost/Low Income

**Organization Information**

<table>
<thead>
<tr>
<th>Company Legal Name</th>
<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contact Name</strong></td>
<td>Nicholas Metherd</td>
</tr>
<tr>
<td><strong>Mailing Address</strong></td>
<td>1330 Capital Parkway, Carrollton, TX 75006</td>
</tr>
<tr>
<td><strong>Telephone Number</strong></td>
<td>214-390-7982</td>
</tr>
<tr>
<td><strong>Fax Number</strong></td>
<td>770-594-3878</td>
</tr>
<tr>
<td><strong>E-mail Address</strong></td>
<td><a href="mailto:nicholas.metherd@tagmobile.com">nicholas.metherd@tagmobile.com</a></td>
</tr>
</tbody>
</table>

**Filing Information**

<table>
<thead>
<tr>
<th>a) Submission Date</th>
<th>03/03/2016</th>
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<tr>
<td>b) Data Month</td>
<td>December 2015</td>
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<td>c) Type of Filing</td>
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</tr>
<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

**Lifeline**

<table>
<thead>
<tr>
<th>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers</td>
<td>Receiving federal Lifeline Support</td>
<td>905 x $9.25 = $8371</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers</td>
<td>Receiving federal Lifeline Support</td>
<td>0 x $0.00 = $0</td>
</tr>
</tbody>
</table>

**Toll Limitation Services (TLS)**

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

| (11) | 0.000000 |

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 (not to exceed $100) |

Total Connection Charges Waived

| (16) | $0.0 |

Deferred Interest

| (17) | $0.0 |

Total Tribal Link Up Support Claimed

| (18) | $0 |

**ETC Payment**

| Total Lifeline | 8371 |
| Total TLS | 0 |
| Total Tribal Link Up | 0 |

Total Dollars

| (19) | 8371 |

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DATE       OFFICER SIGNATURE
03/03/2016   Stuart McCallum

CFO

OFFICER TITLE      OFFICER NAME

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**LIFELINE WORKSHEET**

| (1) USAC Service Provider Identification Number | 143035649 |
| (2) Study Area Code | 269034 |
| (3) Filer 499 ID | 828932 |
| (4) Technology Type (check one) | Wireline | Wireless |
| (5) ETC Designation Type (Check one): | Lifeline Only | High Cost/Low Income |
| (6) Organization Information | (a) Submission Date | 02/11/2016 |
| Company Legal Name | TAG Mobile LLC |
| Contact Name | Nicholas Metherd |
| Mailing Address | 1330 Capital Parkway, Carrollton, TX 75006 |
| Telephone Number | 214-390-7982 |
| Fax Number | 770-594-3878 |
| E-mail Address | nicholas.metherd@tagmobile.com |
| (7) Filing Information | (b) Data Month | January 2016 |
| (c) Type of Filing (check one) | Original |
| (d) State Reporting | KENTUCKY |

### Lifeline

**Non-Tribal Low-Income Subscribers**
- Receiving federal Lifeline Support
  - (8) 211
  - (b) Lifeline Support/Subscriber Support: $9.25
  - (c) Total Lifeline Subscription: $1952

**Tribal Low-Income Subscribers**
- Receiving federal Lifeline Support
  - (9) 0
  - (b) Lifeline Support/Subscriber Support: $0.00
  - (c) Total Lifeline Subscription: $0

**Total Federal Lifeline Support Claimed**: $1952

### Toll Limitation Services (TLS)

- Cost of Providing TLS per Subscriber: $0.000000 (the lesser of incremental cost or $3 in 2012 /$2 in 2013)
- Number of TLS Subscribers: 0
- Total TLS Support Claimed: $0

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

- Number of Connections Waived: 0
- Charges Waived per Connection: $0.00
- Total Connection Charges Waived: $0.0
- Deferred Interest: $0.0
- Total Tribal Link Up Support Claimed: $0

### ETC Payment

- Total Lifeline $1952
- Total TLS $0
- Total Tribal Link Up $0
- Total Dollars: $1952

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02/11/2016 	 Stuart McCallum

DATE 	 OFFICER SIGNATURE

CFO 	 Stuart McCallum

OFFICER TITLE 	 OFFICER NAME

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### Lifeline Worksheet

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<thead>
<tr>
<th>(1) USAC Service Provider Identification Number</th>
<th>143035649</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2) Study Area Code</td>
<td>269034</td>
</tr>
<tr>
<td>(3) Filer 499 ID</td>
<td>828932</td>
</tr>
<tr>
<td>(4) Technology Type (check one)</td>
<td>Wireline ☐, Wireless ✓</td>
</tr>
<tr>
<td>(5) ETC Designation Type (Check one):</td>
<td>Lifeline Only ☐, High Cost/Low Income ✓</td>
</tr>
</tbody>
</table>

#### Organization Information

<table>
<thead>
<tr>
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<th>TAG Mobile LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>1330 Capital Parkway, Carrollton, TX 75006</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>678-389-6024</td>
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<td>770-594-3878</td>
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</tr>
</tbody>
</table>

#### Lifeline

<table>
<thead>
<tr>
<th>Non-Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td># (a)</td>
<td>176</td>
</tr>
<tr>
<td># Lifeline Subscribers</td>
<td>(8)</td>
</tr>
<tr>
<td>Lifeline Support/Subscriber Support</td>
<td>$ 9.25</td>
</tr>
<tr>
<td>Total Lifeline</td>
<td>$ 1628</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
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<tr>
<td># (9)</td>
<td>0</td>
</tr>
<tr>
<td># Lifeline Subscribers</td>
<td></td>
</tr>
<tr>
<td>Lifeline Support/Subscriber Support</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Total Lifeline</td>
<td>$ 0</td>
</tr>
</tbody>
</table>

**Total Federal Lifeline Support Claimed:** $ 1628

#### Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Cost of Providing TLS per Subscriber</th>
<th>(11) 0.000000</th>
</tr>
</thead>
<tbody>
<tr>
<td>(the lesser of incremental cost or $3 in 2012 /$2 in 2013)</td>
<td></td>
</tr>
<tr>
<td>Number of TLS Subscribers</td>
<td>(12) 0</td>
</tr>
</tbody>
</table>

**Total TLS Support Claimed:** $ 0

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

<table>
<thead>
<tr>
<th>Number of Connections Waived</th>
<th>(14) 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charges Waived per Connection</td>
<td>(15) $ 0.00</td>
</tr>
<tr>
<td>(for multiple rates, use an average amount)</td>
<td></td>
</tr>
<tr>
<td>Total Connection Charges Waived</td>
<td>(16) 0.0</td>
</tr>
<tr>
<td>Deferred Interest</td>
<td>(17) 0.00</td>
</tr>
</tbody>
</table>

**Total Tribal Link Up Support Claimed:** $ 0

#### ETC Payment

<table>
<thead>
<tr>
<th>Total Lifeline</th>
<th>$ 1628</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total TLS</td>
<td>$ 0</td>
</tr>
<tr>
<td>Total Tribal Link Up</td>
<td>$ 0</td>
</tr>
</tbody>
</table>

**Total Dollars:** $ 1628

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03/03/2016

Stuart McCallum

DATE
OFFICER SIGNATURE

CFO
Stuart McCallum
OFFICER TITLE
OFFICER NAME

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| (3) Filer 499 ID | 828932 |
| (4) Technology Type (check one) | Wireline | Wireless |
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<tbody>
<tr>
<td>(8) # Lifeline Subscribers</td>
<td>161</td>
</tr>
<tr>
<td>(b) Lifeline Support/Subscriber Support</td>
<td>$9.25</td>
</tr>
<tr>
<td>(c) Total Lifeline</td>
<td>$1489</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers</th>
<th>Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9) # Lifeline Subscribers</td>
<td>0</td>
</tr>
<tr>
<td>(b) Lifeline Support/Subscriber Support</td>
<td>$0.00</td>
</tr>
<tr>
<td>(c) Total Lifeline</td>
<td>$0</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed (10) $1489

### Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000

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

Total Connection Charges Waived (16) $0.00

Deferred Interest (17) $0.00

Total Tribal Link Up Support Claimed (18) $0

### ETC Payment

Total Lifeline $1489
Total TLS $0
Total Tribal Link Up $0

Total Dollars (19) $1489

*If you have any questions, please call USAC at (866) 873-4727 Toll Free*
(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.

04/05/2016
Stuart McCallum

DATE
CFO
OFFICER TITLE

OFFICER SIGNATURE
Stuart McCallum
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-PERM, 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.

Exhibit C
Via Electronic Mail and UPS Overnight Delivery

Date: December 15, 2015

To: Public Utilities Commission of Kentucky
C/O: Jeff Derouen

From: Araceli Aguilar, Compliance & Regulatory Affairs Supervisor
TAG Mobile, LLC
1330 Capital Pkwy.
Carrollton, Texas 75006

RE: LIFELINE WIRELESS PLAN

As per Docket No. 2011-00312 TAG Mobile is hereby notifying you of its intent to revise the Lifeline Wireless Plan offered today in the State of Kentucky. Attached you will find a description and summary of the Lifeline wireless service plan that will be effective immediately. If there are any questions you may reach me at 214-390-5344 or araceli.aguilar@tagmobile.com. You may also direct any questions to the Director of Compliance & Regulatory Affairs, Mary Calderon at 214-390-9280 or mary.calderon@tagmobile.com.

Sincerely,

Araceli Aguilar
Compliance & Regulatory Affairs
TAG MOBILE, LLC KENTUCKY
WIRELESS LIFELINE PLAN

TAG Mobile will offer its Kentucky Lifeline subscribers the Lifeline Base Plan. The Plan includes 500 local voice minutes, $1.50 calling credit for international calling, and unlimited global text messaging every 30 days from date of activation, and a free 911/E911 compliant feature handset (“new” or in “like new” condition will be provided based on availability).

While the Lifeline Plus plans offer Unlimited minutes and texts, this does not mean unreasonable use. Once a customer reaches a certain threshold he or she will be connected to our Customer Service Department to determine whether high usage is due to commercial use or technical problems. After discussion with the customer, the Customer Service Department will complete its review and will return the customer to normal status. The customer will never be cut off during a billing cycle for excessive use. TAG Mobile reserves the right to notify and disconnect any account for excessive or abusive use at the end of their billing cycle.

TAG Mobile’s plans will also have “top-ups” available for all consumers for adding additional airtime and high speed data. Data “top-ups” are available in $3, $12, and $20 increments. Minutes are available in $5 and $10 increments, and will be decremented at various rates depending on the destination country to which calls are placed. TAG Mobile will also offer International Long Distance (ILD) Add-on plans for $5 or $10.

<table>
<thead>
<tr>
<th>Network</th>
<th>Plan</th>
<th>Minutes</th>
<th>Messaging</th>
<th>Data</th>
<th>Retail Price</th>
<th>Cost to LL Customer</th>
</tr>
</thead>
<tbody>
<tr>
<td>T-Mobile / Sprint / Verizon</td>
<td>Lifeline Base</td>
<td>500 Domestic + $1.50 ILD Credit</td>
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<td>Not Available</td>
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<tr>
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<td>T-Mobile / Sprint</td>
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<td>Unlimited Domestic + $1.50 ILD Credit</td>
<td>Unlimited</td>
<td>2.5GB LTE + Unlimited 2G</td>
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<td>Unlimited</td>
<td>2.5GB LTE + Unlimited 2G</td>
<td>$50.00</td>
<td>$40.00</td>
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</table>
TAG MOBILE, LLC KENTUCKY
WIRELESS LIFELINE PLAN

<table>
<thead>
<tr>
<th>Network</th>
<th>Plan</th>
<th>Minutes</th>
<th>Messaging</th>
<th>Data</th>
<th>Retail Price</th>
<th>Cost to LL Customer</th>
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<tbody>
<tr>
<td><strong>Top-Ups / Add-Ons</strong></td>
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<td>N/A</td>
<td>N/A</td>
<td>500 MB</td>
<td>N/A</td>
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<td>/ Verizon</td>
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<tr>
<td>T-Mobile / Sprint</td>
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<td>N/A</td>
<td>N/A</td>
<td>1000 MB</td>
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<td>/ Verizon</td>
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</tr>
<tr>
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<td>N/A</td>
<td>N/A</td>
<td>$5.00</td>
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<tr>
<td>/ Verizon</td>
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</tr>
<tr>
<td>T-Mobile / Sprint</td>
<td>Airtime $10</td>
<td>Varied, depending on destination country.</td>
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<td>N/A</td>
<td>N/A</td>
<td>$10.00</td>
</tr>
<tr>
<td>/ Verizon</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>T-Mobile / Sprint</td>
<td>ILD $5</td>
<td>Unlimited to Mexico Landlines Plus 100 to Mexico Cellular</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>$5.00</td>
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<tr>
<td>/ Verizon</td>
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</tr>
<tr>
<td>T-Mobile / Sprint</td>
<td>ILD $10</td>
<td>Unlimited to 80 Countries</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>$10.00</td>
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