Q LINK WIRELESS LLC’S RESPONSES TO COMMISSION STAFF’S
FIRST REQUEST FOR INFORMATION TO ALL PARTIES OF RECORD AND
FIRST REQUEST FOR INFORMATION TO Q LINK WIRELESS LLC, AMERIMEX
COMMUNICATIONS CORP., AND IM TELECOM, LLC D/B/A INFINITI MOBILE

Q LINK WIRELESS LLC (“Q LINK” or the “Company”) hereby submits its responses
to the Kentucky Public Service Commission (“Commission”) Staff’s First Request for
Information to All Parties of Record and First Request for Information to Q LINK WIRELESS
LLC, AmeriMex Communications Corp., and IM Telecom, LLC d/b/a Infiniti Mobile dated
April 6, 2016.
State of Florida
County of Broward

CERTIFICATION

I, Issa Asad, first being duly sworn, depose and state that I am the CEO of Q LINK WIRELESS LLC, and do hereby declare under oath that the foregoing responses are true and accurate to the best of my knowledge, information, and belief formed after a reasonable inquiry.

Executed on 4/25/16

Issa Asad, CEO
Q LINK WIRELESS LLC

Subscribed and sworn to before me this 25th day of April 2016.

(Signature of person authorized to administer oath)

My Commission Expires: October 29th, 2017
CERTIFICATE OF SERVICE

In accordance with 807 KAR 5:001, Section 8, I certify that the April 28, 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 28, 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 28, 2016.

s/ Lance J.M. Steinhart

Lance J.M. Steinhart
Responses to First Request for Information to All Parties

SECTION I
 Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

REQUEST NO. 1

Provide the KUSF reimbursement forms submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.

Response: Please see attached Exhibit 1.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION I
Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

REQUEST NO. 2

Provide the Federal Communication Commission ("FCC") Form 497 submitted to the FCC from January 2014 to the present.

Response: See attached Exhibit 2.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION I
Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

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:
   1) How the current Lifeline plan modifies the Lifeline plan in effect when you were designated as an ETC;
   2) 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: There have been no changes to the Company’s Lifeline plans.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION I
Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

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: Q LINK intends to maintain a voice component in its Lifeline service offerings even if the service offerings include other components such as broadband, which will be required under FCC rules expected to be issued in the very near future. Therefore, as long as the Commission maintains state support for any service plans that include a voice component (even if bundled with other components) then Q LINK does not anticipate such a decision by the Commission would affect how the Company provides service in Kentucky.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION I
Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

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: Q LINK does not believe increased oversight of the Lifeline program by the Commission is necessary. The FCC has already implemented increased oversight with the implementation of the National Lifeline Accountability Database, more stringent reporting requirements, and multiple procedures for auditing ETCs on a routine basis. Furthermore, the FCC now intends to implement a National Eligibility Verifier in order to centralize eligibility verification.

Responsible Witness: Issa Asad, CEO
SECTION I
Responses to Requests for Information to Parties that Received Payment from the
Kentucky Universal Service Fund ("KUSF")

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: As a prepaid wireless provider, Q LINK does not issue customer bills; however, Q LINK anticipates it would take approximately 60 days to implement
necessary changes.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION I

Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

REQUEST NO. 7

Provide, in detail, the methods employed to verify the eligibility of customers who participate in the Lifeline program.

Response: During the application process, Q LINK validates each applicant’s identity via a government issued ID card, passport, etc. The address of the applicant is verified via a USPS/Melissa Database and Q LINK submits the applicant’s information to the National Lifeline Accountability Database (NLAD) in order to determine that the applicant’s household does not already receive a Lifeline subsidy. Prior to enrolling a new subscriber, Q LINK verifies the eligibility of applicants first by accessing state or federal social services electronic eligibility databases, where available. If a database is used to establish eligibility, Q LINK does not require documentation of the applicant’s participation in a qualifying federal program; instead, Q LINK notes in its records what specific data was relied upon to confirm the applicant’s initial eligibility for Lifeline. However, in states where there is no state administrator, the state commission or other state agency is not making eligibility determinations, and there is no automated means for Q LINK to check electronic databases for eligibility, Q LINK reviews acceptable documentation to determine eligibility based upon the income and program criteria enumerated at 47 C.F.R. § 54.409(a) and (b)), as well as any additional state-specific criteria.

Responsible Witness: Issa Asad, CEO
SECTION I
Responses to Requests for Information to Parties that Received Payment from the
Kentucky Universal Service Fund ("KUSF")

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: Q LINK has not been subjected to FCC investigation, action, and/or penalties relating to participation in the Lifeline program.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION I
Responses to Requests for Information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")

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: Q LINK focuses on internet-based marketing for Lifeline service and processes all enrollments online or over the phone; the Company does not at this time engage in person-to-person sales.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION II
Responses to Requests for Information to All Parties

REQUEST NO. 1

Provide the KUSF reimbursement forms submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.

Response: See response to Section I, No. 1.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

SECTION II
Responses to Requests for Information to All Parties

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: Each line active during the month is considered for reimbursement.

Responsible Witness: Issa Asad, CEO
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: Q LINK operates on a calendar month basis. Free minutes are replenished on the first day of each month. Each line active during the month is considered for reimbursement.

Responsible Witness: Issa Asad, CEO
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: As a prepaid provider, the Company does not issue bills or experience bad debts.

Responsible Witness: Issa Asad, CEO
RESPONSES TO FIRST REQUEST FOR INFORMATION TO ALL PARTIES

SECTION II
Responses to Requests for Information to All Parties

REQUEST NO. 5

State whether you believe the Commission should wait until the FCC's investigation of Lifeline Reform\(^1\) is concluded before rendering a decision in this proceeding, and explain the basis for your response.

Response: Q LINK believes it is reasonable and prudent for the Commission to take into account the FCC's recent Lifeline Reform before rendering a decision in this proceeding. The FCC adopted an Order at its March 31, 2016 Open Meeting to modernize and reform the Lifeline program, and released the corresponding Order on April 27, 2016. The FCC’s reforms steer the Lifeline program towards broadband, and introduce minimum amounts of voice and data required for plans to qualify for Lifeline subsidy beginning as early as December 2016; these changes will certainly affect the cost at which ETCs are able to offer Lifeline service to the consumer, and therefore the KUSF subsidy may be more important for customers than ever before.

Responsible Witness: Issa Asad, CEO

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\(^1\) See Lifeline and Link Up Reform and Modernization, WC Docket No. 11-42; Telecommunications Carriers Eligible for Universal Service Support, WC Docket No 09-197; Connect America Fund, WC Docket No. 10-90.
RESPONSES TO FIRST REQUEST FOR INFORMATION TO ALL PARTIES

SECTION II
Responses to Requests for Information to All Parties

REQUEST NO. 6

State how soon upon the issuance of an Order by the Commission changing the KUSF surcharge that you are or anticipate being able to implement the changes on customer bills. If it differs by type of account, provide the information for each type of account, along with the number of access lines for each account type.

Response: See response to Section I, No. 6.

Responsible Witness: Issa Asad, CEO
REQUEST NO. 1

Refer to the Joint Testimony of Issa Asad, Stephen Klein, and Trevan Morrow ("Joint Testimony"), page 5, lines 15-18. Explain how a decrease in the Lifeline subsidy could make it uneconomical for the eligible telecommunication carriers ("ETC") to continue their outreach efforts and decrease the number of ETCs willing to serve Kentucky Lifeline customers.

Response: The regulatory costs for an ETC to provide Lifeline service continue to increase, requiring ETCs to spend more money and resources on compliance rather than outreach efforts. Given the upcoming FCC reforms implementing minimum standards for voice and broadband in order for plans to qualify for Lifeline subsidy, the ability for ETCs to provide Lifeline plans at current rates will be impossible. Therefore, maintaining the KUSF support level is more important than ever.

Responsible Witness: Issa Asad, CEO
REQUEST NO. 2

Refer to the Joint Testimony, page 9, lines 9-12. Confirm that an ETC filing a copy of Form 497 with the Commission is not a fail-safe check on the accuracy of the KUSF remittance form as, although the forms could reconcile, they could both contain the same inaccurate information.

Response: Correct, the filing of a 497 would primarily be for reconciliation purposes, and not a fail-safe check for accuracy.

Responsible Witness: Issa Asad, CEO
Responses to First Request for Information to All Parties

EXHIBIT 1
**Carrier Information**

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<thead>
<tr>
<th>Company Name</th>
<th>Q LINK WIRELESS LLC</th>
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<tr>
<td>Company Address</td>
<td>499 EAST SHERIDAN STREET, SUITE 300 DANIA, FL 33004</td>
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<tr>
<td>Telephone / Fax</td>
<td>855-754-6543/855-837-5465</td>
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**Classification**

- ILEC
- CLEC
- **Cellular**
- PCS

**Monthly Access Line Data**

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<td>1. Total Access Lines in Service</td>
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<tr>
<td>2. Surcharge Per Access Line</td>
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<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
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<td>4. Number of Access Lines Receiving Lifeline Support</td>
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<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
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**Signature Block**

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

Company Official: Issa Asad
Title: CEO

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
### Common Carrier: Q Link Wireless LLC

- **Company Name**: Q Link Wireless LLC
- **Address**: 499 East Sheridan Street, Suite 300, Dania, FL 33004
- **Telephone/Fax**: 855-754-6543/855-837-5465

#### Classification

- **Cellular**

#### Monthly Access Line Data

1. **Total Access Lines in Service**: <redacted>
2. **Surcharge Per Access Line**: $0.08
3. **Amount of Surcharge Remitted to Kentucky USF**: <redacted>
4. **Number of Access Lines Receiving Lifeline Support**: <redacted>
5. **Amount of Reimbursement Requested from Kentucky USF**: <redacted>

#### Signature Block

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

**Company Official**: Issa Asad
**Title**: CEO

(Signed)

---

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Revised 03-13-2008
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### Classification

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### Monthly Access Line Data

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

### Signature Block

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Company Official: Issa Asad
Title: CEO
(Signed)

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Revised 03-13-2008
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<tr>
<td>Company Official: Issa Asad Title: CEO Company Official: (Signed)</td>
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Finance and Administration Cabinet
ATTN: KY USF
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Frankfort, KY 40601

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

Revised 03-13-2008
## Monthly Access Line Data

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| 2. | Surcharge Per Access Line    |   |   |   | 0.08
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| 4. | Number of Access Lines Receiving Lifeline Support |   |   |   |   |
| 5. | Amount of Reimbursement Requested from Kentucky USF |   |   |   |   |

## Signature Block

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

Company Official: Issa Asad  
Title: CEO  
Company Officials: (Signed)

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Finance and Administration Cabinet  
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702 Capital Ave.  
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Frankfort, KY 40601

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

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

**Date:** 7/9/2014  
**Reporting Month:** 2014-06

## Carrier Information

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## Classification

| Please Circle One | ILEC | CLEC | Cellular | PCS |

## Monthly Access Line Data

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

## Signature Block

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

**Company Official:** Issa Asad  
**Title:** CEO  
**Company:** [Redacted]  
**Signature:** [Signed]

---

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

Finance and Administration Cabinet  
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Frankfort, KY 40601

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211 Sower Blvd.  
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Revised 03-13-2008
**Exhibit 1, Page 7**

![Image of the page]

## Carrier Information

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## Monthly Access Line Data

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

## Signature Block

I, [Company Official Name], hereby attest that the information reported herein is true and accurate to the best of my knowledge.

Company Official: [Issa Asad]
Title: CEO
(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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Revised 03-13-2008
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**Classification**

- **Circle One:** QLINK Wireless LLC
- **CLEC:**
- **Cellular:**
- **PCS:**

**Monthly Access Line Data**

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<td>Surcharge Per Access Line</td>
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<td>Amount of Surcharge Remitted to Kentucky USF</td>
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<td>5</td>
<td>Amount of Reimbursement Requested from Kentucky USF</td>
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**Signature Block**

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

- **Company Official:** Issa Asad
- **Title:** CEO
- **Company:** Q Link Wireless LLC
- **(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 438A
  - Frankfort, KY 40601

Send a copy of this report to:

- Kentucky Public Service Commission
  - ATTN: Jim Stevens
  - 215 Setzer Blvd.
  - P.O. Box 615
  - Frankfort, KY 40602

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

<table>
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### Carrier Information

- **Company Name**: Q LINK WIRELESS LLC
- **Company Address**: 499 E SHERIDAN ST, STE 300 DANIA, FL 33004
- **Telephone/Fax**: 855-754-6543/855-637-5463
- **Vendor Number**: [Redacted]

### Classification

Please Circle One

- ILEC
- CLEC
- Cellular
- PCS

### Monthly Access Line Data

1. **Total Access Lines in Service**: [Redacted]
2. **Surcharge Per Access Line**: $0.08
3. **Amount of Surcharge Remitted to Kentucky USF**: [Redacted]
4. **Number of Access Lines Receiving Lifeline Support**: [Redacted]
5. **Amount of Reimbursement Requested from Kentucky USF**: [Redacted]

### Signature Block

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

- **Company Official**: Issa Asad
- **Title**: CEO

**Company Official** (Printed) (Signed)

- **Send a copy of this report to:**
  - Kentucky Public Service Commission
  - ATTN: Jim Stevens
  - 211 Sawyer Blvd.
  - P.O. Box 615
  - Frankfort, KY 40602

**Revised 03-13-2008**
**Exhibit 1, Page 10**

**COMMONWEALTH OF KENTUCKY**
**UNIVERSAL SERVICE FUND**

**Date:** 11/11/2014  
**Reporting Month:** 2014-10

### Carrier Information

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<th>Company Name</th>
<th>Q LINK WIRELESS LLC</th>
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<tbody>
<tr>
<td>Company Address</td>
<td>499 E SHERIDAN ST, STE 300 DANIA, FL 33004</td>
</tr>
<tr>
<td>Telephone / Fax</td>
<td>855-754-6543/855-837-5465</td>
</tr>
<tr>
<td>Vendor Number</td>
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### Classification

- **Please Circle One:** Cellular

### Monthly Access Line Data

1. **Total Access Lines in Service:** [Redacted]
2. **Surcharge Per Access Line:** $0.08
3. **Amount of Surcharge Remitted to Kentucky USF:** [Redacted]
4. **Number of Access Lines Receiving Lifeline Support:** [Redacted]
5. **Amount of Reimbursement Requested from Kentucky USF:** [Redacted]

### Signature Block

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

**Company Official:** Issa Asad  
**Title:** CEO

Send 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

---

**Notes:**

- 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
**COMMONWEALTH OF KENTUCKY**
**UNIVERSAL SERVICE FUND**

**Carrier Information**

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**Classification**

Please Circle One: ILEC  CLEC  **Cellular**  PCS

**Monthly Access Line Data**

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

**Signature Block**

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

Company Official: Issa Asad  Title: CEO

(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
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### Monthly Access Line Data

1. **Total Access Lines in Service**
   
2. **Surcharge Per Access Line**
   
3. **Amount of Surcharge Remitted to Kentucky USF**
   
4. **Number of Access Lines Receiving Lifeline Support**
   
5. **Amount of Reimbursement Requested from Kentucky USF**

### Signature Block

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

Company Official: Issa Asad
Title: CEO
Company: LCX
(Signed)

---

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<tr>
<td>2. Surcharge Per Access Line</td>
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<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
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<tr>
<td>4. Number of Access Lines Receiving Lifeline Support</td>
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<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
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<tbody>
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<td>I hereby attest that the information reported herein is true and accurate to the best of my knowledge.</td>
<td></td>
</tr>
<tr>
<td>Company Official</td>
<td>Issa Asad</td>
</tr>
<tr>
<td>Title</td>
<td>CEO</td>
</tr>
<tr>
<td>Company Official</td>
<td></td>
</tr>
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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** 3/11/2015  
**Reporting Month** 2015-02

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<td>855-754-6543/855-837-5465</td>
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<td><strong>Vendor Number</strong></td>
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<th><strong>IC</strong></th>
<th><strong>CFC</strong></th>
<th><strong>Cellular</strong></th>
<th><strong>PCS</strong></th>
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## Monthly Access Line Data

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<td>1.</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: [Redacted]</td>
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<tr>
<td>4.</td>
<td>Number of Access Lines Receiving Lifeline Support: [Redacted]</td>
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<tr>
<td>5.</td>
<td>Amount of Reimbursement Requested from Kentucky USF: [Redacted]</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**  
Issa Asad  
**Title**  
CEO  
**Company**  
Q LINK WIRELESS LLC  
(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
**Commonwealth of Kentucky Universal Service Fund**

**Date:** 4/10/2015  
**Reporting Month:** 2015-03

### Carrier Information

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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:**

2. **Surcharge Per Access Line:** $0.08

3. **Amount of Surcharge Remitted to Kentucky USF:**

4. **Number of Access Lines Receiving Lifeline Support:**

5. **Amount of Reimbursement Requested from Kentucky USF:**

### Signature Block

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

**Company Official:** Issa Asad  
**Title:** CEO  
**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 Capitol 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
### Monthly Access Line Data

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<td>3. Amount of Surchage Remitted to Kentucky USF</td>
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### Signature Block

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

Company Official **Issa Asad**
Title **CEO**

Company Official **(Signed)**

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

Finance and Administration Cabinet
ATTN: KY USF
702 Capitol Ave.
Capitol 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:** 6/9/2015  
**Reporting Month:** 2015-05

### Carrier Information

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<thead>
<tr>
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<td>Company Address</td>
<td>499 E SHERIDAN ST, STE 300 DANIA, FL 33004</td>
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<td>Telephone / Fax</td>
<td>855-754-6543/855-837-5486</td>
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### Classification

- **[HFC]**  
- **CLEC**  
- **Cellular**  
- **PCS**

### Monthly Access Line Data

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<th>Access Line Data</th>
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### Signature Block

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

- **Company Official:** Issa Asad  
- **Title:** CEO  
- **Company:** (Printed)  
- **(Signed)**

---

Make check payable to: “Kentucky State Treasurer” and send with this report to:  
- Finance and Administration Cabinet  
- ATTN: KY USF  
- 792 Capital Ave  
- Capitol Annex, Room 483A  
- 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 7/9/2015  Reporting Month 2015-06

Carrier Information

Company Name Q LINK WIRELESS LLC
Company Address 499 E SHERIDAN ST, STE 300 DANIA, FL 33004
Telephone / Fax 855-754-8543/855-837-5465
Vendor Number

Classification
Please Circle One  FLEC  CLEC  Cellular  PCS

Monthly Access Line Data

1. Total Access Lines in Service
2. Surcharge Per Access Line
3. Amount of Surcharge Remitted to Kentucky USF
4. Number of Access Lines Receiving Lifeline Support
5. Amount of Reimbursement Requested from Kentucky USF

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

Company Official  Issa Asad  Title  CEO  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
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## Monthly Access Line Data

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

## Signature Block

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

Company Official: Issa Asad
Title: CEO
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

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211 Sower Blvd.
P.O. Box 615
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Revised 03-13-2008
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## Classification

- **Please Circle One:** Cellular

## Monthly Access Line Data

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## Signature Block

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

Company Official: Issa Asad  
Title: CEO

(Signed)

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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 458A  
Frankfort, KY 40601

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Revised 03-13-2008
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**Classification**

- Please Circle One: 
  - [ ] ILEC  
  - [ ] CLEC  
  - [x] Cellular  
  - [ ] PCS

**Monthly Access Line Data**

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

**Signature Block**

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

Company Official: Issa Asad  
Title: CEO  
Company: Q LINK WIRELESS LLC

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

Finance and Administration Cabinet  
ATTN: KY USF  
502 Capital Ave.  
Capitol Annex, Room 338A  
Frankfort, KY 40601

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Kentucky Public Service Commission  
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P.O. Box 613  
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Revised 03-13-2008
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<td>Vendor Number</td>
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### Classification

- [ ] ILFC
- [ ] CLEC
- [X] Cellular
- [ ] PCS

### Monthly Access Line Data

1. **Total Access Lines in Service**: [Redacted]
2. **Surcharge Per Access Line**: $0.08
3. **Amount of Surcharge Remitted to Kentucky USF**: [Redacted]
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5. **Amount of Reimbursement Requested from Kentucky USF**: [Redacted]

### Signature Block

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

**Company Official**: Issa Asad  
**Title**: CEO  
**Company**: [Redacted]  
(Signed)

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

Revised 03-13-2005
**COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND**

Doc: 12/08/2015  
Reporting Month: 2015-11

### Carrier Information

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<tr>
<td>Vendor Number</td>
<td>[Redacted]</td>
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</table>

**Classification**  
Please Circle One: ILEC, CLEC, **Cellular**, PCS

### Monthly Access Line Data

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

### Signature Block

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

Company Official: Issa Asad  
Title: CEO  
(Signed)

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

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

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

Revised 03-13-2008
### Carrier Information

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Q LINK WIRELESS LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Address</td>
<td>499 E SHERIDAN ST, STE 300 DANIA, FL 33004</td>
</tr>
<tr>
<td>Telephone / Fax</td>
<td>855-754-8543/855-837-5485</td>
</tr>
<tr>
<td>Vendor Number</td>
<td>Blacked out</td>
</tr>
</tbody>
</table>

#### Classification
- Please Circle One: [ILFC][CLEC]  **Cellular**  [PCS]

### Monthly Access Line Data

1. Total Access Lines in Service: [Blacked out]
2. Surcharge Per Access Line: $0.08
3. Amount of Surcharge Remitted to Kentucky USF: [Blacked out]
4. Number of Access Lines Receiving Lifeline Support: [Blacked out]
5. Amount of Reimbursement Requested from Kentucky USF: [Blacked out]

### Signature Block

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

Company Official: **Issa Asad**  
Title: CEO  
Company Official: [Blacked out]  
(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 Stevans  
211 Sower Blvd.  
P.O. Box 615  
Frankfort, KY 40602

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

**Date:** 2/09/2016  
**Reporting Month:** 2016-01

### Carrier Information

<table>
<thead>
<tr>
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<tr>
<td>Vendor Number</td>
<td>[Redacted]</td>
</tr>
</tbody>
</table>

### Monthly Access Line Data

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total Access Lines in Service</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>2. Surchage Per Access Line</td>
<td>$0.08</td>
</tr>
<tr>
<td>3. Amount of Surchage Remitted to Kentucky USF</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
<td>[Redacted]</td>
</tr>
</tbody>
</table>

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**Company Official:** Issa Asad  
**Title:** CEO  
**(Signed):**

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P.O. Box 615  
Frankfort, KY 40602

**Revised:** 03-13-2008
**Carrier Information**

- **Company Name**: Q LINK WIRELESS LLC
- **Company Address**: 499 E SHERIDAN ST, STE 300 DANIA, FL 33004
- **Telephone/Fax**: 855-754-6543/855-837-5465
- **Vendor Number**: [redacted]

**Classification**

- Please Circle One: ILEC CLEC Cellular PCS

**Monthly Access Line Data**

1. **Total Access Lines in Service**: [redacted]
2. **Surcharge Per Access Line**: $0.08
3. **Amount of Surcharge Remitted to Kentucky USF**: [redacted]
4. **Number of Access Lines Receiving Lifeline Support**: [redacted]
5. **Amount of Reimbursement Requested from Kentucky USF**: [redacted]

**Signature Block**

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

- **Company Official**: Issa Asad
- **Title**: CEO
- **(Signed)**

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Finance and Administration Cabinet
ATTN: Jim Stevens
211 Sower Blvd.
P.O. Box 612
Frankfort, KY 40602

Send a copy of this report to:

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211 Sower Blvd.
P.O. Box 612
Frankfort, KY 40602

Revised 03-13-2008
### Exhibits

#### Exhibit 1

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

### Carrier Information

<table>
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</tr>
<tr>
<td>Vendor Number</td>
<td>[Redacted]</td>
</tr>
</tbody>
</table>

### Classification

- **Cellular**  
- **LEC**  
- **CLEC**  
- **PCS**

### Monthly Access Line Data

<table>
<thead>
<tr>
<th>Description</th>
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<td>1. Total Access Lines in Service</td>
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</tr>
<tr>
<td>2. Surcharge Per Access Line</td>
<td>$0.14</td>
</tr>
<tr>
<td>3. Amount of Surcharge Remitted to Kentucky USF</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>4. Number of Access Lines Receiving Lifeline Support</td>
<td>[Redacted]</td>
</tr>
<tr>
<td>5. Amount of Reimbursement Requested from Kentucky USF</td>
<td>[Redacted]</td>
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### Signature Block

**Company Official:** Issa Asad  
**Title:** CEO

**Company Official:** [Signature]

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  P.O. Box 615  
  Frankfort, KY 40602

**Revised:** 03-13-2018
Responses to First Request for Information to All Parties

EXHIBIT 2
### Lifeline Worksheet

<table>
<thead>
<tr>
<th>(1) USAC Service Provider Identification Number</th>
<th>(2) Study Area Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>143036544</td>
<td>269038</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(3) Filer 499 ID</th>
<th>(4) Technology Type (check one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>829223</td>
<td>Wireline [ ] Wireless [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(5) ETC Designation Type (Check one):</th>
<th>(6) Organization Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifeline Only [ ]</td>
<td>Q Link Wireless LLC</td>
</tr>
<tr>
<td>High Cost/Low Income [ ]</td>
<td></td>
</tr>
</tbody>
</table>

#### Company Legal Name: Q Link Wireless LLC

- **Contact Name:** Caitlyn Lumpkin
- **Mailing Address:** 499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004
- **Telephone Number:** 678-389-6024
- **Fax Number:** 770-594-3878
- **E-mail Address:** cmmurp@cgminc.com

### Lifeline

#### Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support

<table>
<thead>
<tr>
<th>(8) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>$ 9.25</td>
<td>$ 0</td>
</tr>
</tbody>
</table>

#### Tribal Low-Income Subscribers Receiving federal Lifeline Support

- **(9) 0**
- **(b) x $ 0.00**
- **(c) $ 0**

**Total Federal Lifeline Support Claimed (10) $ 0**

### 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
- **(15) Charges Waived per Connection:** $ 0.00

**Total Connection Charges Waived (16) $ 0**

**Deferred Interest (17) $ 0.00**

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

### ETC Payment

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

**Total Dollars (19) $ 0**

---

*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.

02/07/2014
Maybell Kelly

DATE
OFFICER SIGNATURE

Compliance
Maybell Kelly
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

(1) USAC Service Provider Identification Number 143036544
(2) Study Area Code 269038

(3) Filer 499 ID 829223
(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: | Q Link Wireless LLC |
| Contact Name: | Caitlyn Lumpkin |
| Mailing Address: | 499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004 |
| Telephone Number: | 678-389-6024 |
| Fax Number: | 770-594-3878 |
| E-mail Address: | cmmurp@cgminc.com |

(7) Filing Information

| a) Submission Date | 03/07/2014 |
| b) Data Month | February 2014 |
| c) Type of Filing (check one) | Original Revision ☐ |
| d) State Reporting | KENTUCKY |

**Lifeline**

Non-Tribal Low-Income Subscribers
Receiving federal Lifeline Support

<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>(8) 1</td>
<td>x $ 9.25</td>
<td>= $ 9.25</td>
</tr>
</tbody>
</table>

Tribal Low-Income Subscribers
Receiving federal Lifeline Support

| (9) 0                     | x $ 0.00                              | = $ 0.00 |

Total Federal Lifeline Support Claimed (10) $0

**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

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>$</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

Total Dollars (19) $0

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

(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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03/07/2014
Maybell Kelly

DATE
OFFICER SIGNATURE

Compliance
Maybell Kelly

OFFICER TITLE
OFFICER NAME

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**FCC Form 497**

**April 2012 Edition**

**LIFELINE WORKSHEET**

**Exhibit 2, Page 5**

---

**OMB Approval**

3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

---

(1) USAC Service Provider Identification Number: 143036544

(2) Study Area Code: 269038

(3) Filer 499 ID: B29223

(4) Technology Type (check one): Wireline [ ] Wireless [X]

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

---

### Organization Information

<table>
<thead>
<tr>
<th><strong>Company Legal Name:</strong></th>
<th>Q Link Wireless LLC</th>
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<tbody>
<tr>
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<td>Caitlyn Lumpkin</td>
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<td><a href="mailto:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
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### Filing Information

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<td><strong>d) State Reporting:</strong></td>
<td>KENTUCKY</td>
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**Lifeline**

<table>
<thead>
<tr>
<th><strong>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</strong></th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

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<thead>
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</tr>
</thead>
<tbody>
<tr>
<td>(9) 0</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed (10) $ 0

---

**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 $ 0

Total TLS $ 0

Total Tribal Link Up $ 0

Total Dollars (19) $ 0

---

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(20) CERTIFICATIONS AND SIGNATURES

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04/07/2014
Maybell Kelly

DATE
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Compliance
Maybell Kelly
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# Lifeline Worksheet

## USAC Service Provider Identification Number
143036544

## Study Area Code
269038

## Technology Type
- Wireline [ ]
- Wireless [x]

## ETC Designation Type
- Lifeline Only [x]
- High Cost/Low Income [ ]

## Organization Information

<table>
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<td>Caitlyn Lumpkin</td>
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<tr>
<td>E-mail Address:</td>
<td><a href="mailto:cmurp@cgminc.com">cmurp@cgminc.com</a></td>
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## Filing Information

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<tr>
<td>c) Type of Filing</td>
<td>Original Revision [ ]</td>
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<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

## Lifeline

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

Total TLS Support Claimed | (13) $0 |

## Tribal Link Up

(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 $ | Total TLS $0 | Total Tribal Link Up $0

Total Dollars | (19) $ |

---

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.

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05/06/2014
Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

OFFICER TITLE

Maybell Kelly

OFFICER NAME

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**FCC Form 497**  
April 2012 Edition  

**LIFELINE WORKSHEET**

**Exhibit 2, Page 9**

**Avg. Burden Est. per Respondent: 2.5 Hrs.**

(1) **USAC Service Provider Identification Number**: 143036544  
(2) **Study Area Code**: 269038

(3) **Filer 499 ID**: 829223  
(4) **Technology Type (check one)**: Wireline ☐, Wireless ☒

(5) **ETC Designation Type (check one)**: Lifeline Only ☒, High Cost/Low Income ☐

<table>
<thead>
<tr>
<th><strong>Organization Information</strong></th>
<th><strong>Filing Information</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Company Legal Name</strong>: Q Link Wireless LLC</td>
<td><strong>Submission Date</strong>: 06/06/2014</td>
</tr>
<tr>
<td><strong>Contact Name</strong>: Caitlyn Lumpkin</td>
<td><strong>Data Month</strong>: May 2014</td>
</tr>
<tr>
<td><strong>Mailing Address</strong>: 499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004</td>
<td><strong>Type of Filing (check one)</strong>: Original ☒, Revision ☐</td>
</tr>
<tr>
<td><strong>Telephone Number</strong>: 678-389-6024</td>
<td><strong>State Reporting</strong>: KENTUCKY</td>
</tr>
<tr>
<td><strong>Fax Number</strong>: 770-594-3878</td>
<td><strong>E-mail Address</strong>: <a href="mailto:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
</tr>
</tbody>
</table>

**Lifeline**

<table>
<thead>
<tr>
<th></th>
<th><strong>(a) # Lifeline Subscribers</strong></th>
<th><strong>(b) Lifeline Support/Subscriber Support</strong></th>
<th><strong>(c) Total Lifeline</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>(8)</td>
<td>$9.25</td>
<td>$0.00</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>(9)</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
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**Toll Limitation Services (TLS)**

<table>
<thead>
<tr>
<th><strong>(11)</strong></th>
<th><strong>Cost of Providing TLS per Subscriber</strong></th>
<th><strong>0.000000</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(12)</strong></td>
<td><strong>Number of TLS Subscribers</strong></td>
<td><strong>0</strong></td>
</tr>
<tr>
<td><strong>Total TLS Support Claimed</strong></td>
<td>(13)</td>
<td><strong>$0.00</strong></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th><strong>(14)</strong></th>
<th><strong>Number of Connections Waived</strong></th>
<th><strong>0</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(15)</strong></td>
<td><strong>Charges Waived per Connection</strong></td>
<td><strong>$0.00</strong> (for multiple rates, use an average amount)</td>
</tr>
<tr>
<td><strong>(16)</strong></td>
<td><strong>Total Connection Charges Waived</strong></td>
<td><strong>$0.00</strong></td>
</tr>
<tr>
<td><strong>Deferred Interest</strong></td>
<td><strong>(17)</strong></td>
<td><strong>$0.00</strong></td>
</tr>
<tr>
<td><strong>Total Tribal Link Up Support Claimed</strong></td>
<td>(18)</td>
<td><strong>$0.00</strong></td>
</tr>
</tbody>
</table>

**ETC Payment**

<table>
<thead>
<tr>
<th><strong>Total Lifeline</strong></th>
<th><strong>Total TLS</strong></th>
<th><strong>Total Tribal Link Up</strong></th>
<th><strong>Total Dollars</strong></th>
</tr>
</thead>
</table>

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CERTIFICATIONS AND SIGNATURES

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06/06/2014

DATE

Maybell Kelly

OFFICER SIGNATURE

Compliance

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FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143036544
(2) Study Area Code 269038

(3) Filer 499 ID 829223
(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: Q Link Wireless LLC
Contact Name: Caitlyn Lumpkin
Mailing Address: 499 EAST SHERIDAN ST SUITE 300
Dania, FL 33004
Telephone Number: 678-389-6024
Fax Number: 770-594-3878
E-mail Address: cmmurp@cgminc.com

(7) Filing Information
a) Submission Date 07/08/2014
b) Data Month June 2014
c) Type of Filing (check one)
   [ ] Original
   [ ] Revision
   [ ]
d) State Reporting KENTUCKY

Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support

(a) # Lifeline Subscribers (8)
(b) Lifeline Support/Subscriber Support (c) Total Lifeline

9 x $ 9.25 = $ ____________

Tribal Low-Income Subscribers Receiving federal Lifeline Support

(9) 0 x $ 0.00 = $ 0

Total Federal Lifeline Support Claimed (10) ____________

Toll Limitation Services (TLS)

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

Total TLS Support Claimed (13) $ 0

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

Number of Connections Waived (14) 0
Charges Waived per Connection (15) $ 0.00
   (for multiple rates, use an average amount)
   (not to exceed $100)
Total Connection Charges Waived (16) $ 0
Deferred Interest (17) $ 0.00

Total Tribal Link Up Support Claimed (18) $ 0

ETC Payment

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

Total Dollars (19) ____________

If you have any questions, please call USAC at (866) 873-4727 Toll Free
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07/08/2014 Maybell Kelly

DATE OFFICER SIGNATURE

Compliance Maybell Kelly

OFFICER TITLE OFFICER NAME

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<table>
<thead>
<tr>
<th>USAC Service Provider Identification Number</th>
<th>143036544</th>
<th>Study Area Code</th>
<th>269038</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filer 499 ID</td>
<td>829223</td>
<td>Technology Type</td>
<td>Wireless</td>
</tr>
<tr>
<td>ETC Designation Type</td>
<td>Lifeline Only</td>
<td>High Cost/Low Income</td>
<td></td>
</tr>
<tr>
<td>Company Legal Name</td>
<td>Q Link Wireless LLC</td>
<td>Submission Date</td>
<td>08/07/2014</td>
</tr>
<tr>
<td>Contact Name</td>
<td>Caitlyn Lumpkin</td>
<td>Data Month</td>
<td>July 2014</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>499 EAST SHERIDAN ST SUITE 300</td>
<td>Type of Filing</td>
<td>Original</td>
</tr>
<tr>
<td></td>
<td>Dania, FL 33004</td>
<td>(check one)</td>
<td>Revision</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>678-389-6024</td>
<td>State Reporting</td>
<td>KENTUCKY</td>
</tr>
<tr>
<td>Fax Number</td>
<td>770-594-3878</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E-mail Address</td>
<td><a href="mailto:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
<td></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</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8</td>
<td>$ 9.25</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>0</td>
<td>$ 0.00</td>
<td>$ 0.00</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) = $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 = $0.00

Deferred Interest = $0.00

Total Tribal Link Up Support Claimed = $0

**ETC Payment**

Total Lifeline Support Claimed = $0

Total TLS Support Claimed = $0

Total Tribal Link Up Support Claimed = $0

Total Dollars = $0

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Maybell Kelly

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(3) **Filer 499 ID**: 829223  
(4) **Technology Type (check one)**: Wireline [ ] Wireless [ ]

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</tr>
<tr>
<td><strong>Contact Name</strong>: Caitlyn Lumpkin</td>
<td><strong>b) Data Month</strong>: August 2014</td>
</tr>
<tr>
<td><strong>Mailing Address</strong>: 499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004</td>
<td><strong>c) Type of Filing (check one)</strong>: Original Revision [ ]</td>
</tr>
<tr>
<td><strong>Telephone Number</strong>: 678-389-6024</td>
<td><strong>d) State Reporting</strong>: KENTUCKY</td>
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</tr>
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</table>

### Lifeline

- **Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support**:  
  - (8) [ ] x $9.25 = $[ ]

- **Tribal Low-Income Subscribers Receiving federal Lifeline Support**:  
  - (9) 0 x $0.00 = $0 (not to exceed $34.25)

**Total Federal Lifeline Support Claimed**: (10) $[ ]

### 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**: (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**: $[ ]  
- **Total TLS**: $0  
- **Total Tribal Link Up**: $0

**Total Dollars**: (19) $[ ]

---

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### Lifeline

**Non-Tribal Low-Income Subscribers**
- Receiving federal Lifeline Support
- (8) [ ]

**Tribal Low-Income Subscribers**
- Receiving federal Lifeline Support
- (9) 0

### 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

Total Connection Charges Waived
- (16) $0

Deferred Interest
- (17) $0

Total Tribal Link Up Support Claimed (18) $0

### ETC Payment

Total Lifeline $[ ]

Total TLS $0

Total Tribal Link Up $0

Total Dollars (19) $[ ]

---

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

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

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

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

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

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10/07/2014

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

OFFICER TITLE

Maybell Kelly

OFFICER NAME

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### LIFELINE WORKSHEET

**USAC Service Provider Identification Number:** 143036544  
**Study Area Code:** 269038

**Filer 499 ID:** 829223  
**Technology Type (check one):** 
- Wireline [ ]
- Wireless [✓]

**ETC Designation Type (Check one):** 
- Lifeline Only [✓]
- High Cost/Low Income [ ]

#### Organization Information

<table>
<thead>
<tr>
<th>Company Legal Name</th>
<th>Q Link Wireless LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>499 EAST SHERIDAN ST SUITE 300</td>
</tr>
<tr>
<td></td>
<td>Dania, FL 33004</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:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
</tr>
</tbody>
</table>

**Filing Information**

| a) Submission Date         | 11/07/2014                   |
| b) Data Month              | October 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>(a) # Lifeline Subscribers</th>
<th>(b) Lifeline Support/Subscriber Support</th>
<th>(c) Total Lifeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receiving federal Lifeline Support</td>
<td>(8)</td>
<td>x $ 9.25</td>
<td>= $</td>
</tr>
</tbody>
</table>

| Tribal Low-Income Subscribers | (9)                         | x $ 0.00 (not to exceed $34.25)         | = $ 0              |

**Total Federal Lifeline Support Claimed** (10) $0

#### Toll Limitation Services (TLS)

| Cost of Providing TLS per Subscriber | (11) 0.0000000 (the lesser of incremental cost or $3 in 2012/$2 in 2013) |
| Number of TLS Subscribers            | (12) 0                                                                 |

**Total TLS Support Claimed** (13) $0

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

| Number of Connections Waived         | (14) 0                                                                 |
| Charges Waived per Connection        | (15) $ 0.00 (for multiple rates, use an average amount) (not to exceed $100) |

**Total Connection Charges Waived** (16) $0

| Deferred Interest                    | (17) $ 0.00                                                              |

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

#### ETC Payment

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

**Total Dollars** (19) $0

---

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(20) CERTIFICATIONS AND SIGNATURES

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11/07/2014

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

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OFFICER TITLE

OFFICER NAME

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(1) USAC Service Provider Identification Number 143036544
(2) Study Area Code 269038

(3) Filer 499 ID 629223
(4) Technology Type (check one) WirelineWireless

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

(6) Organization Information

| Company Legal Name:                  | Q Link Wireless LLC |
| Contact Name:                        | Caitlyn Lumpkin    |
| Mailing Address:                     | 499 EAST SHERIDAN ST SUITE 300, Dania, FL 33004 |
| Telephone Number:                    | 678-389-6024       |
| Fax Number:                          | 770-594-3878       |
| E-mail Address:                      | cmmurp@cgminc.com  |

(7) Filing Information

| a) Submission Date | 12/04/2014 |
| b) Data Month      | November 2014 |
| c) Type of Filing  | Original |
| d) State Reporting | KENTUCKY |

**Lifeline**

Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support

<table>
<thead>
<tr>
<th>(8) # Lifeline Subscribers</th>
<th>x $ 9.25</th>
<th>= $</th>
</tr>
</thead>
</table>

Tribal Low-Income Subscribers Receiving federal Lifeline Support

<table>
<thead>
<tr>
<th>(9) # Lifeline Subscribers</th>
<th>x $ 0.00</th>
<th>= $</th>
</tr>
</thead>
</table>

Total Federal Lifeline Support Claimed

**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

**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

**ETC Payment**

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

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(20) CERTIFICATIONS AND SIGNATURES

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12/04/2014 Maybell Kelly

DATE OFFICER SIGNATURE

Compliance Maybell Kelly

OFFICER TITLE OFFICER NAME

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LIFELINE WORKSHEET

Exhibit 2, Page 23

(1) USAC Service Provider Identification Number: 143036544
(2) Study Area Code: 269038

(3) Filer 499 ID: B29223
(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>Q Link Wireless LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name:</td>
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</tr>
<tr>
<td>Mailing Address:</td>
<td>499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004</td>
</tr>
<tr>
<td>Telephone Number:</td>
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</tr>
</tbody>
</table>

(7) Filing Information

<table>
<thead>
<tr>
<th>a) Submission Date</th>
<th>01/06/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Data Month</td>
<td>December 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

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

Toll Limitation Services (TLS)

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

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

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

ETC Payment

Total Lifeline $ 28,720 Total TLS $ 0 Total Tribal Link Up $ 0
Total Dollars (19) $ 28,720

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(20) CERTIFICATIONS AND SIGNATURES

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01/06/2015

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Compliance

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OFFICER TITLE

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## Lifeline Worksheet

1. **USAC Service Provider Identification Number**: 143036544
2. **Study Area Code**: 269038
3. **Filer 499 ID**: 829223
4. **Technology Type**: Wireline
5. **ETC Designation Type**: Lifeline Only

### Organization Information
- **Company Legal Name**: Q Link Wireless LLC
- **Contact Name**: Caitlyn Lumpkin
- **Mailing Address**: 499 EAST SHERIDAN ST SUITE 300, Dania, FL 33004
- **Telephone Number**: 678-389-6024
- **Fax Number**: 770-594-3878
- **E-mail Address**: cmmurp@cgminc.com

### Lifeline
- **Non-Tribal Low-Income Subscribers**: Receiving federal Lifeline Support
  - (8) Number: [ ]
  - (9) Cost: $9.25
  - (10) Total: $ [ ]
- **Tribal Low-Income Subscribers**: Receiving federal Lifeline Support
  - (11) Number: 0
  - (12) Cost: $0.00
  - (13) Total: $0

### Toll Limitation Services (TLS)
- **Cost of Providing TLS per Subscriber**: $0.00
  - (14) Number: 0
  - (15) Charges Waived: $0.00
  - (16) Total Connection Charges Waived: $0
  - (17) Deferred Interest: $0
  - (18) Total Tribal Link Up 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

### ETC Payment
- **Total Lifeline**: $[ ]
- **Total TLS**: $0
- **Total Tribal Link Up**: $0

**Total Dollars**: $[ ]

---

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Maybell Kelly
DATE
02/05/2015
OFFICER SIGNATURE
Maybell Kelly
OFFICER TITLE
Compliance
OFFICER NAME
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LIFELINE WORKSHEET

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(2) Study Area Code 269038
(3) Filer 499 ID 829223
(4) Technology Type (check one) Wireline ☐ Wireless ☐
(5) ETC Designation Type (Check one): Lifeline Only ☐ High Cost/Low Income ☐

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<tr>
<td>Contact Name:</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>499 EAST SHERIDAN ST SUITE 300, Dania, FL 33004</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:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
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(7) Filing Information

<table>
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<th>a) Submission Date</th>
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<td>February 2015</td>
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<td>c) Type of Filing</td>
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<td></td>
<td>Revision</td>
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<tr>
<td>d) State Reporting</td>
<td>KENTUCKY</td>
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</table>

Lifeline

(a) # Lifeline Subscribers (b) Lifeline Support/ Subscriber Support (c) Total Lifeline
Non-Trial Low-Income Subscribers Receiving federal Lifeline Support

| (8)  | x $ 9.25 | = $ |

Tribal Low-Income Subscribers Receiving federal Lifeline Support

| (9)  | x $ 0.00 | = $ 0 |

Total Federal Lifeline Support Claimed (10) $0

Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>(11)</th>
<th>Cost of Providing TLS per Subscriber 0.000000</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12)</td>
<td>Number of TLS Subscribers 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>(14)</th>
<th>Number of Connections Waived 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15)</td>
<td>Charges Waived per Connection $0.00</td>
</tr>
<tr>
<td></td>
<td>(for multiple rates, use an average amount)</td>
</tr>
<tr>
<td></td>
<td>(not to exceed $100)</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

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

Total Dollars (19) $0

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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03/05/2015

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

Maybell Kelly

OFFICER TITLE

OFFICER NAME

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### Lifeline Worksheet

**USAC Service Provider Identification Number**: 143036544

**Study Area Code**: 269038

**Filer 499 ID**: 829223

**Technology Type**: Wireless

**ETC Designation Type**: Lifeline Only

### Organization Information

- **Company Legal Name**: Q Link Wireless LLC
- **Contact Name**: Caitlyn Lumpkin
- **Mailing Address**: 499 EAST SHERIDAN ST SUITE 300, Dania, FL 33004
- **Telephone Number**: 678-389-6024
- **Fax Number**: 770-594-3878
- **E-mail Address**: cmmurp@cgminc.com

### Filing Information

- **Submission Date**: 04/06/2015
- **Data Month**: March 2015
- **Type of Filing**: Original
- **State Reporting**: KENTUCKY

### Lifeline

#### Non-Tribal Low-Income Subscribers

- **Receiving federal Lifeline Support**

  - **# Lifeline Subscribers**: 0
  - **Support/Subscriber Support**: $0.00

#### Tribal Low-Income Subscribers

- **Receiving federal Lifeline Support**

  - **# Lifeline Subscribers**: 0
  - **Support/Subscriber Support**: $0.00

**Total Federal Lifeline Support Claimed**: $0

### Toll Limitation Services (TLS)

- **Cost of Providing TLS per Subscriber**: $0

**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

**Total Connection Charges Waived**: $0

**Deferred Interest**: $0

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

### ETC Payment

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

**Total Dollars**: $0

---

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(20) CERTIFICATIONS AND SIGNATURES

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04/06/2015
Maybell Kelly

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Compliance
Maybell Kelly
OFFICER TITLE
OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143036544
(2) Study Area Code 269038

(3) Filer 499 ID 829223
(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>
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</thead>
<tbody>
<tr>
<td>Company Legal Name: Q Link Wireless LLC</td>
<td>a) Submission Date 05/05/2015</td>
</tr>
<tr>
<td>Contact Name: Caitlyn Lumpkin</td>
<td>b) Data Month April 2015</td>
</tr>
<tr>
<td>Mailing Address: 499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004</td>
<td>c) Type of Filing (check one) 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>
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<td></td>
</tr>
</tbody>
</table>

Lifeline

Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support
(8) $9.25 x $ 0.00 = $ 0

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

Total Federal Lifeline Support Claimed (10) $ 0

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 (not to exceed $100)

Total Connection Charges Waived (16) $ 0
Deferred Interest (17) $ 0.00

Total Tribal Link Up Support Claimed (18) $ 0

ETC Payment

Total Lifeline $ ☐ Total TLS $ 0 Total Tribal Link Up Support $ ☐

Total Dollars (19) $ ☐

If you have any questions, please call USAC at (866) 873-4727 Toll Free
(20) CERTIFICATIONS AND SIGNATURES

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05/05/2015
Maybell Kelly

DATE
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Compliance
Maybell Kelly
OFFICER NAME

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**FCC Form 497**  
April 2012 Edition  
LIFELINE WORKSHEET  

table

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<tr>
<td>(2) Study Area Code</td>
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</tr>
<tr>
<td>(3) Filer 499 ID</td>
<td>829223</td>
</tr>
<tr>
<td>(4) Technology Type (check one)</td>
<td>Wireline</td>
</tr>
<tr>
<td>(5) ETC Designation Type (Check one):</td>
<td>Lifeline Only</td>
</tr>
<tr>
<td>(6) Organization Information</td>
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<tr>
<td>(a) # Lifeline Subscribers</td>
<td>(b) Lifeline Support/Subscriber Support</td>
</tr>
<tr>
<td>Non-Tribal Low-income Subscribers</td>
<td>x $ 9.25</td>
</tr>
<tr>
<td>Receiving federal Lifeline Support</td>
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</tr>
<tr>
<td>Tribal Low-income Subscribers</td>
<td>x $ 0.00</td>
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<tr>
<td>Receiving federal Lifeline Support</td>
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<tr>
<td>Total Federal Lifeline Support Claimed</td>
<td>(10) $</td>
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<tr>
<td>Toll Limitation Services (TLS)</td>
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<tr>
<td>Cost of Providing TLS per Subscriber</td>
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<td>(13) $0</td>
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<tr>
<td>Tribal Link Up (Available only to ETCs receiving High Cost support)</td>
<td>0.00</td>
</tr>
<tr>
<td>Number of Connections Waived</td>
<td>(14) 0</td>
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<tr>
<td>Charges Waived per Connection</td>
<td>(15) $ 0.00</td>
</tr>
<tr>
<td>Total Connection Charges Waived</td>
<td>(16) $ 0.00</td>
</tr>
<tr>
<td>Deferred Interest</td>
<td>(17) $ 0.00</td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed</td>
<td>(18) $0</td>
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<tr>
<td>ETC Payment</td>
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<tr>
<td>Total Lifeline</td>
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<tr>
<td>$</td>
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<td></td>
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<tr>
<td>Total Dollars</td>
<td>(19) $</td>
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</tr>
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<tr>
<td>Data Month</td>
<td>June 2015</td>
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<td>Type of Filing (check one)</td>
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<td>State Reporting</td>
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<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
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</tr>
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<tr>
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<td>0</td>
</tr>
<tr>
<td>Total Dollars</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.

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07/07/2015

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

OFFICER TITLE

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143036544
(2) Study Area Code 269038

(3) Filer 499 ID 829223
(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: Q Link Wireless LLC
Contact Name: Caitlyn Lumpkin
Mailing Address: 499 EAST SHERIDAN ST SUITE 300
Dania, FL 33004
Telephone Number: 678-389-6024
Fax Number: 770-594-3878
E-mail Address: cmmurp@cgminc.com

(7) Filing Information

a) Submission Date 08/06/2015
b) Data Month July 2015
c) Type of Filing (check one) Original Revision ☐
d) State Reporting KENTUCKY

Lifeline

Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support

(8) ☐ x $ 9.25 = $ ☐

Tribal Low-Income Subscribers Receiving federal Lifeline Support

(9) 0 x $ 0.00 = $ 0
(not to exceed $34.25)

Total Federal Lifeline Support Claimed (10) $ ☐

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

Deferred Interest (17) $ 0.00

Total Tribal Link Up Support Claimed (18) $ 0

ETC Payment

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

Total Dollars (19) $ ☐

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08/06/2015
Maybell Kelly

DATE
OFFICER SIGNATURE

Compliance
Maybell Kelly

OFFICER TITLE
OFFICER NAME

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FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

Exhibit 2, Page 39
OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143036544
(2) Study Area Code 269038

(3) Filer 499 ID 829223
(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>Q Link Wireless LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name:</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004</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:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
</tr>
</tbody>
</table>

(7) Filing Information

<table>
<thead>
<tr>
<th>a) Submission Date</th>
<th>09/04/2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>b) Data Month</td>
<td>August 2015</td>
</tr>
<tr>
<td>c) Type of Filing</td>
<td>Original</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) ☐ # Lifeline Subscribers</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tribal Low-Income Subscribers Receiving federal Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(9) ☐ # Lifeline Subscribers</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed (10) $ 0.00

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>
</tr>
</thead>
<tbody>
<tr>
<td>(11) 0.000000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of TLS Subscribers</th>
</tr>
</thead>
<tbody>
<tr>
<td>(12) 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>
</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 (not to exceed $100)</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 $ 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total TLS $ 0</td>
</tr>
<tr>
<td>Total Tribal Link Up $ 0</td>
</tr>
</tbody>
</table>

Total Dollars (19) $ 0

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09/04/2015

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

Maybell Kelly

OFFICER TITLE

OFFICER NAME

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### Lifeline Worksheet

**USAC Service Provider Identification Number:** 143036544  
**Study Area Code:** 269038

**Filer 499 ID:** 829223  
**Technology Type:** Check one:  
- Wireline  
- Wireless

**ETC Designation Type:** Check one:  
- Lifeline Only  
- High Cost/Low Income

**Organization Information**  
- **Company Legal Name:** Q Link Wireless LLC  
- **Contact Name:** Caitlyn Lumpkin  
- **Mailing Address:** 499 EAST SHERIDAN ST SUITE 300 Dania, FL 33004  
- **Telephone Number:** 678-389-6024  
- **Fax Number:** 770-594-3878  
- **E-mail Address:** cmmurp@cgminc.com

**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></td>
<td>$ 9.25</td>
<td>$ 0</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:** $ 0

**Toll Limitation Services (TLS)**

<table>
<thead>
<tr>
<th>Number of TLS Subscribers</th>
<th>(12) 0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of Providing TLS per Subscriber</td>
<td>$ 0.00</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>$ 0.00</td>
</tr>
</tbody>
</table>

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

**ETC Payment**

<table>
<thead>
<tr>
<th>Total Lifeline</th>
<th>$ 0</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:** $ 0

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10/08/2015

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(2) Study Area Code: 269038
(3) Filer 499 ID: 829223
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| E-mail Address: cmmurp@cgminc.com |

(7) Filing Information

| a) Submission Date: 11/09/2015 |
| b) Data Month: October 2015 |
| c) Type of Filing (check one): Original [ ] Revision [ ] |
| d) State Reporting: KENTUCKY |

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>x $ 9.25</td>
<td>= $</td>
<td></td>
</tr>
</tbody>
</table>

Tribal Low-Income Subscribers Receiving federal Lifeline Support

| (9) | x $ 0.00 | = $ 0 (not to exceed $34.25) |

Total Federal Lifeline Support Claimed (10) $ |

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

Deferred Interest (17) $0

Total Tribal Link Up Support Claimed (18) $0

ETC Payment

| Total Lifeline |
| (19) |
| Total TLS |
| Total Tribal Link Up |
| Total Dollars |

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**Fax Number:** 770-594-3878  
**E-mail Address:** cmmurp@cgminc.com

#### Lifeline

<table>
<thead>
<tr>
<th>Category</th>
<th># of Subscribers</th>
<th>Lifeline Support/Subscriber Support</th>
<th>Total Lifeline Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income</td>
<td></td>
<td>$9.25</td>
<td></td>
</tr>
<tr>
<td>Subscribers</td>
<td></td>
<td>x 1</td>
<td>$9.25</td>
</tr>
<tr>
<td>Tribal Low-Income</td>
<td>0</td>
<td>$0.00</td>
<td>0</td>
</tr>
<tr>
<td>Subscribers</td>
<td></td>
<td>x 0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Federal Lifeline Support Claimed</strong></td>
<td></td>
<td></td>
<td><strong>$0</strong></td>
</tr>
</tbody>
</table>

#### Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Cost of Providing TLS per Subscriber</th>
<th>Number of TLS Subscribers</th>
<th>Total TLS Support Claimed</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.00</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

#### Tribal Link Up

- **Number of Connections Waived:** 0
- **Charges Waived per Connection:** $0.00
  - for multiple rates, use an average amount
- **Total Connection Charges Waived:** $0
- **Deferred Interest:** $0
  - Total Tribal Link Up Support Claimed: $0

#### ETC Payment

- **Total Lifeline Support:** $0
- **Total TLS Support:** $0
- **Total Tribal Link Up Support:** $0
  - Total Dollars: $0

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12/07/2015
Maybell Kelly

DATE
OFFICER SIGNATURE

Compliance
Maybell Kelly

OFFICER TITLE
OFFICER NAME

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### Lifeline Worksheet

<table>
<thead>
<tr>
<th>Description</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) USAC Service Provider Identification Number</td>
<td>143036544</td>
</tr>
<tr>
<td>(2) Study Area Code</td>
<td>269038</td>
</tr>
<tr>
<td>(3) Filer 499 ID</td>
<td>829223</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>
<tr>
<td>(6) Organization Information</td>
<td>(7) Filing Information</td>
</tr>
<tr>
<td>Company Legal Name</td>
<td>Q Link Wireless LLC</td>
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<tr>
<td>Contact Name</td>
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<tr>
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</tr>
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<td>Fax Number</td>
<td>770-594-3878</td>
</tr>
<tr>
<td>E-mail Address</td>
<td><a href="mailto:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
</tr>
<tr>
<td>a) Submission Date</td>
<td>01/06/2016</td>
</tr>
<tr>
<td>b) Data Month</td>
<td>December 2015</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

- **Non-Tribal Low-Income Subscribers**
  - Receiving federal Lifeline Support
  - (8) 0
  - (c) Total Lifeline

- **Tribal Low-Income Subscribers**
  - Receiving federal Lifeline Support
  - (9) 0
  - (c) Total Lifeline

### 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

- **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

- **Deferred Interest**
  - (17) 0

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

### ETC Payment

- **Total Lifeline**
  - (19) 0

- **Total TLS**
  - (19) 0

- **Total Tribal Link Up**
  - (19) 0

### Total Dollars

- (19) 0

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

(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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01/06/2016

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number: 143036544

(2) Study Area Code: 269038

(3) Filer 499 ID: 829223

(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>Q Link Wireless LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Name:</td>
<td>Caitlyn Lumpkin</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>499 EAST SHERIDAN ST SUITE 300</td>
</tr>
<tr>
<td></td>
<td>Dania, FL 33004</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:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
</tr>
</tbody>
</table>

(7) Filing Information

<table>
<thead>
<tr>
<th>Submission Date</th>
<th>January 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Month</td>
<td>January 2016</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)</td>
<td>x $9.25</td>
<td>= $9,250</td>
<td></td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>(9)</td>
<td>x $0.00</td>
<td>= $0.00</td>
</tr>
</tbody>
</table>

Total Federal Lifeline Support Claimed: $9,250

### Toll Limitation Services (TLS)

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

Number of TLS Subscribers: 0

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 (for multiple rates, use an average amount)</td>
</tr>
</tbody>
</table>

Total Connection Charges Waived: $0

Deferred Interest: $0

Total Tribal Link Up Support Claimed: $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>$9,250</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

Total Dollars: $9,250

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02/05/2016
Maybell Kelly

DATE
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# Lifeline Worksheet

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<td><a href="mailto:cmmurp@cgminc.com">cmmurp@cgminc.com</a></td>
</tr>
</tbody>
</table>

## Filing Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submission Date</td>
<td>03/04/2016</td>
</tr>
<tr>
<td>Data Month</td>
<td>February 2016</td>
</tr>
<tr>
<td>Type of Filing</td>
<td>Original Revision</td>
</tr>
<tr>
<td>State Reporting</td>
<td>KENTUCKY</td>
</tr>
</tbody>
</table>

## Lifeline

### Non-Tribal Low-Income Subscribers

Receiving federal Lifeline Support

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<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 Support Claimed</td>
<td>$ 9.25</td>
</tr>
</tbody>
</table>

### Tribal Low-Income Subscribers

Receiving federal Lifeline Support

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td># Lifeline Subscribers</td>
<td>0</td>
</tr>
<tr>
<td>Lifeline Support/Subscriber Support</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Total Lifeline Support Claimed</td>
<td>$ 0.00</td>
</tr>
</tbody>
</table>

## Toll Limitation Services (TLS)

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of Providing TLS per Subscriber</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Number of TLS Subscribers</td>
<td>0</td>
</tr>
<tr>
<td>Total TLS Support Claimed</td>
<td>$ 0.00</td>
</tr>
</tbody>
</table>

## Tribal Link Up

(Available only to ETCs receiving High Cost support)

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Connections Waived</td>
<td>0</td>
</tr>
<tr>
<td>Charges Waived per Connection</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Total Connection Charges Waived</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Deferred Interest</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Total Tribal Link Up Support Claimed</td>
<td>$ 0.00</td>
</tr>
</tbody>
</table>

## ETC Payment

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>Total Lifeline</td>
<td>$ 9.25</td>
</tr>
<tr>
<td>Total TLS</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Total Tribal Link Up</td>
<td>$ 0.00</td>
</tr>
<tr>
<td>Total Dollars</td>
<td>$ 9.25</td>
</tr>
</tbody>
</table>

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03/04/2016

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**LIFELINE WORKSHEET**

---

(1) **USAC Service Provider Identification Number**: 143036544  
(2) **Study Area Code**: 269038

(3) **Filer 499 ID**: 829223  
(4) **Technology Type (check one)**: Wireline [ ] Wireless [ ]

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

---

**Organization Information**

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</tr>
</tbody>
</table>

**Lifeline**

<table>
<thead>
<tr>
<th>Category</th>
<th><strong># Lifeline Subscribers</strong></th>
<th><strong>LifeLine Support/Subscriber Support</strong></th>
<th><strong>Total Lifeline</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td></td>
<td>$9.25</td>
<td></td>
</tr>
<tr>
<td>Tribal Low-Income Subscribers Receiving federal Lifeline Support</td>
<td>0</td>
<td>$0.00</td>
<td></td>
</tr>
</tbody>
</table>

| **Total Federal Lifeline Support Claimed** | $0 |

**Toll Limitation Services (TLS)**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of Providing TLS per Subscriber</td>
<td>0.000000 (the lesser of incremental cost or $3 in 2012 /$2 in 2013)</td>
</tr>
<tr>
<td>Number of TLS Subscribers</td>
<td>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>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Connections Waived</td>
<td>0</td>
</tr>
<tr>
<td>Charges Waived per Connection</td>
<td>$0.00 (for multiple rates, use an average amount)</td>
</tr>
<tr>
<td>Total Connection Charges Waived</td>
<td>$0.00</td>
</tr>
<tr>
<td>Deferred Interest</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

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

**ETC Payment**

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

| **Total Dollars**                         | $0 |

---

*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.

04/06/2016

Maybell Kelly

DATE

OFFICER SIGNATURE

Compliance

Maybell Kelly

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 you 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.