EXHIBIT 13



Dota	March	2,	2016	
------	-------	----	------	--

Reporting Month_

February 2016

	Carrier Info	ormation	
Company Name	West Kentucky Rural Tele	phone Cooperative, Corp.,	Inc.
Company Address	237 N. 8th Street - PO B	ox 649, Mayfield, KY 4206	6
Telephone / Fax	(270) 856-1890 / Fax (27	70) 856-3045	
Vendor Number			
	•		
Classification Please Circle One	ILEC CLEC Cel	lular PCS	
	Monthly Acce	cs I ine Data	
	Monthly Acce	55 Line Data	
Total Access Li	nes in Service	10,244	
2. Surcharge Per A	ccess Line	\$0.08	
3. Amount of Surc	harge Remitted to Kentucky USF	\$819.52 	
4. Number of Acce	ess Lines Receiving Lifeline Support	106	
5. Amount of Rein	nbursement Requested from Kentucky US	SF. X \$3.50 \$371.00	
	Signature	e Block	
I hereby attest that the in:	formation reported herein is true and accu	rate to the best of my knowledge.	
Company Official St.	acey Wray Title Accounting	ng Company Official	acy Wray
	(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: Executive Director 211 Sower Blvd. P.O. Box 615 Frankfort, KY 40602

Revised 02-15-2016



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Please Circle One

ILEC

CLEC

Reporting Month_

PCS

	Carrier Information						
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.						
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066						
Telephone / Fax	(270)674-1000 / Fax (270)856-3651						
Vendor Number							
,							
Classification							

Cellular

	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 \$437.00

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

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

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

Send a copy of this report to:

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



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date___1/8/10

Reporting Month December 3015

Date	Reporting Prioriting	
	Carrier Information	
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.	
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066	· · · · · · · · · · · · · · · · · · ·
Telephone / Fax	(270)674-1000 / Fax (270)856-3651	
Vendor Number		
Classification Please Circle One	(ILEC CLEC Cellular PCS	
	Monthly Access Line Data	
1. Total Access Li	Lines in Service	
2. Surcharge Per A	Access Line\$0.08	
3. Amount of Surc	charge Remitted to Kentucky USF	٠. ا
4. Number of Acce	cess Lines Receiving Lifeline Support	
5. Amount of Rein	mbursement Requested from Kentucky USF	
	Signature Block	
I hereby attest that the inf	oformation reported herein is true and accurate to the best of my knowledge.	
Company Official <u>Cath</u>	ny C. Pigg Title Accountant Company Official Cally C Place (Printed) (Signed)	3

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

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

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



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

12/2/15

Date	Reporting Month / VOV OV	<u>ر</u>
1		
	Carrier Information	
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.	
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066	
Telephone / Fax	(270)674-1000 / Fax (270)856-3651	
Vendor Number		
,		
Classification Please Circle One	(ILEC CLEC Cellular PCS	
	Monthly Access Line Data	
1. Total Access L	Lines in Service	
2. Surcharge Per A	Access Line	
	charge Remitted to Kentucky USF	
4. Number of Acce	cess Lines Receiving Lifeline Support	
	mbursement Requested from Kentucky USF	
	Signature Block	
I hereby attest that the inf	iformation reported herein is true and accurate to the best of my knowledge.	
Company Official <u>Cath</u>	ny C. Pigg Title Accountent Company Official Cattle C Flag (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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date)	7	15	
		- 1		

Date		Reporting Month	ot 2015
	Carrier Information		
Company Name	West Kentucky Rural Telephone Coo	perative, Corp.,	Inc.
Company Address	237 N. 8th Street - P.O. Box 649,	Mayfield, KY 4	2066 .
Telephone / Fax	(270)674-1000 / Fax (270)856-3651		,
Vendor Number			<u></u>
,			
Classification Please Circle One	ILEC CLEC Cellular	PCS	
	Monthly Access Line Data		
1. Total Access Lin	nes in Service	10409	
2. Surcharge Per A	ccess Line	\$0.08	• .
	narge Remitted to Kentucky USF	(B) 000 = 0	<u>)</u>
	ss Lines Receiving Lifeline Support	124	11.3.2
5. Amount of Reim	bursement Requested from Kentucky USF	5434.00	
		, .	
	Signature Block		
hereby attest that the info	rmation reported herein is true and accurate to the best	of my knowledge.	
Company Official <u>Cathy</u>	1 (Company Official <u>(al</u>	JSigned)

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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Reporting Month SLPL 2015

Date	Reporting Month CXUI
	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	
,	
Classification Please Circle One	(ILEC CLEC Cellular PCS
	Monthly Access Line Data
1. Total Access L	ines in Service
2. Surcharge Per	Access Line
3. Amount of Sur	charge Remitted to Kentucky USF
4. Number of Acc	pess Lines Receiving Lifeline Support
5. Amount of Rein	mbursement Requested from Kentucky USF 431.00
	Signature Block
I hereby attest that the in	formation reported herein is true and accurate to the best of my knowledge.
Company Official <u>Cath</u>	ny C. Pigg Title Accountent Company Official Alle Cylog (Printed)

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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date 9/3/15

Reporting Month Aug 2015

	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax Vendor Number	(270)674-1000 / Fax (270)856-3651
v endor Number	

Classification		\			
Please Circle One	ILEC	CLEC	Cellular	PCS	
	$\overline{}$				 ····

Amount of Surcharge Remitted to Kentucky USF	375
Amount of Surcharge Remitted to Kentucky USF	
Amount of Surcharge Remitted to Kentucky USF	80.08
	0.00
Number of Access Lines Receiving Lifeline Support	8
Amount of Reimbursement Requested from Kentucky USF	18.00

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



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

8/7/15

Reporting Month Quy 2015

1	
	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	
Classification Please Circle One	ILEC CLEC Cellular PCS
	Monthly Access Line Data
1. Total Access L	ines in Service
2. Surcharge Per A	Access Line
3. Amount of Sur	charge Remitted to Kentucky USF
4. Number of Acce	ess Lines Receiving Lifeline Support
	abursement Requested from Kentucky USF
	Signature Block
I hereby attest that the inf	formation reported herein is true and accurate to the best of my knowledge.
Company Official <u>Cath</u>	y C. Pigg Title Accountent Company Official Signed) (Printed) Company Official Signed)

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

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

Send a copy of this report to:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

7/7/15 Date

Reporting Month June 2015

	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address Telephone / Fax Vendor Number	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
	(270)674-1000 / Fax (270)856-3651

Classification Please Circle One	ILEC	CLEC	Cellular	PCS	
	$\overline{}$				

	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 Cathy C. Pigg Title Accountant Company Official Cathy C. Pigg (Printed) (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



UNIVERSAL SERVICE FUND

Date 0/4/15

Reporting Month May 2015

	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	
Classification Please Circle One	ILEC CLEC Cellular PCS
	Monthly Access Line Data
1. Total Access Li	nes in Service
2. Surcharge Per A	access Line
3. Amount of Surc	harge Remitted to Kentucky USF
4. Number of Acce	ess Lines Receiving Lifeline Support
5. Amount of Reim	abursement Requested from Kentucky USF
	Signature Block
hereby attest that the info	ormation reported herein is true and accurate to the best of my knowledge.
Company Official <u>Cathy</u>	(Printed) Title Accountent Company Official Signed 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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date 5/5/15.

Reporting Month April 2015

Date	Reporting Month / / / C C C C
	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	
Classification Please Circle One	ILEC CLEC Cellular PCS
	Monthly Access Line Data
1. Total Access L	ines in Service
2. Surcharge Per A	Access Line
	charge Remitted to Kentucky USF
4. Number of Acc	ess Lines Receiving Lifeline Support
	nbursement Requested from Kentucky USF
	Signature Block
hereby attest that the inf	Formation reported herein is true and accurate to the best of my knowledge.
Company Official <u>Cath</u>	y C. Pigg Title Accountant Company Official Signed 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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Reporting Month March 3015

	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	
Classification Please Circle One	ILEC CLEC Cellular PCS
	Monthly Access Line Data
1. Total Access Li	ines in Service
2. Surcharge Per A	Access Line
Amount of Sur	charge Remitted to Kentucky USF
. Number of Acce	ess Lines Receiving Lifeline Support
. Amount of Rein	abursement Requested from Kentucky USF
1	
	Signature Block
hereby attest that the inf ompany Official <u>Cath</u>	ormation reported herein is true and accurate to the best of my knowledge. y C. Pigg Title Accountant Company Official Cathe Pigg (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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date_ 3/9/15

Reporting Month FEDRUARY 2015

	Carrier Information	
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.	
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066	
Telephone / Fax	(270)674-1000 / Fax (270)856-3651	
Vendor Number		
Classification Please Circle One	(ILEC Cellular PCS	
	Monthly Access Line Data	
1. Total Access L	ines in Service	
2. Surcharge Per A	Access Line	
3. Amount of Sur	charge Remitted to Kentucky USF	
4. Number of Access Lines Receiving Lifeline Support		
5. Amount of Rein	nbursement Requested from Kentucky USF 4 10 50	
1		
	Signature Block	
I hereby attest that the in	formation reported herein is true and accurate to the best of my knowledge.	
Company Official <u>Cath</u>	ry C. Pigg Title <u>Accountunt</u> Company Official (Signed) (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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date 3/4/15

Reporting Month JANUARY 2015

	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	

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 Cathy C. Pigg Title Account and Company Official (Signed)

(Signed)

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

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:

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



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date 18/15

Reporting Month DECEMBER

Carrier Information					
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.				
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066				
Telephone / Fax	(270)674-1000 / Fax (270)856-3651				
Vendor Number					

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.
the matter reported negen is true and accurate to the best of my knowledge.
Company Official Cathy C. Pigg Title Alcountry of Company Official After Company
(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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date__10/3/14

Reporting Month NOVEMBLE

ſ						
Carrier Information						
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.					
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066					
Telephone / Fax	(270)674-1000 / Fax (270)856-3651					
Vendor Number						
Classification Please Circle One	ILEC CLEC Cellular PCS					
·	Monthly Access Line Data					
Total Access L	nes in Service					
2. Surcharge Per	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 in	formation reported herein is true and accurate to the best of my knowledge.					
Company Official Cat	ry C. Pigg Title Accountant Company Official City C The (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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date_____11(3)14

Reporting Month

onth OCLOBUR

Carrier Information						
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.					
Company Address	Company Address 237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066					
Telephone / Fax	(270)674-1000 / Fax (270)856-3651					
Vendor Number						
Classification Please Circle One	ILEC CLEC Cellular PCS					
	Monthly Access Line Data					
Total Access L	ines 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 Catl	ny C. Pigg Title Accountant Company Official attig Gigg					

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

(Printed)

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

10/6/14

Reporting Month Suptember 2014

	Carrier Information						
Company Name	ny Name West Kentucky Rural Telephone Cooperative, Corp., Inc.						
Company Address 237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066							
Telephone / Fax	(270)674-1000 / Fax (270)856-3651						
Vendor Number							
Classification Please Circle One	ILEC CLEC Cellular PCS						
	Monthly Access Line Data						
Total Access I	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 Re							
	Signature Block						
I hereby attest that the i	nformation reported herein is true and accurate to the best of my knowledge.						
Company Official Cat	hy C. Pigg Title Accounter Company Official Cally C Tigh						

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

(Printed)

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

igned)



	C	1.	101
Date	4	14	[14

Reporting Month August 2014

ate	Reporting World 7700 1				
	Carrier Information				
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.				
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066				
Telephone / Fax	(270)674-1000 / Fax (270)856-3651				
Vendor Number					
Classification Please Circle One	ILEC CLEC Cellular PCS				
	Monthly Access Line Data				
1. Total Access	Lines in Service				
	r Access Line				
	urcharge 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 Company Official Ca	e information reported herein is true and accurate to the best of my knowledge. Atthy C. Pigg Title Accountant Company Official (Signed)				

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

(Printed)

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

(Signed)



Date 8/7/14

Reporting Month July 2014

	·						
Carrier Information							
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.						
Company Address 237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066							
Telephone / Fax	(270)674-1000 / Fax (270)856-3651						
Vendor Number							
Classification Please Circle One	(ILEC) CLEC Cellular PCS						
	Monthly Access Line Data						
1. Total Access L	ines in Service						
2. Surcharge Per	2. Surcharge Per Access Line						
3. Amount of Surcharge Remitted to Kentucky USF							
4. Number of Acc	4. Number of Access Lines Receiving Lifeline Support						
Amount of Reimbursement Requested from Kentucky USF 483.00							
Signature Block							
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.							
Company Official Cathy C. Pigg Title Accountant Company Official Cathy C. Pigg (Printed)							

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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Date	7-	2	3-	14	

Reporting Month June 2014

		Carrier Information	
(Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.	
Со	mpany Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066.	
-	Гelephone / Fax	(270)674-1000 / Fax (270)856-3651	
1	Vendor Number		
	ification e Circle One	(ILEC) CLEC Cellular PCS	× .'
		Monthly Access Line Data	
•		Lines in Service	· -
2. Surcharge Per Access Line			
	3. Amount of Surcharge Remitted to Kentucky USF \$847.84 - Miles		
,		4. Number of Access Lines Receiving Lifeline Support	
·.	Number of Ac	cess Lines Receiving Lifeline Support	
3.	Number of Ac	imbursement Requested from Kentucky USF	<u>-</u>

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

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

Company Official Cathy C. Pigg

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

6-18-14

Reporting Month MAY 2014

	Carrier Information
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	

Classification
Please Circle One ILEC CLEC Cellular PCS

	Monthly Access Line Data
١.	Total Access Lines in Service
2.	Surcharge Per Access Line\$0.08
	Amount of Surcharge Remitted to Kentucky USF
	Number of Access Lines Receiving Lifeline Support
	Amount of Reimbursement Requested from Kentucky USF539 ee

Signature Block

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

Company Official Cathy C. Pigg Title Accountant Company Official (Signed)

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

Finance and Administration Cabinet ATTN: KY USF 702 Capital Ave. Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

Reporting Month APRIL 2014

	Carrier Information
Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
ny Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
relephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	

Classification Please Circle One ILEC

CLEC

Cellular

PCS

	Monthly Access Line Data
1. 2. 3. 4.	Total Access Lines in Service
5.	Amount of Reimbursement Requested from Kentucky USF53900

Signature Block	_
I hereby attest that the information reported herein is true and accurate to the best of my knowledge. Company Official Cathy C. Pigg Title (Company Official Company Official (Sighed)	,

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:



Date 4/30/14

Reporting Month MARCH 2014

Carrier Information			
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.		
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066		
Telephone / Fax	(270)674-1000 / Fax (270)856-3651		
Vendor Number			
Classification Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access Line Data		
Total Access I	Lines in Service		
2. Surcharge Per	2. Surcharge Per Access Line		
3. Amount of Su	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 Cathy C. Pigg Title Accountant Company Official Cathy Tigg (Printed)			

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



Date 3/27/14

Reporting Month Feb. 2014

Carrier Information	
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	

Classification
Please Circle One ILEC 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 \$84269
4.	Number of Access Lines Receiving Lifeline Support
5.	Amount of Reimbursement Requested from Kentucky USF 4549, 50

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

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:



COMMONWEALTH OF KENTUCKY UNIVERSAL SERVICE FUND

1/20/14

2014

2/28/1	Reporting Month January 201	
	·	
	Carrier Information	
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.	
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066	
Telephone / Fax	(270)674-1000 / Fax (270)856-3651	
Vendor Number		
Classification Please Circle One	ILEC Cellular PCS	
	Monthly Access Line Data	
Total Access L	Lines in Service	
2. Surcharge Per	Access Line	
3. Amount of Sur	rcharge Remitted to Kentucky USF	
4. Number of Acc	cess Lines Receiving Lifeline Support	
	imbursement Requested from Kentucky USF	
	Signature Block	
I hereby attest that the in	nformation reported herein is true and accurate to the best of my knowledge.	
Company Official <u>Catl</u>	hy C. Pigg Title Accountant Company Official atty Type (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



1-22-14

Reporting Month <u>December</u> 2013

	Carrier Information		
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.		
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066		
Telephone / Fax	(270)674-1000 / Fax (270)856-3651		
Vendor Number			
Classification Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access Line Data		
1. Total Access	Lines in Service		
	• Access Line		
3. Amount of Su	urcharge Remitted to Kentucky USF		
Number of Access Lines Receiving Lifeline Support			
	and the Proposed from Ventuality USE		
	Signature Block		
I hereby attest that the information reported herein is true and accurate to the best of my knowledge.			
Company Official Cathy C. Pigg Title Accountant Company Official (Signed)			

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

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

Capitol Annex, Room 488A Frankfort, KY 40601 Send a copy of this report to:



Date 12-20-13

Reporting Month Nov. 2013

Carrier Information	
Company Name	West Kentucky Rural Telephone Cooperative, Corp., Inc.
Company Address	237 N. 8th Street - P.O. Box 649, Mayfield, KY 42066
Telephone / Fax	(270)674-1000 / Fax (270)856-3651
Vendor Number	
Classification Please Circle One	ILEC 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 Cathy C. Pigg Title Accountant Company Official Cathy C. Pigg (Printed) (Printed) Company Official Cathy C. Pigg (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: