TDS TELECOM ON BEHALF OF LESLIE COUNTY TELEPHONE COMPANY

APPENDIX B

TDS TELECOM ON BEHALF OF LESUE COUNTY TELEPHONE COMPANY

APPENDIX B

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

Q1. 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 KUSF forms for Leslie County Telephone Company.

Q2. Provide the Federal Communication Commission ("FCC") Form 497 submitted to the FCC from January 2014 to the present.

Response: Please see attached FCC Form 497s for Leslie County Telephone Company.

- Q3. 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:

Response: TDS Telecom does not have specific Lifeline service offerings. A Lifeline recipient may subscriber to any local service offerings available to all residential customers. This link will direct you to TDS' filed tariffs which reflect potential service offerings. http://www.tdstelecom.com/CustomerService/TariffSearch.aspx

Q4. 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: If the state of Kentucky determines its state Lifeline benefit applies only to voice services, as a designated eligible telecommunications carrier, TDS would continue providing Lifeline benefits in the state of Kentucky complying with both Kentucky program requirements

TDS TELECOM ON BEHALF OF LESLIE COUNTY TELEPHONE COMPANY

and FCC program requirements. If support only applied to voice services, then a Lifeline customer subscribing to only broadband service may no longer receive Lifeline benefits.

Ultimately, TDS recommends aligning state and federal requirements as that streamlines carrier obligations as well as procedural changes but also may lessen consumer confusion.

Q5. Identify any cost effective procedures that you believe should be implemented by the Commission to increase oversight of the Lifeline program.

Response: The FCC's 2015 Lifeline Order (FCC 15-71) and the recent FCC Order (FCC 16-38) implements program oversight measures. Additionally, the most recent order adopts a National Verifier system which once fully implemented may dramatically increase program oversight. Adding additional oversight measures at this time may generate carrier as well as consumer confusion. Further, additional program changes may create unnecessary burdens while all parties – carriers, Commissions, USAC and the FCC – make the required operational changes to meet the orders new rules by its effective date. One possible consideration is if Kentucky becomes one of the first five states transitioned to the National Verifier as that may create state cost-savings as well as oversight measures and once fully integrated determine if any further cost-effective oversight measures are needed.

Q6. 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: TDS Telecom would be able to implement a change to the state Lifeline support amount within 30 days. If the support amount changed, depending upon when enacted, it may take one or two bills cycles for the change to appear on the Lifeline customers' bills. Further, if the Commission would desire a bill message informing customers of the Lifeline support amount change, an additional 15 days would be needed

Q7. Provide, in detail, the methods employed to verify the eligibility of the customers who [participate in the Lifeline program.

Response: TDS Telecom complies with FCC rules §54.410. TDS receives completed Lifeline applications and corresponding eligibility documentation. Once reviewed and determine appropriate, the customer information is entered into the National Lifeline Accountability Database ("NLAD") for final confirmation. Once approved via NLAD, the customer is confirmed

TDS TELECOM ON BEHALF OF LESLIE COUNTY TELEPHONE COMPANY

eligible to receive Lifeline benefits. The application and any associated documentation are then securely retained.

Q8. 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: TDS Telecom has not been subjected to any FCC investigation, action, and / or penalties relating to participation in the Lifeline program.

Q9. Describe in detail, your current marketing programs for Lifeline service in Kentucky, including, but not limited to, person-to-person sales.

Response: TDS Telecom advertises the Lifeline program via newspaper ads approximately each fall, as well as a residential newsletter each spring. Information is provided in the directories, TDS Telecom's website as well as information on Universal Service Administrative Company's ("USAC") website. Additionally, Lifeline program information is provided to a customer contacting TDS Telecom for new service installation.

Requests for information to All Parties

Q1. Provide the KUSF reimbursement forms submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.

Response: Please refer TDS Telecom's response to Appendix B question 1.

Q2. 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: Total subscriber count for Lifeline is taken directly from TDS Telecom's customer billing system subscriber line counts for the particular billing codes as of the end of the billing cycle for that company for the current month.

TDS TELECOM ON BEHALF OF LESUE COUNTY TELEPHONE COMPANY

Q3. Explain how the total of subscriber lines is calculated for the KUSF reimbursement for when a customer leaves in the middle of a month.

Response: TDS Telecom pulls customer information at the end of each billing cycle for each local operating company from the customer billing system.

Q4. 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 no paid by, the customer is remitted.

Response: When bad debts are written off, TDS Telecom allocates those write-offs back against all billing areas – <u>including</u> surcharges (lifeline, etc.). So the payments we remit to the State of Kentucky are adjusted for any bad debt write-offs in that manner. Similarly, when bad debt <u>recoveries</u> are received, allocations are also made back to all billing areas including surcharges - (lifeline, etc.). So in the case of bad debt <u>recoveries</u>, our remittances to the State of Kentucky are actually increased.

Q5. State whether you believe the Commission should wait until the FCC's investigation of Lifeline Reform is concluded before rendering a decision in this proceeding, and explain the basis for your response.

Response: While it is unclear how the FCC will respond to the outstanding Petitions for Reconsideration related to its most recent Lifeline order, TDS Telecom recommends the Kentucky Commission wait until the FCC finalizes its Lifeline rules. This action would allow carriers to focus on implementing the required program changes, which entails various operational changes as well as creating new procedures and likely software modifications. Implementing additional changes prior to the FCC's Order effective dates or prior to any FCC response to the outstanding Petitions for Reconsideration may require carriers to tax already limited resources and possibly cause re-work if the FCC's final action alters any new rules the Kentucky Commission implements.

Q6. 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: Please refer TDS Telecom's response to Appendix B question 6.

Leslie County Telephone Company Question 1 KUSF reimbursement forms



DATE: February 7, 2	.014	-			Reporting Month:		Jan-14
			Carrier Informa	tion			
Company Name	Leslie County Teleph		<u> </u>	11011			
Company Address	PO Box 88, Roachdal		-				***************************************
Telephone/Fax	Voice: (765) 522-024		5) 522-0244				
Vendor Number	Voice. (105) 522 024	O Data. (100) 322-02-17				
Vendoi Mumoci							
Classification Please Circle One	ILEC CLEC	Cellular	PCS				
		Мо	nthly Access Lin	e Data			
1.	Total Access Lines in	Service			-		7266
2.	Surcharge Per Access	Line			-		0.08
3.	Amount of Surcharge	Remitted to K	entucky USF		-	\$	540.81
4.	Number of Access Li	nes Receiving	Lifeline Support		-		708
5.	Amount of Reimburs	ement Request	ed from Kentuck	y USF		\$	2,478.00
			Signature Bloc	k			
I hereby attest that the i	information reported h	ereing is true a	and accurate to th	e best of my	knowledge.		
Company Official	Michael Ebaugh	Title: Senio	or Accountant	Company	Official	Mich	hael Ebaugh
	(Printed)						(Signed)
Make Check payable to State Treasurer" and se and send with this repo Finance & Administrat Fax: Sue Casey - 502-5	end with this ort to: tion Cabinet				Send a copy of this Kentucky Public S ATTN: Jim Steve 211 Sower Blvd.	Servio	

PLEASE NOTE:

ATTN: KY USF 702 Capital Ave

Capitol Annex, Room 488A Frankfort, KY 40601 211 Sower Blvd.
PO Box 615
Frankfort, KY 40602
Revised 03-13-2008



DATE: _March 7. 2014 Feb-14 Reporting Month: Carrier Information Leslie County Telephone Company Name PO Box 88, Roachdale, IN 46172 Company Address Voice: (765) 522-0240 Data: (765) 522-0244 Telephone/Fax Vendor Number Classification Please Circle One ILEC) CLEC Cellular **PCS** Monthly Access Line Data 1. Total Access Lines in Service 7321 2. Surcharge Per Access Line 0.08 549.04 3. Amount of Surcharge Remitted to Kentucky USF 4. Number of Access Lines Receiving Lifeline Support 712 5. Amount of Reimbursement Requested from Kentucky USF 2,492.00 Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh Company Official (Printed) (Signed) Make Check payable to: "Kentucky Send a copy of this report to: State Treasurer" and send with this Kentucky Public Service Commission and send with this report to: ATTN: Jim Stevens Finance & Administration Cabinet 211 Sower Blvd. Fax: Sue Casey - 502-564-7882 ATTN: KY USF PO Box 615 702 Capital Ave Frankfort, KY 40602

PLEASE NOTE:

Capitol Annex, Room 488A Frankfort, KY 40601

Revised 03-13-2008



DATE: April 4, 2014 Reporting Month: Mar-14 Carrier Information Company Name Leslie County Telephone PO Box 88, Roachdale, IN 46172 Company Address Telephone/Fax Voice: (765) 522-0240 Data: (765) 522-0244 Vendor Number Classification ILEC) **CLEC** Cellular **PCS** Please Circle One Monthly Access Line Data 1. Total Access Lines in Service 7232 2. Surcharge Per Access Line 0.08 3. Amount of Surcharge Remitted to Kentucky USF 543.02 4. Number of Access Lines Receiving Lifeline Support 712 5. Amount of Reimbursement Requested from Kentucky USF 2,492.00 Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Michael Ebaugh Company Official Michael Ebaugh Title: Senior Accountant Company Official (Printed) (Signed)

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: May 2, 2014			Reporting Mon	nth:	Apr-14
					·
	1	Carrier Inform	ation		
Company Name	Leslie County Telep	hone			
Company Address	PO Box 88, Roachda	ale, IN 46172			
Telephone/Fax	Voice: (765) 522-02	40 Data: (765) 522-0244			
Vendor Number	r				
Classification Please Circle One	ILEC CLEC	Cellular PCS			
		Monthly Access Li	ne Data		
	1. Total Access Lines i	n Service			7326
:	2. Surcharge Per Acces	ss Line			0.08
•	3. Amount of Surcharg	ge Remitted to Kentucky USF		\$	557.96
	4. Number of Access L	ines Receiving Lifeline Suppor	t		710
	5. Amount of Reimbur	sement Requested from Kentuc	ky USF	····· 1 \$ 1	2,485.00
		Signature Blo	ock		
I hereby attest that the	e information reported	hereing is true and accurate to t	he best of my knowledge.		
Company Official	Michael Ebaugh	Title: Senior Accountant	Company Official	mi	chael Ebaugh
	(Printed)				(Signed)
		=			
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State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Capitol Annex, Room 488A Frankfort, KY 40601

DATE: May 2, 2014

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

Revised 03-13-2008

PLEASE NOTE:



DATE:June 5. 2014_					Reporting Mo	nth:	1ay-14	
		Carri	er Informat	tion				
Company Name	Leslie County Teleph	one						
Company Address	PO Box 88, Roachda	le, IN 46172						
Telephone/Fax	Voice: (765) 522-024	0 Data: (765) 522	2-0244					
Vendor Number								
lot 'c' .:								
Classification Please Circle One	ILEC) CLEC	Cellular PC	CS					
		Monthly	Access Line	e Data				
1.	Total Access Lines in	1 Service					7275	
2.	2. Surcharge Per Access Line						0.08	
3.	Amount of Surcharge	Remitted to Kentuc	cky USF			\$	546.44	
4.	Number of Access Li	nes Receiving Lifeli	ine Support				701	
5.	Amount of Reimburs	ement Requested fro	om Kentuck	v USF		\$	2,453.50	
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			·					
		Sig	gnature Bloc	k				
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		ioromg is true and an	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Company Official 1	Michael Ebaugh	Title: Senior Acc	countant	Company	Official	Mich	<u>rel Ebaugh</u>	
	(Printed)						(Signed)	
Make Check payable to	· "Ventucky	1			Send a copy o	f this range	rt to:	
State Treasurer" and ser					Selia a copy o	i uns iepoi	11 10.	
and send with this report					Kentucky Pub	lic Service	Commission	
Finance & Administrati					ATTN: Jim S			
Fax: Sue Casey - 502-5	64-7882				211 Sower Bl	vd.		
ATTN: KY USF					PO Box 615			
702 Capital Ave					Frankfort, KY	40602		

PLEASE NOTE:

702 Capital Ave Capitol Annex, Room 488A Frankfort, KY 40601

Revised 03-13-2008



DATE: <u>July 8, 2014</u>					Reporting M	iontn:	Jun-14
			Carrier Informa	tion			
Company Name	Leslie County Telep		arrier Intorma	tion			
Company Address	PO Box 88, Roach						
Telephone/Fax	Voice: (765) 522-02) 522-0244				
Vendor Number		Data: (1.00	<u> </u>				
Classification Please Circle One	ILEC CLEC	Cellular	PCS				
		Mor	nthly Access Lin	e Data			
1.	Total Access Lines	in Service				_	7372
2.	Surcharge Per Acce	ess Line				_	0.08
3.	Amount of Surchar	ge Remitted to K	entucky USF			_\$	561.87
4.	Number of Access	Lines Receiving I	Lifeline Support				692
5.	Amount of Reimbu	rsement Requeste	ed from Kentuck	y USF		\$	2,422.00
			Signature Bloc	k			
I hereby attest that the	information reported	hereing is true a	nd accurate to th	e best of my	knowledge.		
Company Official	Michael Ebaugh	Title: Senio	r Accountant	Company	Official	m	ichael Ebaugh
	(Printed)						(Signed)
Make Check payable to	o: "Kentucky	7			Send a copy	of this re	eport to:
State Treasurer" and se	end with this				Joing a copy	01 01110 11	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
and send with this repo							vice Commission
	JUH-100Z						
Finance & Administrat Fax: Sue Casey - 502- ATTN: KY USF	tion Cabinet				ATTN: Jim 211 Sower I PO Box 615	Stevens Blvd.	vice Commission

Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:

702 Capital Ave

Capitol Annex, Room 488A Frankfort, KY 40601



DATE: August 4, 20	014	_		Repor	ting Month:	Jul-14
	I		er Informat	ion		
Company Name	Leslie County Tele				_	
Company Address	PO Box 88, Roacho					
Telephone/Fax	Voice: (765) 522-0	240 Data: (765) 522	2-0244		_	
Vendor Number						
Classification Please Circle One (ILEC CLEC	Cellular PC	CS			
		Monthly	Access Line	e Data		
1	. Total Access Lines	in Service				7479
2	. Surcharge Per Acco	ess Line				0.08
3	. Amount of Surchar	ge Remitted to Kentu	cky USF		_\$	531.85
4	. Number of Access	Lines Receiving Lifel	ine Support			636
5	. Amount of Reimbu	rsement Requested fr	om Kentuck	y USF	\$	2,226.00
		Sig	gnature Bloc	k		
I hereby attest that the	information reported	I hereing is true and a	ccurate to the	e best of my knowle	edge.	
Company Official	Michael Ebaugh	Title: Senior Ac	countant	Company Officia	1 <u>M</u>	<u>lichael Ebaugh</u>
	(Printed)					(Signed)
					6.1.	
Make Check payable t State Treasurer" and s				Send	a copy of this r	eport to:
and send with this rep				Kentu	cky Public Ser	vice Commission
Finance & Administra					I: Jim Stevens	
Fax: Sue Casey - 502-				211 S	ower Blvd.	
ATTN: KY UŚF				PO Bo	ox 615	

Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:

702 Capital Ave Capitol Annex, Room 488A Frankfort, KY 40601



DATE: September 5, 2014			Reporting Month	Aug-14	
	i	Carrier Informat	ion		
Company Name	Leslie County Telephone		W		
Company Address	PO Box 88, Roachdale, IN 4	6172			
Telephone/Fax	Voice: (765) 522-0240 Dat	a: (765) 522-0244			
Vendor Number					
Classification Please Circle One (ILEC CLEC Cell	ular PCS			
		Monthly Access Line	Data		
		•			
1	Total Access Lines in Servic	e		7197	
2	Surcharge Per Access Line			80.0	
3	Amount of Surcharge Remitt	ed to Kentucky USF		\$ 543.30	
4	Number of Access Lines Rec	ceiving Lifeline Support		520_	
5	Amount of Reimbursement I	Requested from Kentucky	USF.	1,820.00	
		SignatureBlock	:		
I hereby attest that the	information reported hereing i	s true and accurate to the	best of my knowledge.		
Company Official	Michael Ebaugh Title:	Senior Accountant	Company Official	Michael Ebaugh	
	(Printed)			(Signed)	
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Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: October 6. 20	14	<u>-</u>			Reporting Month:	Se	p-14
		(Carrier Informa	tion			
Company Name	Leslie County Teleph	ione					
Company Address	PO Box 88, Roachda	le, IN 46172					
Telephone/Fax	Voice: (765) 522-024	0 Data: (76	5) 522-0244				· · · · · · · · · · · · · · · · · · ·
Vendor Number							
Classification	~						
Please Circle One	ILEC) CLEC	Cellular	PCS				
		Mo	onthly Access Lin	e Data			
1.	Total Access Lines in	Service					7307
2.	Surcharge Per Acces	s Line					0.08
3. Amount of Surcharge Remitted to Kentucky USF				\$	530.18		
4. Number of Access Lines Receiving Lifeline Support						542	
5	Amount of Reimburs	ement Request	ted from Kentuck	y USF		\$	1,897.00
			Signature Bloc	k			
I hereby attest that the ir	nformation reported h	ereing is true a	and accurate to th	e best of my	knowledge.		
	·	-		•	-	ena. 1	
Company Official N	/lichael Ebaugh	Title: Senio	or Accountant	Company	Official	Michae	el Ebaugh
	(Printed)						(Signed)
Make Check payable to:	"Kentucky				Send a copy of thi	s report	to
State Treasurer" and sen						•	
and send with this repor					Kentucky Public S		Commission
Finance & Administration					ATTN: Jim Steve	ens	
Fax: Sue Casey - 502-50 ATTN: KY USF	64-7882				211 Sower Blvd. PO Box 615		
702 Capital Ave					Frankfort, KY 40	602	
Capitol Annex, Room 48	88A				1.41111011,111 40	00 2	
Frankfort, KY 40601							

Revised 03-13-2008



Monthly Access Line Data 1. Total Access Lines in Service 2. Surcharge Per Access Line 3. Amount of Surcharge Remitted to Kentucky USF 5. Amount of Surcharge Receiving Lifeline Support 5. Amount of Reimbursement Requested from Kentucky USF 6. Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	DATE: _November 13. 2014		Reporting Mont	1: Oct-14
Company Name Company Address Telephone/Fax Vendor Number Classification Please Circle One ILEC CLEC Cellular PCS Monthly Access Line Data 1. Total Access Lines in Service 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 5. Amount of Reimbursement Requested from Kentucky USF 1. Total Access Lines Receiving Lifeline Support Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title; Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: Yi USF Frankfort, KY USF Frankfort, KY 40602				
Company Address Telephone/Fax 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 6. Amount of Reimbursement Requested from Kentuck		Carrier Informa	tion	
Voice: (765) 522-0240 Data: (765) 522-0244	Company Name Leslie County Telep	hone		
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 6. Signature Block 1. Hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY USF Frankfort, KY 40602	Company Address PO Box 88, Roachd			
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 536 5. Amount of Reimbursement Requested from Kentucky USF Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Wichael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: State Treasurer and send with this and send with this report to: Tinance & Administration Cabinet Fax: Suc Casey - 502-564-7882 ATTN: XY USF ATTN: XY USF Frankfort, KY 40602	Telephone/Fax Voice: (765) 522-02			
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 536 5. Amount of Reimbursement Requested from Kentucky USF 5 interest Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY USF 702 Capital Ave	Vendor Number			
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 536 5. Amount of Reimbursement Requested from Kentucky USF 5 interest Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY USF 702 Capital Ave				
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 536 5. Amount of Reimbursement Requested from Kentucky USF Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Title: Senior Accountant Company Official Michael Ebaugh (Signed) Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602		Cellular PCS		
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 6. Amount of Reimbursement Requested from Kentucky USF 7. Amount of Reimbursement Requested from Kentucky USF 8. 1,876.00 Michael Ebaugh (Printed) 6. Send a copy of this report to: 8. Kentucky Public Service Commission 8. ATTN: Jim Stevens 9. ATTN: Jim Stevens 9. 211 Sower Blvd. 9. ATTN: Jim Stevens 9. 211 Sower Blvd. 9. PO Box 615 9. PO Box 615 9. PO Box 615 9. Frankfort, KY 40602		Monthly Access Lin	ne Data	
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 6. Amount of Reimbursement Requested from Kentucky USF 7. Amount of Reimbursement Requested from Kentucky USF 6. Amount of Reimbursement Requested from Kentucky USF 7. Amount				
3. Amount of Surcharge Remitted to Kentucky USF 4. Number of Access Lines Receiving Lifeline Support 536 5. Amount of Reimbursement Requested from Kentucky USF Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky (Signed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	1. Total Access Lines i	n Service		7175
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 hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Wichael Ebaugh (Printed) Make Check payable to: "Kentucky (Signed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. ATTN: KY USF PO Box 615 Frankfort, KY 40602	2. Surcharge Per Acces		0.08	
Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Signature Block Signature Block Signature Block Send a copy of finis report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	3. Amount of Surcharg	\$ 536.14		
Signature Block I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky (Signed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Signature Block Kenpany Official Michael Ebaugh (Signed) Kentucky Public Service Commission ATTN: Jim Stevens Fax: Sue Casey - 502-564-7882 ATTN: KY USF Frankfort, KY 40602	4. Number of Access L	536		
I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh (Printed) Company Official Michael Ebaugh (Signed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens Fax: Sue Casey - 502-564-7882 ATTN: KY USF PO Box 615 Frankfort, KY 40602	5. Amount of Reimbur	sement Requested from Kentuck	sy USF	\$ 1,876.00
I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh (Printed) Company Official Michael Ebaugh (Signed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens Fax: Sue Casey - 502-564-7882 ATTN: KY USF PO Box 615 Frankfort, KY 40602				
I hereby attest that the information reported hereing is true and accurate to the best of my knowledge. Company Official Michael Ebaugh (Printed) Company Official Michael Ebaugh (Signed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens Fax: Sue Casey - 502-564-7882 ATTN: KY USF PO Box 615 Frankfort, KY 40602				
Company Official Michael Ebaugh (Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Title: Senior Accountant Company Official Michael Ebaugh (Signed) Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602		Signature Bloc	CK	
(Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	I hereby attest that the information reported	hereing is true and accurate to th	ne best of my knowledge.	
(Printed) Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	Company Official Michael Ebaugh	Title: Senior Accountant	Company Official	Michael Shough
Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Kentucky Public Service Commission ATTN: Jim Stevens Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Send a copy of this report to: Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602		Title. Selliof Accountant	Company Official	
State Treasurer" and send with this and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	(r miles)			(5.6.164)
State Treasurer" and send with this and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Kentucky Public Service Commission ATTN: Jim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602	Make Check payable to: "Kentucky	1 .	Send a copy of t	his report to:
Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave ATTN: Sim Stevens 211 Sower Blvd. PO Box 615 Frankfort, KY 40602			Bona a copy or c	ins report to.
Fax: Sue Casey - 502-564-7882 211 Sower Blvd. ATTN: KY USF PO Box 615 702 Capital Ave Frankfort, KY 40602	and send with this report to:			
ATTN: KY USF PO Box 615 702 Capital Ave Prankfort, KY 40602				
702 Capital Ave Frankfort, KY 40602				
				0.500
Ci4-1 A D 400 A			Frankfort, KY 4	0602
Capitol Annex, Room 488A Frankfort, KY 40601				

Revised 03-13-2008



DATE: <u>December 4.</u>	2014]	Reporting Month:	N	lov-14
_							
	1	C	Carrier Informat	ion			
Company Name	Leslie County Teleph	one					
Company Address	PO Box 88, Roachda	le, IN 46172					
Telephone/Fax	Voice: (765) 522-024	10 Data: (765	5) 522-0244				
Vendor Number							
			•				
Classification Please Circle One	ILEC CLEC	Cellular	PCS				
		Mo	nthly Access Line	e Data			
1.	Total Access Lines in	1 Service					7259
2 Surcharge Per Access Line 0.08					0.08		
3.	Amount of Surcharge	Remitted to K	entucky USF			\$	544.11
4.	Number of Access L	nes Receiving	Lifeline Support				550
5.	Amount of Reimburs	ement Request	ed from Kentuck	USF		\$	1,925.00
			Signature Bloc	k			
I hereby attest that the	information reported h	ereing is true a	and accurate to the	e best of my k	nowledge.		
Company Official	Michael Ebaugh	Title: Senio	or Accountant	Company C	Official	Michi	rel Ebaugh
	(Printed)						(Signed)
Make Check payable to	o: "Kentucky			Γ	Send a copy of the	is repo	rt to:
1 - 1		4			1,7		

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Capitol Annex, Room 488A Frankfort, KY 40601

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

Revised 03-13-2008

PLEASE NOTE:



DATE: January 2, 2015	_	Reporting Month	:Dec-14	
	Carrier Informa	tion		
Company Name Leslie County Tele	phone			
Company Address PO Box 88, Roach				
Telephone/Fax Voice: (765) 522-0	240 Data: (765) 522-0244			
Vendor Number				
Classification				
Please Circle One ILEC CLEC	Cellular PCS			
	Monthly Access Lin	e Data		
1. Total Access Lines	in Service		7187	
2. Surcharge Per Acco		0.08		
3. Amount of Surchar	\$ 538.44			
4. Number of Access Lines Receiving Lifeline Support 547				
5. Amount of Reimbu	rsement Requested from Kentuck	y USF	\$ 1,914.50	
	Signature Bloo	:k		
I hereby attest that the information reported	I hereing is true and accurate to th	e best of my knowledge.		
Company Official Michael Ebaugh	Title: Senior Accountant	Company Official	Michael Ebaugh	
(Printed)			(Signed)	
		•		
Make Check payable to: "Kentucky		Send a copy of th	nis report to:	
State Treasurer" and send with this				
and send with this report to: Finance & Administration Cabinet		Kentucky Public ATTN: Jim Stev	Service Commission	
Fax: Sue Casey - 502-564-7882		211 Sower Blvd.		
ATTN: KYUSF		PO Box 615		
702 Capital Ave		Frankfort, KY 40	0602	
Capitol Annex, Room 488A				
Frankfort, KY 40601		Daniard 02 12 20	000	

PLEASE NOTE:

Revised 03-13-2008



DATE: February 12, 2015		Reporting Mont	h: Jan-15				
	Carrier Informa	tion					
Company Name Leslie County Teleph		tion					
	Company Address PO Box 88, Roachdale, IN 46172						
Telephone/Fax Voice: (765) 522-0240 Data: (765) 522-0244							
Vendor Number	10 Data. (703) 322-0244						
Vendoi Number							
Classification Please Circle One ILEC CLEC	Cellular PCS						
	Monthly Access Lin	ne Data					
Total Access Lines in	1 Service		7102				
2. Surcharge Per Acces	0.08						
Amount of Surcharge Remitted to Kentucky USF \$ 540.							
4. Number of Access Lines Receiving Lifeline Support543							
5. Amount of Reimburs	sement Requested from Kentuck	y USF	\$ 1,900.50				
	Signature Blo	~k					
	Digitative Bio						
I hereby attest that the information reported h	nereing is true and accurate to th	e best of my knowledge.					
Commons Official Michael Ehoyah	Titles Coming Assessment	Commons Official	Michael Ebaugh				
Company Official Michael Ebaugh (Printed)	Title: Senior Accountant	Company Official	(Signed)				
(1 inited)			(Bigliou)				
Make Check payable to: "Kentucky		Send a copy of	his report to:				
State Treasurer" and send with this and send with this report to: Kentucky Public Service Commissi							
Finance & Administration Cabinet		ATTN: Jim Ste	vens				
Fax: Sue Casey - 502-564-7882		211 Sower Blvd	l.				
ATTN: KY USF 702 Capital Ave		PO Box 615 Frankfort, KY	10602				
Capital Annex, Room 488A		FIAIIKIOF, KY	10002				
Frankfort, KY 40601		D i d 02 12 1					

PLEASE NOTE:

Revised 03-13-2008



DATE:March 5. 20	15	-	Reporting Month	r Feb-15
1				
	1	Carrier Inform	nation	
Company Name	Leslie County Tele			· · · · · · · · · · · · · · · · · · ·
Company Address	PO Box 88, Roach	dale, IN 46172		
Telephone/Fax	Voice: (765) 522-0	240 Data: (765) 522-0244		
Vendor Number				
Classification Please Circle One (ILEC CLEC	Cellular PCS		
		Monthly Access L	ine Data	
1	. Total Access Lines	in Service		7210
2	. Surcharge Per Acco	ess Line		
3.	. Amount of Surchar	ge Remitted to Kentucky USF		\$ 539.27
4.	Number of Access	Lines Receiving Lifeline Suppo	ort	542
5	Amount of Reimbu	rsement Requested from Kentu	cky USF	1,897.00
		Signature Bl	ock	
I hereby attest that the	information reported	hereing is true and accurate to	the best of my knowledge.	
Company Official	Michael Ebaugh (Printed)	Title: Senior Accountant	Company Official	<u>Michael Ebauqh</u> (Signed)
Make Check payable to	o: "Kentucky	\neg	Send a copy of the	his report to:
State Treasurer" and se			Denia a copy of ti	ποτοροίτιο.
and send with this repo				Service Commission
Finance & Administra			ATTN: Jim Stev	
Fax: Sue Casey - 502-	564-7882		211 Sower Blvd.	
ATTN: KYUSF			PO Box 615	0602
702 Capital Ave			Frankfort, KY 4	0002

Revised 03-13-2008

PLEASE NOTE:

Capitol Annex, Room 488A Frankfort, KY 40601



7113
0.08
\$ 547.82
545
1,907.50
lge.
Michael Ebaugh (Signed)

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: May 1, 2015		Reporting Month:	Apr-15
	Carrier Inform	nation	
Company Name	Leslie County Telephone		
Company Address	PO Box 88, Roachdale, IN 46172		
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244		
Vendor Number			
01 '6" '			
Classification Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access L	ine Data	
1.	Total Access Lines in Service		7268
2.	Surcharge Per Access Line		0.08
3.	Amount of Surcharge Remitted to Kentucky USF		\$ 537.71
4.	Number of Access Lines Receiving Lifeline Suppo	ort	546
5.	Amount of Reimbursement Requested from Kentu	cky USF ····	\$ 1,911.00
	Signature Bl	ock	
I hereby attest that the	information reported hereing is true and accurate to	the best of my knowledge.	
Company Official	Michael Ebaugh Title: Senior Accountant (Printed)	Company Official	Michael Ebaugh (Signed)
	(* ********)		(Digited)

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KYUSF 702 Capital Ave Capitol Annex, Room 488A

Send a copy of this report to:

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

Revised 03-13-2008

PLEASE NOTE:

Frankfort, KY 40601



DATE: _June 2. 2015	S Reporting I	Month:	May-15
	Carrier Information		
Company Name	Leslie County Telephone		
Company Address	PO Box 88, Roachdale, IN 46172		
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244		
Vendor Number			
'-			

Classification						
Please Circle One	(ILEC)	CLEC	Cellular	PCS		

Monthly Access Line Data	
1. Total Access Lines in Service	7126
2. Surcharge Per Access Line	80.0
3. Amount of Surcharge Remitted to Kentucky USF	\$ 540.09
4. Number of Access Lines Receiving Lifeline Support	530
5. Amount of Reimbursement Requested from Kentucky USF	\$ 1,855.00

Signature Block						
I hereby attest that the	I hereby attest that the information reported hereing is tr e and accurate to the best of my knowledge.					
Company Official	Michael Ebaugh (Printed)	Title: Senior Accountant	Company Official	Michael Ebaugh (Signed)		

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

$\label{eq:pleasenote:pleasenote:pleasenote:} PLEASE\,NOTE:$



DATE: <u>July 8, 2015</u>			Reporting M	onth:	Jun-15	
	-	Carrier Informa	ition			
Company Name	Leslie County Teleph	none				
Company Address	PO Box 88, Roachda	le, IN 46172				
Telephone/Fax	Voice: (765) 522-024	10 Data: (765) 522-0244				
Vendor Number						
Classification Please Circle One	ILEC CLEC	Cellular PCS				
		Monthly Access Lir	ne Data			
1.	. Total Access Lines in	ı Service			7134	
2.	. Surcharge Per Acces	s Line		_	80.0	
3.	. Amount of Surcharg	e Remitted to Kentucky USF		_\$_	534.44	
4.	. Number of Access L	ines Receiving Lifeline Support	t		528	
5.	. Amount of Reimburs	ement Requested from Kentucl	ky USF	\$	1,848.00	
		Signature Blo	ck			
I hereby attest that the	information reported l	nereing is true and accurate to the	ne best of my knowledge.			
Company Official	Michael Ebaugh (Printed)	Title: Senior Accountant	Company Official	m	ichael Ebaugh (Signed)	1
Make Check payable t State Treasurer" and se and send with this repo	end with this		Send a copy		eport to:	

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 ATTN: KY USF 702 Capital Ave Capitol Annex, Room 488A Frankfort, KY 40601

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

Revised 03-13-2008

PLEASE NOTE:



DATE: August 4, 20	015	Reporting Month:	Jul-15
	Carrier Information		
Company Name	Leslie County Telephone		
Company Address	PO Box 88, Roachdale, IN 46172		
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244	4	
Vendor Number			
Classification Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access Line Data		
1.	Total Access Lines in Service	_	7079
2.	Surcharge Per Access Line		80.0
3.	Amount of Surcharge Remitted to Kentucky USF	_\$	525.69
4.	Number of Access Lines Receiving Lifeline Support		438
5.	Amount of Reimbursement Requested from Kentucky USF	\$	1,533.00
	Signature Block		

Signature Block						
I hereby attest that the information reported hereing is true and accurate to the best of my knowledge.						
Company Official	Michael Ebaugh (Printed)	Title: Senior Accountant	Company Official	Michael Ebaugh (Signed)		

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: September 8,	, 2015 Reporting	Month: Aug	;-15			
	Carrier Information					
Company Name	Leslie County Telephone					
Company Address	PO Box 88, Roachdale, IN 46172					
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244					
Vendor Number						
Classification Please Circle One	ILEC CLEC Cellular PCS					
	Monthly Access Line Data					
	Total Access Lines in Service Surcharge Per Access Line		7049 0.08			
3.	Amount of Surcharge Remitted to Kentucky USF	_\$	524.05			
4.	Number of Access Lines Receiving Lifeline Support		446			
5.	Amount of Reimbursement Requested from Kentucky USF	\$ 1,	,561.00			

Signature Block					
I hereby attest that the	hereby attest that the information reported hereing is true and accurate to the best of my knowledge.				
Company Official	Michael Ebaugh	Title: Senior Accountant	Company Official	<u>Michael Ebaugh</u>	
	(Printed)			(Signed)	

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: _October 5. 20	015 Reporting Mont	h:	Sep-15
	Carrier Information		
Company Name	Leslie County Telephone		
Company Address	PO Box 88, Roachdale, IN 46172		
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244		
Vendor Number			
Classification			
Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access Line Data		
·			
1.	Total Access Lines in Service	_	7022
2.	Surcharge Per Access Line		0.08
3.	Amount of Surcharge Remitted to Kentucky USF	_\$_	525.21
4.	Number of Access Lines Receiving Lifeline Support		449
5.	Amount of Reimbursement Requested from Kentucky USF	\$	1,571.50
	Signature Block		
I hereby attest that the i	information reported hereing is true and accurate to the best of my knowledge.		
Company Official	Michael Ebaugh Title: Senior Accountant Company Official	mi	chael Ebaugh
	(Printed)		(Signed)

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: November 2.	, 2015	Reporting Month:	Oct-15
	Carrier Information		
Company Name	Leslie County Telephone		
Company Address	PO Box 88, Roachdale, IN 46172		
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244		
Vendor Number			
Classification Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access Line Data		
1.	Total Access Lines in Service	_	6956
2.	Surcharge Per Access Line		0.08
3.	Amount of Surcharge Remitted to Kentucky USF		522.32
4.	Number of Access Lines Receiving Lifeline Support		454
5.	Amount of Reimbursement Requested from Kentucky USF	· · · · · · · · · · · · · · · · · · ·	1,589.00
L			

	Signature Blo	ck			
I hereby attest that the information reported hereing is true and accurate to the best of my knowledge.					
Company Official Michael Ebaugh Title: Senior Accountant Company Official Michael Ebaugh (Printed) (Signed)					

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: December 1, 2015		Reporting Month:	Nov-15
	Carrier Inform	ation	
Company Name Leslie Cou	ınty Telephone		
Company Address PO Box 83	8, Roachdale, IN 46172		
Telephone/Fax Voice: (76	55) 522-0240 Data: (765) 522-0244		
Vendor Number			
In 10			
Classification Please Circle One ILEC	CLEC Cellular PCS		
	Monthly Access L	ine Data	
1. Total Acc	ess Lines in Service		7009
2. Surcharge	Per Access Line		0.08
3. Amount o	f Surcharge Remitted to Kentucky USF		\$ 524.12
4. Number o	f Access Lines Receiving Lifeline Support	rt	453
5. Amount o	f Reimbursement Requested from Kentuc	cky USF	\$ 1,585.50
	Signature Blo	ock	
I hereby attest that the information	reported hereing is true and accurate to	the best of my knowledge.	
Company Official Michael Et	paugh Title: Senior Accountant	Company Official	Michael Ebaugh
(Printe	ed)		(Signed)
Make Check payable to: "Kentuck	ку	Send a copy of th	is report to:
State Treasurer" and send with thi	s		•
and send with this report to:			Service Commission
Finance & Administration Cabine Fax: Sue Casey - 502-564-7882	¹	ATTN: Jim Steve 211 Sower Blvd.	ens
ATTN: KY USF		PO Box 615	
702 Capital Ave		Frankfort, KY 40	0602

Revised 03-13-2008

PLEASE NOTE:

Capitol Annex, Room 488A Frankfort, KY 40601



JATE. January 4, 20) 0	Reporting Month:	Dec-15
	Carrier Information		
Company Name	Leslie County Telephone		
• •	PO Box 88, Roachdale, IN 46172	100 00	
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244		
Vendor Number			
n 'm .'			
Classification Please Circle One	ILEC CLEC Cellular PCS		
	Monthly Access Line Data		
1.	Total Access Lines in Service	_	6977
2.	Surcharge Per Access Line	_	0.08
3.	Amount of Surcharge Remitted to Kentucky USF		\$ 528.54
4.	Number of Access Lines Receiving Lifeline Support	_	451
5.	Amount of Reimbursement Requested from Kentucky USF		1,578.50
	Signature Block		

Signature Block				
I hereby attest that the information reported hereing is true and accurate to the best of my knowledge.				
Company Official	Michael Ebaugh	Title: Senior Accountant	Company Official	Michael Ebaugh
	(Printed)			(Signed)

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE:	February 1, 2016	Reporting Month	Jan-16	
2	1 001 000 1, 2010	**************************************	UMII I U	

Carrier Information				
Company Name	Leslie County Telephone			
Company Address	PO Box 88, Roachdale, IN 46172			
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244			
Vendor Number				

Classification
Please Circle One ILEC CLEC Cellular PCS

 Monthly Access Line Data				
 1. Total Access Lines in Service	6903			
2. Surcharge Per Access Line	0.08			
3. Amount of Surcharge Remitted to Kentucky USF	\$ 523.68			
4. Number of Access Lines Receiving Lifeline Support	436			
5. Amount of Reimbursement Requested from Kentucky USF	\$ 1,526.00			

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

Make Check payable to: "Kentucky State Treasurer" and send with this and send with this report to: Finance & Administration Cabinet Fax: Sue Casey - 502-564-7882 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. PO Box 615 Frankfort, KY 40602

Revised 03-13-2008

PLEASE NOTE:



DATE: March 1, 2016 Reporting Month Feb-16

Carrier Information			
Company Name	Leslie County Telephone		
Company Address	PO Box 88, Roachdale, IN 46172		
Telephone/Fax	Voice: (765) 522-0240 Data: (765) 522-0244		
Vendor Number			

Classification
Please Circle One ILEC CLEC Cellular PCS

Monthly Access Line Data	
1. Total Access Lines in Service	6977
2. Surcharge Per Access Line	0.08
3. Amount of Surcharge Remitted to Kentucky USF	\$ 521.41
4. Number of Access Lines Receiving Lifeline Support	444
5. Amount of Reimbursement Requested from Kentucky USF	\$ 1,554.00

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

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

Finance & 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. PO Box 615 Frankfort, KY 40602

Revised 02-15-2016

PLEASE NOTE:



DATE: <u>April 1, 2016</u>)			Reporting Month:	Mar-16	
		Carrier I	nformation			
Company Name	Leslie County Teleph		moi mation			
Company Address PO Box 88, Roachdale, IN 46172						WUNTELL AND
Telephone/Fax Voice: (765) 522-0240 Data: (765) 522-0244						
Vendor Number						
lot is it	•					
Classification Please Circle One	ILEC CLEC	Cellular PCS				
		Monthly Ac	cess Line Data			
Total Access Lines in Service				-	6950	_
2. Surcharge Per Access Line				-	0.08	
3. Amount of Surcharge Remitted to Kentucky USF				_	\$ 533.00	_
4. Number of Access Lines Receiving Lifeline Support				_	447	_
5.	Amount of Reimburs	ement Requested from	Kentucky USF		\$ 1,564.50	
		Signat	ure Block			
I hereby attest that the	information reported h	ereing is true and accur	ate to the best of my	knowledge.		
Company Official	Michael Ebaugh	Title: Accountant	Company Official		Michael Ebaugh	
	(Printed)	-			•	ned)
		1				
Make Check payable to: "Kentucky State Treasurer" and send with this				Send a copy of this	s report to:	
and send with this repo		Kentucky Public Service Commission			on	
			ATTN: Executive Director			
Finance & Administrat ATTN: KY USF	ion Cabinet			211 Sower Blvd. PO Box 615		
702 Capital Ave				Frankfort, KY 400	602	
Capitol Annex, Room	488A					
Frankfort, KY 40601				Davis d 02 15 20	16	

Revised 02-15-2016

PLEASE NOTE: