

Commonwealth of Kentucky Public Service Commission

INFORMATION FORM FOR TELEPHONE UTILITIES OPERATING PURSUANT TO KRS 278.541 through 278.544

Complete Name of Telephone Utility: Value-Added Communications

Physical Address of Principal Office: Street: 12021 Sunset Hills Road, Suite 100
 City: Reston State: VA Zip: 20190

Primary Contact: Name: Brian Hackett Title: Regulatory Compliance Manager
 Phone: (703) 439-1662 Fax: (703) 435-0980
 E-Mail: brian.hackett@gti.net

Person Responsible for Answering Consumer Complaints:	Name: <u>Kathi Tarkir</u> Title: <u>Complaint Analyst</u>
	Address (if different from above)
	Street: _____
	City: _____ State: _____ Zip: _____
	Phone: <u>(703) 439-1663</u> Fax: <u>(703) 435-0980</u>

In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Brian Hackett, on behalf of Value-Added Communications do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 21st day of September, 2016.

UTILITY: Value-Added Communications

BY: *Brian Hackett*

COMMONWEALTH OF Virginia
 COUNTY OF Fairfax

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 21st day of September, 2016.

LISA FURR
 NOTARY PUBLIC
 REG. #7360374
 COMMONWEALTH OF VIRGINIA
 MY COMMISSION EXPIRES JULY 31, 2018

Lisa Furr
 NOTARY PUBLIC

My Commission Expires: 9/21/16

TARIFF BRANCH
RECEIVED
 9/27/2016
 PUBLIC SERVICE
 COMMISSION
 OF KENTUCKY