

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: Vero Fiber Networks, LLC

Physical Address of Principal Office: Street: 1023 Walnut Street

City: Boulder State: CO Zip: 80302

Primary Contact: Name: Gregg Strumberger Title: Chief Legal Officer

Phone: (303) 350-4060 Fax: _____

E-Mail: gstrumberger@veronetworks.com

Person Responsible for Answering Consumer Complaints:	Name: <u>Gregg Strumberger</u> Title: <u>CLO</u>
	Address (if different from above)
	Street: _____
	City: _____ State: _____ Zip: _____
	Phone: _____ Fax: _____

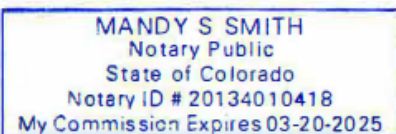
In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, Gregg Strumberger, on behalf of Vero Fiber Networks, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 19th day of March, 2025.


UTILITY: Vero Fiber Networks, LLC

BY: 

STATE OF COLORADO
COUNTY OF BOULDER

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 19th day of March, 2025.




NOTARY PUBLIC

My Commission Expires: March 20, 2025

RECEIVED
3/20/2025
PUBLIC SERVICE
COMMISSION
OF KENTUCKY