Commonwealth of Kentucky Public Service Commission

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

Complete Name of Telephone Utility:	Access Point, Inc.			
Physical Address	Street:	1100 Crescent Green, Suite 109		
of Principal Office:	City:	Cary	State:	NC Zip: 27518
Primary Contact:	Name: Phone: Email:	Jackie Gilpin 919-581-4838 Jackie.gilpin@accesspointinc.com	Title: Fax:	Finance Operations Analyst 919-851-4522
Person Responsible For Answering Consumer Complaints:	Name: Street: City: Phone:	Jackie Gilpin Address (if different from above) 1100 Crescent Green, Suite 109 Cary 919-581-4838	Title: State: Fax:	Finance Operations Analyst NC Zip: 27518 919-851-4522

In accordance with KY 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, Richard E. Brown, on behalf of Access Point, Inc. do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 5 day of August, 2016.

UTILITY:

BY:

Access Point, Inc. Richard E. Brown, CEO

STATE OF North Corolina

COUNTY OF Wake

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

My Commission Expires:

JENUARY 18th 2021

