

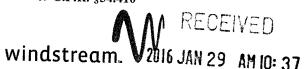
Control Number: 41110



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Annual Re-Certification of Lifeline Subscribers 47 C.F.R. §54.410



4001 Rodney Parham Drive • Little Rock Arganias 782727 COMMISSION (501) 748-7000 FILING CLERK

VIA OVERNIGHT DELIVERY

January 28, 2016

Public Utility Commission of Texas Central Records

1701 N. Congress Ave. Austin, TX 78701

RE: Project 41110, Annual Lifeline Eligible Telecommunications Carrier Certification Form (FCC Form555)

Attached, please find four (4) copies of Windstream Communications Kerrville, LLC.' Annual Lifeline Eligible Telecommunications Carrier Certification Form (FCC Form 555) which was filed with the Universal Service Administrative Company and FCC via online submission on January 26, 2016.

Pursuant to Section 54.410 of the Federal Communications Commission's rules, enclosed is the 2015 annual reporting requirements and certifications for the Study Area Code 442097.

Should you have any questions, please contact me via email at hung.v.tran@windstream.com or by phone at 501-748-5488

Sincerely,

Hung Tran

Analyst-Regulatory Reporting Windstream Communications

(501) 748 5488

hung.v.tran@windstream.com

Enclosures

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

442097	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a ce	rtification form for each SAC through which it provides Lifeline service).
TX	Windstream Communications LLC
State	ETC Name
Windstream Communications Kerrville, LLC	Windstream Communications
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No
	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- oresident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
I certify that the company listed above has certification pro	ocedures in place to:
	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
above.	orized to make this certification for the Study Area Code listed
Initial TL	

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
243	0	8	34	201

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
174	3

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial	

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

Solix. Inc.

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
174	3	1.72%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔼

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online
Signature of Officer
tim.p.loken@windstream.com
Email Address of Officer
Hung V Tran
Person Completing This Certification Form

Tim Loken Director

Printed Name and Title of Officer
01/26/2016
Date
501-748-5488

Contact Phone Number

Affiliated ETCs

441163 Windstream Communications LLC 442097 Windstream Communications LLC 442147 Windstream Communications LLC 442153 Windstream Communications LLC	SAC	Name
442097 Windstream Communications LLC 442147 Windstream Communications LLC		
442147 Windstream Communications LLC	442097	windstream Communications LLC
The state of the s		windstream Communications LLC
Windstream Communications LLC		Windstream Communications LLC
	442133	Windstream Communications LLC