

Annual Reporting for High-Cost Recipients  
47 C.F.R. §54.313(a)(2) through (a)(6) and (h)



4001 Rodney Parham Drive • Little Rock, Arkansas 72212  
(501) 748-7000

June 22, 2015

Ms. Marlene H. Dortch  
Office of the Secretary  
Federal Communications Commission  
445 12th Street SW  
Washington, D.C. 20554

**RE: WC Docket No. 14-58**

Pursuant to Section 54.313 and 54.422 of the Federal Communications Commission's rules enclosed is the 2015 annual report and certifications for Windstream Study Area Code 170162 located in Pennsylvania. A copy of this report is also being filed with the Universal Service Administration Company (USAC), relevant state public service commissions, and tribal governments.

Should you have any questions, please contact me via email at [jeff.l.heacox@windstream.com](mailto:jeff.l.heacox@windstream.com) or by phone at 501-748-5390.

Sincerely,

/s/ Jeff Heacox

Jeff Heacox  
Staff Manager Compliance Reporting

Enclosures

Cc: Applicable State Public Utilities Commissions and Tribal Governments

**FCC Form 481 - Carrier Annual Reporting  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0966/OMB Control No. 3060-0819  
July 2013

<010> Study Area Code	170162
<015> Study Area Name	THE CONESTOGA TEL
<020> Program Year	2016
<030> Contact Name: Person USAC should contact with questions about this data	Jeff Heacox
<035> Contact Telephone Number: Number of the person identified in data line <030>	5017485390 ext.
<039> Contact Email Address: Email of the person identified in data line <030>	jeff.l.heacox@windstream.com

<b>ANNUAL REPORTING FOR ALL CARRIERS</b>	<b>54.313</b>	<b>54.422</b>
	<b>Completion Required</b>	<b>Completion Required</b>

			<i>(check box when complete)</i>	
<100> Service Quality Improvement Reporting	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200> Outage Reporting (voice)	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210>	<input checked="" type="checkbox"/> <- check box if no outages to report	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300> Unfulfilled Service Requests (voice)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310> Detail on Attempts (voice)	<input type="text"/> <i>(attach descriptive document)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330> Detail on Attempts (broadband)	<input type="text"/> <i>(attach descriptive document)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410> Fixed	24.99	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<440> Fixed	27.21	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510>	170162PA510.pdf <i>(attached descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610>	170162PA610.pdf <i>(attached descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710> Company Price Offerings (broadband)	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<800> Operating Companies and Affiliates	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)?	<input type="radio"/> <input checked="" type="radio"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1000> Voice Services Rate Comparability Certification	Yes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010>	170162PA1010.pdf <i>(attach descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1100> Certify whether terrestrial backhaul options exist (Yes or No)	<input checked="" type="radio"/> <input type="radio"/> <i>(if not, check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1110>	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet**

*Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers*

<2000>	<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet**

<3000>	<i>(check to indicate certification)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<3005>	<i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>(100) Service Quality Improvement Reporting Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	170142
<015>	Study Area Name	THE CONESTOGA TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Beaton
<035>	Contact Telephone Number - Number of person identified in data line <030>	501985390 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.j.beaton@windstream.com

<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input checked="" type="radio"/>
<111>	year plan" filed with the FCC?	(yes / no) <input type="radio"/> <input type="radio"/>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

- <113> Maps detailing progress towards meeting plan targets
- <114> Report how much universal service (USF) support was received
- <115> How much (USF) was used to improve service quality and how support was used to improve service quality
- <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage
- <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.










<b>(900) Tribal Lands Reporting</b> <b>Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	170162
<015>	Study Area Name	THE CONESTOGA TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Heacock
<035>	Contact Telephone Number - Number of person identified in data line <030>	5617495390 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.l.heacock@indatream.com

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

<b>(1100) No Terrestrial Backhaul Reporting Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	170162
<015>	Study Area Name	THE COBESTOJA TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Beacox
<035>	Contact Telephone Number - Number of person identified in data line <030>	5017485390 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.1.beacox@windstream.com

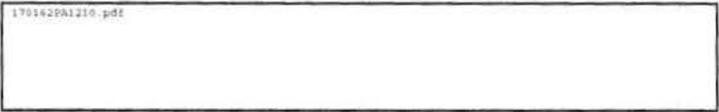
<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No)

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

<b>(1200) Terms and Condition for Lifeline Customers</b> Lifeline Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	170142
<015>	Study Area Name	THE CONESTOGA TEL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Heacock
<035>	Contact Telephone Number - Number of person identified in data line <030>	501748330 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.j.heacock@windstream.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans



Name of Attached Document

<1220> Link to Public Website

HTTP: <http://www.windstream.com/About-Us/Lifeline-Assistance-Program/>

\*Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,
- <1222> Details on the number of minutes provided as part of the plan,
- <1223> Additional charges for toll calls, and rates for each such plan.



<b>(3000) Rate Of Return Carrier Additional Documentation</b> Data Collection Form	FCC Form 481
	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010> Study Area Code	170162
<015> Study Area Name	THE CORPUSCOGA TEL
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Jeff Rogers
<035> Contact Telephone Number - Number of person identified in data line <030>	5017485370 ext
<039> Contact Email Address - Email Address of person identified in data line <030>	jeff.j.rogers@corpuscogatel.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan  
Milestone Certification (47 CFR § 54.313(f)(3))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) (Yes/No)  Yes  No

(3014) If yes, does your company file the RUS annual report. (Yes/No)  Yes  No

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited? (Yes/No)  Yes  No

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains

(3019) Either a copy of their audited financial statement, or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3021) Management letter and audit opinion issued by the independent certified public accountant that performed the company's financial audit

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.

(3023) Underlying information subjected to a review by an independent certified public accountant

(3024) Underlying information subjected to an officer certification

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

<b>(3000) Rate Of Return Carrier Additional Documentation (Continued)</b> Data Collection Form	FCC Form 481
	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010> Study Area Code	170162
<015> Study Area Name	THE ONTARIO TEL
<020> Program Year	2016
<040> Contact Name - Person THAT should contact regarding this data	Jeff Heacock
<015> Contact Telephone Number - Number of person identified in data line <040>	503 7485390 ext
<015> Contact Email Address - Email Address of person identified in data line <040>	jeff.l.heacock@roldatram.com

**Financial Data Summary**

(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

Name of Attached Document Listing Required Information

<b>Certification - Reporting Carrier Data Collection Form</b>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	170162
<015> Study Area Name	THE CONESTOGA TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Jeff Heacox
<035> Contact Telephone Number - Number of person identified in data line <030>	5017485390 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	jeff.l.heacox@windstream.com

**TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:**

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	THE CONESTOGA TEL
Signature of Authorized Officer:	CERTIFIED ONLINE <span style="float: right;">Date 06/19/2015</span>
Printed name of Authorized Officer:	Tim Loken
Title or position of Authorized Officer:	Director
Telephone number of Authorized Officer:	5017487442 ext.
Study Area Code of Reporting Carrier:	170162 <span style="float: right;">Filing Due Date for this form: 07/01/2015</span>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

<b>Certification - Agent / Carrier</b> Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	170162
<015>	Study Area Name	THE ONESTOGA TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Heacox
<035>	Contact Telephone Number - Number of person identified in data line <030>	5017485390 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.l.heacox@windstream.com

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:**

<b>Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent: _____	
Name of Reporting Carrier: _____	
Signature of Authorized Officer: _____	Date: _____
Printed name of Authorized Officer: _____	
Title or position of Authorized Officer: _____	
Telephone number of Authorized Officer: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

**TO BE COMPLETED BY THE AUTHORIZED AGENT:**

<b>Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier</b>	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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## Attachments

Line 510-Description of Compliance with Service Quality Standards and Consumer Protection:

**Voice Certification:**

Windstream certifies that we comply with applicable service quality standards and consumer protection rules as required by the state regulatory commission and the Federal Communications Commission.

1. Service quality metrics are monitored and reviewed each month
2. Windstream is founded on integrity. All employees are required to complete a course on integrity each year.
3. Windstream employees have at their disposal our People Practices Overview Course which is a general overview of the guidelines that govern all Windstream employees.
4. Windstream's Customer Proprietary Network Information (CPNI) training manual documents when personnel are, and are not, authorized to use CPNI. This Manual constitutes Windstream's policies and procedures related to CPNI. All employees are required to follow the policies and procedures specified in this manual.
5. Windstream IT has in place numerous measures to insure the integrity of the network and the customer data that resides on the network. The network is monitored 24/7 and periodic reviews of the security processes are performed.
6. Windstream makes every attempt to achieve one-call resolution on customer invoice issues.
7. Windstream has developed a program to help spot the Red Flags of identity theft, which is consistent with the FTC's guidelines, and has procedures in place to mitigate the potential damage of identity theft.
8. Windstream has implemented our Customer Account Protection Plan (CAPP) to provide increased security against unauthorized changes (cramming) to customer accounts. This plan requires third-party carriers to have a customers Passcode to change the customer's service or access the customers account information.

Line 510-Continued:

**Broadband Certifications**

Windstream certifies that it complies with applicable service quality standards, if any, and consumer protection rules as required by the state regulatory commission and the Federal Communications Commission.

Specifically:

1. All Windstream employees are required to complete a security awareness training every year.

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2. Windstream's Customer Proprietary Network Information (CPNI) training manual documents when personnel are, and are not, authorized to use CPNI. This Manual constitutes Windstream's policies and procedures related to CPNI. All employees are required to follow the policies and procedures specified in this manual.
3. Windstream IT has in place numerous measures to insure the integrity of the network and the customer data that resides on the network. The network is monitored 24/7 and periodic reviews of the security processes are performed.
4. Windstream has developed a program to help spot the Red Flags of identity theft, which is consistent with the FTC's guidelines, and has procedures in place to mitigate the potential damage of identity theft.

## Line 610 – Description of Functionality in Emergency Situations

### Voice:

Windstream certifies that it is compliant with applicable rules on service provision in emergency situations. Windstream central offices are designed to withstand limited commercial power failures through the use of emergency batteries supplemented by on site or portable generators. Windstream personnel perform routine maintenance on this essential equipment based on the manufacturer's service recommendations and Windstream service practices. The backup batteries are load tested routinely and the on site generators are tested monthly.

Windstream's network is engineered to handle traffic spikes that can occur as the result of emergency situations. The network is monitored 24/7 by our Network Operations Center ensuring quick response whenever and where ever it is needed. Network redundancy is built into our network where ever possible to ensure alternate routing is available when necessary.

### Broadband:

Windstream certifies that it is compliant with applicable rules on service provision in emergency situations. Windstream central offices are designed to withstand limited commercial power failures through the use of emergency batteries supplemented by on site or portable generators. Windstream personnel perform routine maintenance on this essential equipment based on the manufacturer's service recommendations and Windstream service practices. The backup batteries are load tested routinely and the on site generators are tested monthly.

**(700) Price Offerings Including Voice Rate Data  
Data Collection Form**

FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010> Study Area Code: T90142  
 <015> Study Area Name: THE CONESTOGA TEL  
 <020> Program Year: 2016  
 <030> Contact Name - Person USAC should contact regarding this data: Jeff Heacock  
 <035> Contact Telephone Number - Number of person identified in data line <030>: 5617485396 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030>: jeff.l.heacock@windstream.com

<701> Residential Local Service Charge Effective Date: 1/1/2015  
 <702> Single State-wide Residential Local Service Charge:

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CEC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
PA	BALLY		FR	16.02	0.0	0.0	0.0	16.02
PA	BIRDSBORO		FR	16.02	0.0	0.0	0.0	16.02
PA	BOYERTOWN		FR	16.02	0.0	0.0	0.0	16.02
PA	DOUGLASSVILLE		FR	17.03	0.0	0.0	0.0	17.03
PA	GREEN HILLS		FR	16.02	0.0	0.0	0.0	16.02
PA	MORGANTOWN		FR	16.02	0.0	0.0	0.0	16.02
PA	OLEY		FR	16.02	0.0	0.0	0.0	16.02
PA	SASSAMANSVILLE		FR	15.12	0.0	0.0	0.0	15.12
PA	TOPTON		FR	17.03	0.0	0.0	0.0	17.03
PA	YELLOW HOUSE		FR	17.03	0.0	0.0	0.0	17.03
PA	BALLY		MS	10.0	0.0	0.0	0.0	10.0
PA	BIRDSBORO		MS	10.0	0.0	0.0	0.0	10.0
PA	BOYERTOWN		MS	10.0	0.0	0.0	0.0	10.0
PA	DOUGLASSVILLE		MS	10.0	0.0	0.0	0.0	10.0
PA	GREEN HILLS		MS	10.0	0.0	0.0	0.0	10.0
PA	MORGANTOWN		MS	10.0	0.0	0.0	0.0	10.0
PA	OLEY		MS	10.0	0.0	0.0	0.0	10.0
PA	SASSAMANSVILLE		MS	10.0	0.0	0.0	0.0	10.0
PA	TOPTON		MS	10.0	0.0	0.0	0.0	10.0
PA	YELLOW HOUSE		MS	10.0	0.0	0.0	0.0	10.0





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Attachment 1010

AFFIDAVIT

STATE OF ARKANSAS )

)

COUNTY OF PULASKI )

I, Tim Loken, being duly sworn upon oath, do hereby depose and state as follows:

I am an officer of the reporting carriers, as listed on the Carrier List; my responsibilities include ensuring the accuracy of the rates reported in this report.

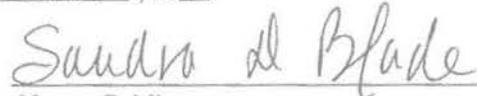
I hereby certify pursuant to the requirements under 47 C.F.R. §54.313(a)(10) that:

- (1) The pricing of Windstream's voice services is no more than two standard deviations above the national average urban rate for voice service.



\_\_\_\_\_  
Tim Loken, Director – Regulatory Reporting

Subscribed and sworn to before me this 12<sup>th</sup> day of June, 2015.



\_\_\_\_\_  
Notary Public

My Commission expires:

August 2, 2016



## Carrier List

STATE	Legal Entity	SAC	Certify fixed voice service is no more than two standard deviations above the applicable national average urban rate. Yes/No
AL	Windstream Alabama, LLC	250302	Yes
AR	Windstream Arkansas, LLC	401691	Yes
FL	Windstream Florida, Inc.	210336	Yes
GA	Windstream Georgia, LLC	220357	Yes
GA	Windstream Georgia Telephone, LLC	220364	Yes
GA	Windstream Standard, LLC	220386	Yes
GA	Windstream Accucomm Telecommunications, LLC	220395	Yes
GA	Georgia Windstream, LLC	223036	Yes
GA	Windstream Georgia Communications, LLC	223037	Yes
IA	Windstream Iowa Communications, Inc.	351167	Yes
IA	Windstream Iowa Communications, Inc.	351170	Yes
IA	Windstream Iowa Communications, Inc.	351178	Yes
IA	Windstream Montezuma, Inc.	351248	Yes
KY	Windstream Kentucky West, LLC	260402	Yes
KY	Windstream Norlight, Inc.	269004	Yes
KY	Windstream Kentucky East, LLC	269690	Yes
KY	Windstream Kentucky East, LLC	269691	Yes
MN	Windstream Lakedale, Inc.	361414	Yes
MN	Windstream Lakedale, Inc.	361482	Yes
MO	Windstream Missouri, Inc.	421885	Yes
MS	Windstream Mississippi, LLC	280453	Yes
NC	Windstream Concord Telephone, Inc.	230474	Yes
NC	Windstream North Carolina, LLC	230476	Yes
NC	Windstream Lexcom Communications, Inc.	230483	Yes
NE	Windstream Nebraska, Inc.	371568	Yes
NM	Valor Telecommunications of Texas, LLC	491164	Yes
NM	Valor Telecommunications of Texas, LLC	491193	Yes
NY	Windstream New York, Inc.	150106	Yes
NY	Windstream New York, Inc.	150109	Yes
NY	Windstream New York, Inc.	150113	Yes
OH	Windstream Ohio, Inc.	300665	Yes
OH	Windstream Western Reserve, Inc.	300666	Yes
OK	Valor Telecommunications of Texas, LLC	431165	Yes

STATE	Legal Entity	SAC	Certify fixed voice service is no more than two standard deviations above the applicable national average urban rate. Yes/No
OK	Windstream Oklahoma, LLC	431965	Yes
OK	Oklahoma Windstream, LLC	432011	Yes
PA	Windstream Buffalo Valley, Inc.	170151	Yes
PA	Windstream Conestoga, Inc.	170162	Yes
PA	Windstream D & E, Inc.	170165	Yes
PA	Windstream Pennsylvania, LLC	170176	Yes
SC	Windstream South Carolina, LLC	240517	Yes
TN	Windstream Norlight, Inc.	299008	Yes
TX	Valor Telecommunications of Texas, LLC	441163	Yes
TX	Windstream Communications Kerrville, LLC	442097	Yes
TX	Windstream Sugar Land, Inc.	442147	Yes
TX	Texas Windstream, Inc.	442153	Yes

LIFELINE SERVICE

Definition

- A. Lifeline Service is a retail local service offering available to qualifying low-income residential customers and is provided pursuant to the FCC Order 12-11 released on February 6, 2012.

Discounts

- A. The following credits will apply for customers deemed eligible for Lifeline assistance:  
Monthly Credit

Federal Credit	\$9.25
State Credit to Residential Access Line	Varies by state

Residents of federally recognized tribal lands may  
Receive an additional reduction up to \$25.00

- B. The monthly discounted residential rate for qualified low-income customers may not be reduced below zero. Therefore, the credit amount defined in A. above shall not exceed the total of the subscriber line charge and the customer's normal residential local exchange service rate.

General

- A. The Company shall offer toll blocking to all qualifying low income customers at no charge at the time such customers subscribe to Lifeline service. If the customer voluntarily elects to receive toll blocking, the service shall become part of the customer's Lifeline service and all service deposits will be waived.
- B. Lifeline program rate reductions do not apply to long distance service or any other services (i.e., Custom Calling, CLASS, construction charges, etc.) which may or may not be tariffed. Customers may obtain such services, where available, at their discretion, although the Lifeline program rate reduction does not apply.
- C. Lifeline program service will not be available on a retro-active basis.

Eligibility Requirements

- A. The Lifeline program rate reduction shall apply to one (1) telephone line per residential household, at the subscriber's principal place of residence. Service is limited to only one Service per qualified customer or household; within this section, 'household' is defined as "any individual or group of individuals who are living together at the same address as one economic unit," with an 'economic unit' defined as, "all adult individuals contributing to and sharing in the income and expenses of a household."
- B. The service must be provided in the eligible customer's name.
- C. An applicant whose household income is at or below 135% of the Federal Poverty Guidelines, or who participate in one of the following programs:

- Medicaid
- Food Stamps
- Supplemental Security Income
- Federal Public Housing Assistance
- Low Income Home Energy Assistance Program
- Temporary Assistance to Needy Families
- National School Lunch's Free Lunch Program

- D. The customer must sign, under penalty of perjury, a document certifying:

He/she is receiving benefits from one of the programs listed in C. above.  
Name of the program(s) from which they are receiving benefits.

That he/she will notify the company if he/she no longer participates in the program(s) named in C. preceding.

The applicant must also supply the name of the program(s) from which they are receiving benefits and provide documentation supporting participation in the program(s). That he/she will notify the company if he/she no longer participates in the program(s) named in C. preceding.

- E. Customers qualifying for Lifeline Service are offered the services or functionalities enumerated in 47 Code of Federal Regulations §54.101 (a) (1)-(8) (relating to Supported Service for Rural, Insular and High Cost Areas).
- F. The Company has certification processes in place which at the time of enrollment requires a documentation review that confirms the consumer's household eligibility. The Company will retain copies of the self-certification records of both the applicant and the Company. A Company officer will attest that these procedures are in place.
- G. The Company will annually verify the continued eligibility pursuant to the FCC Order 12-11 released on February 6, 2012.

#### Credits and Deposits

- A. The credit verification procedures available for all applicants who apply for service with the Company will also be used for applicants who apply for service under the Lifeline program.
- B. The deposit standards used for all applicants who apply for service with the Company will also be used for applicants who apply for service under the Lifeline Program with the exception that deposit requirements will be waived for Lifeline Service applicants who voluntarily elect to subscribe to toll blocking service.

#### Service Charges

- A. Service charges do not apply when eligible customers with existing residential service convert to Lifeline Service.
- B. A service order deposit is not applicable to customers who elect toll blocking when initiating Lifeline service.
- C. A service order charge does apply when:

At the time Lifeline Service billing is initiated, eligible residential local exchange access service customers also request additional optional calling features such as Custom Calling Features, CLASS features, etc.

Any subsequent moves or changes after the initial connection to Lifeline service are requested by the customer.

Service is established for new residential applicants (those without existing local exchange access service) eligible for Lifeline Service.

#### Payments and Disconnection of Service

- A. Lifeline service may not be disconnected for non-payment of toll charges. In addition, the Company will not deny re-establishment of local service to customers who are eligible for Lifeline Assistance and have previously been disconnected for nonpayment of toll charges.
- B. Partial payments that are received from Lifeline customers will first be applied to local service charges and then to any outstanding toll charges.

Windstream Residential Service Rates by Service Area  
Rates shown with and without state and federal Lifeline discounts applied

Year	SAC	Without Lifeline Discounts		With Lifeline Discounts	
		Low	High	Low	High
2014	170162	\$22.32	\$24.31	\$13.07	\$15.06