

**REDACTED - FOR PUBLIC INSPECTION**

**Rate Floor Data**

**RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986**

**Block 1 - Contact Information**

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	442109
2	Carrier Study Area Name	alpha characters	Consolidated Communications of Texas Company
3	Service Provider Identification Number	9 numeric digits	143002443
4	<b>Residential Local Service Charge Effective Date</b>	mm/dd/yyyy	6/1/2015
5	Contact Name	alpha characters	Jim DeLoss
6	Contact Telephone Number (include area code)	9 numeric digits	936-521-7737
7	Sheet number	numeric digit(s)	1
8	Total Number of Sheets	numeric digit(s)	1

**Block 2 - Residential Local Service Rates, Fees, and Line Counts**

	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	
9	\$ 19.55	\$ -	\$ 0.84	\$ -		Annual
10	\$ 20.05	\$ -	\$ 0.86	\$ -		Annual
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**TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:**

**Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data**

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier Consolidated Communications of Texas Company

Signature of authorized officer



07/01/2015

Printed name of authorized officer Michael Shultz

Title or position of authorized officer VP Legislative and Regulatory Affairs

Telephone number of authorized officer (936) 788 - 7414, ext.

Study Area Code of Reporting Carrier

442109

Filing Due Date for this form (mm/dd/yyyy)

07/01/2015