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

windstream

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

July 31, 2014

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

Ms. Karen Majcher
Vice President – High Cost Low Income Division
Universal Service Administrative Company
2000 L Street NW, Suite 200
Washington, D.C. 20036

RE: Connect America Fund, WC Docket No. 10-90: Lifeline and Link Up Reform and Modernization, WC Docket No. 11-42

This filing is being re-submitted as the original filing failed to include all attachments.

Pursuant to Section 54.313 and 54.422 of the Federal Communications Commission's rules enclosed is the 2014 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 or by phone at 501-748-5390.

Sincerely,

Jeff Heacox
Staff Manager Compliance Reporting

Enclosures

Cc: Applicable State Public Utilities Commissions, State Public Service Commissions, and Tribal Governments

FCC Form 481 - Carrier Annual Reporting 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 CONESTOGA TEL
<020>	Program Year	2015
<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

ANNUAL REPORTING FOR ALL CARRIERS

			54.313 Completion Required	54.422 Completion Required
			(check box when complete)	
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	✓	
<200>	Outage Reporting (voice)	(complete attached worksheet)	✓	✓
<210>	✓ <-- check box if no outages to report		✓	
<300>	Unfulfilled Service Requests (voice)	0		
<310>	Detail on Attempts (voice)	(attach descriptive document)		
<320>	Unfulfilled Service Requests (broadband)	0	✓	
<330>	Detail on Attempts (broadband)	(attach descriptive document)		
<400>	Number of Complaints per 1,000 customers (voice)			
<410>	Fixed	1.06	✓	✓
<420>	Mobile	0.0		
<430>	Number of Complaints per 1,000 customers (broadband)		✓	
<440>	Fixed	0.83		
<450>	Mobile	0.0		
<500>	Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	✓	✓
<510>	170162PA510.pdf	(attached descriptive document)	✓	✓
<600>	Functionality in Emergency Situations	(check to indicate certification)	✓	✓
<610>	170162PA610.pdf	(attached descriptive document)	✓	✓
<700>	Company Price Offerings (voice)	(complete attached worksheet)	✓	
<710>	Company Price Offerings (broadband)	(complete attached worksheet)		
<800>	Operating Companies and Affiliates	(complete attached worksheet)	✓	✓
<900>	Tribal Land Offerings (Y/N)? ○ ●	(if yes, complete attached worksheet)		
<1000>	Voice Services Rate Comparability	(check to indicate certification)	✓	
<1010>	170162PA1010.pdf	(attach descriptive document)	✓	
<1100>	Terrestrial Backhaul (Y/N)? ● ○	(if not, check to indicate certification)	✓	
<1110>		(complete attached worksheet)		
<1200>	Terms and Condition for Lifeline Customers	(complete attached worksheet)		✓

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

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

<2000>		(check to indicate certification)	✓
<2005>		(complete attached worksheet)	✓

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>		(check to indicate certification)	
<3005>		(complete attached worksheet)	

(100) Service Quality Improvement Reporting
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<110>	Has your company received its ETC certification from the FCC?	(yes / no) ○ ●
<111>	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) ○ ○

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 check these boxes below to confirm that the attached documents(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 (USF) was used to improve service quality	☐
<116>	How (USF)was used to improve service coverage	☐
<117>	How (USF) was used to improve service capacity	☐
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	☐

(200) Service Outage Reporting (Voice)
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<220>

<a> NORS Reference Number	<b1> Outage Start Date	<b2> Outage Start Time	<b3> Outage End Date	<b4> Outage End Time	<c1> Number of Customers Affected	<c2> Total Number of Customers	<d> 911 Facilities Affected (Yes / No)	<e> Service Outage Description (Check all that apply)	<f> Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution	<h> Preventative Procedures

(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	170162
<015>	Study Area Name	THE CONESTOGA TEL
<020>	Program Year	2015
<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

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	**Exchange (ILEC)**	**SAC (CETC)**	**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**

-- See attached worksheet --

(710) Broadband Price Offerings
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<711>

<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
State	**Exchange (ILEC)**	**Residential Rate**	**State Regulated Fees**	**Total Rate and Fees**	**Broadband Service - Download Speed (Mbps)**	**Broadband Service - Upload Speed (Mbps)**	**Usage Allowance (GB)**	**Usage Allowance Action Taken When Limit Reached {*select*}**

-- See attached worksheet --

(800) Operating Companies
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<810>	Reporting Carrier	Windstream Conestoga, Inc.
<811>	Holding Company	Windstream Holdings, Inc.
<812>	Operating Company	Windstream Conestoga, Inc.

<813>

<a1>	<a2>	<a3>
Affiliates	**SAC**	**Doing Business As Company or Brand Designation**

-- See attached worksheet --

(900) Tribal Lands Reporting
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<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:

		Select (Yes,No, NA)
<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.	

(1100) No Terrestrial Backhaul Reporting 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 CONESTOGA TEL
<020>	Program Year	2015
<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

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) ☐

<1130> Please check this box 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) ☐

(1200) Terms and Condition for Lifeline Customers
Lifeline
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

170162PA1210.doc

Name of Attached Document

<1220> Link to Public Website

HTTP http://www.windstream.com/About-Us/Lifeline-Applications/

"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. ✓

(2000) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

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 CONESTOGA TEL
<020>	Program Year	2015
<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

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2010> 2nd Year Certification {47 CFR § 54.313(b)(1)} ☐
<2011> 3rd Year Certification {47 CFR § 54.313(b)(2)} ☐

Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

<2012> 2013 Frozen Support Certification ☐
<2013> 2014 Frozen Support Certification ☑
<2014> 2015 Frozen Support Certification ☐
<2015> 2016 and future Frozen Support Certification ☐

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification Support Used to Build Broadband ☑

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017> 3rd year Broadband Service Certification ☐
<2018> 5th year Broadband Service Certification ☐
<2019> Interim Progress Certification ☐

<2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation

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 CONESTOGA TEL
<020>	Program Year	2015
<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

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)(1)(i)}

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)(ii)}

Name of Attached Document Listing Required Information

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

(3014) If yes, does your company file the RUS annual report (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)

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 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

Certification - Reporting Carrier 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 CONESTOGA TEL
<020>	Program Year	2015
<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:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

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 Date 06/19/2014

Printed name of Authorized Officer: Tim Loken

Title or position of Authorized Officer: Director Regulatory Reporting

Telephone number of Authorized Officer: 5017487442 ext.

Study Area Code of Reporting Carrier: 170162 Filing Due Date for this form: 06/30/2014

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.

Certification - Agent / Carrier 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 CONESTOGA TEL
<020>	Program Year	2015
<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:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

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:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

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.

Attachments

(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	170162
<015>	Study Area Name	THE CONESTOGA TEL
<020>	Program Year	2015
<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

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CETC)	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

(710) Broadband Price Offerings
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<711>

<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
State	**Exchange (ILEC)**	**Residential Rate**	**State Regulated Fees**	Total Rates and Fees	**Broadband Service - Download Speed (Mbps)**	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
PA	BOYERTOWN	49.99	0.0	49.99	12.0	1.5	0.0	Other, No limit on usage allowance
PA	BOYERTOWN	49.99	0.0	49.99	24.0	1.5	0.0	Other, No limit on usage allowance
PA	BOYERTOWN	49.99	0.0	49.99	24.0	4.0	0.0	Other, No limit on usage allowance

(800) Operating Companies
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 CONESTOGA TEL
<020>	Program Year	2015
<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

<810>	Reporting Carrier	Windstream Conestoga, Inc.
<811>	Holding Company	Windstream Holdings, Inc.
<812>	Operating Company	Windstream Conestoga, Inc.

<813>

<a1>	<a2>	<a3>
Affiliates	**SAC**	**Doing Business As Company or Brand Designation**
Windstream Communications, Inc.		

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

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 610 – Description of Functionality in Emergency Situations

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.

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 17th day of June, 2014.

Notary Public

My Commission expires:
February 2, 2019

CHARLENE GROBER
PULASKI COUNTY
NOTARY PUBLIC - ARKANSAS
My Commission Expires February 02, 2019
Commission No. 12369933

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

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

		Without Lifeline Discounts		With Lifeline Discounts	
Year	**SAC**	**Low**	**High**	**Low**	**High**
2013	170162	$21.62	$23.53	$12.37	$14.28