



February 10, 2016

Florida Public Service Commission
Attn: Ms. Carlotta Stauffer
Office of the Commission Clerk
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

Via Electronic Filing

Re: Cox Florida Telcom, L.P. ("Cox")
CLEC No. TA027
FCC Form 555: Year 2015 Annual Lifeline Eligible Telecommunications Carrier Certification Form

Dear Ms. Stauffer:

Cox submits herewith the attached Annual Lifeline Eligible Telecommunications Carrier Certification Form (FCC Form 555) for Year 2015, pursuant to FCC Rule §54.416(b), CFR, requiring Eligible Telecommunications Carriers (ETCs) to submit a copy of the results of their annual Lifeline recertification efforts to the state commission for subscribers residing in the state where the state commission has designated the company as an ETC. As per directions from Commission Staff, please place this in the undocketed file.

Should you have any questions regarding this filing, please do not hesitate to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Leslie McLaughlin". The signature is fluid and cursive, with a large initial "L" and "M".

Leslie McLaughlin, Analyst, SE Region
Assistant to Martin J. Corcoran, Director, Regulatory Affairs

Enclosure

CC: Paul Cain, Director, Cox Law & Policy, Regulatory Operations

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)

219019 <hr/> Study Area Code (SAC) <i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC through which it provides Lifeline service).</i>	
FL <hr/> State Cox Digital Telephone Lifeline Service <hr/> DBA, Marketing or Other Branding Name <i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i>	Cox Florida Telcom LP <hr/> ETC Name Cox Communications, Inc. <hr/> Holding Company Name <i>(If same as ETC name, list "N/A" Do not leave blank)</i>

Does the reporting company have affiliated ETCs? Yes No

Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

Affiliated ETC's SAC	Affiliated ETC's Name

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer 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 procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial jp

Section 2: Annual Recertification

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

A	B	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year <i>(February data month)</i>	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 <u>initially</u> enrolled in the current Form 555 calendar year <i>(These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)</i>	Number of subscribers de-enrolled prior 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
602	0	80	132	390

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 <i>(This should be a subset of Block G.)</i>	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
390	246

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: USAC. 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 jp

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.

M = (F+K)	N = (J+L)	O = ((N ÷ M) * 100)
Number of subscribers that the ETC attempted to recertify directly <u>or</u> through a state administrator, ETC access to a state database, or by USAC <i>(This should equal the number reported in Block E)</i>	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
390	246	63.08%

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.

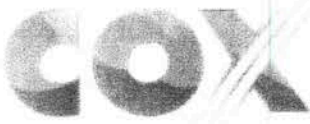
Is the ETC Pre-Paid? Yes No

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

<p>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.</p>	
<p>Signed, <u>Certified Online</u> Signature of Officer <u>jojava.philpott@cox.com</u> Email Address of Officer <u>Derrick Hanson</u> Person Completing This Certification Form</p>	<p>Joiava Philpott VP. Regulatory Affairs _____ Printed Name and Title of Officer <u>01/27/2016</u> _____ Date <u>404-843-5455</u> _____ Contact Phone Number</p>



Cox Communications – Regulatory
 6205-B Peachtree Dunwoody Rd.
 Atlanta, GA 30328
 404.269.0983 tel 404-269-0539 fax
 joiava.philpott@cox.com

Joiava Philpott
 VICE PRESIDENT

January 28, 2016

VIA ECFS

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

**Re: Cox Communications, Inc. and Its Affiliates
 WC Docket No. 14-171
 Annual Certification Requirement for Lifeline Program
 Pursuant to 47 C.F.R. 54.405(e)(3), 54.416(b)**

Dear Ms. Dortch:

Pursuant to the above-referenced rules and the Wireline Competition Bureau's December 2, 2014 Public Notice, Cox Communications, Inc. hereby submits FCC Form 555 for each of its affiliates that participates in the Lifeline program.¹ Forms are submitted herewith for the following companies:

Cox Arizona Telecom, LLC
 Cox Arkansas Telecom, LLC
 Cox California Telecom, LLC
 Cox Connecticut Telecom, LLC
 Cox Florida Telecom, LP
 Cox Georgia Telecom, LLC
 Cox Iowa Telecom, LLC

Cox Kansas Telecom, LLC
 Cox Louisiana Telecom, LLC
 Cox Nebraska Telecom, LLC
 Cox Nevada Telecom, LLC
 Cox Oklahoma Telecom, LLC
 Cox Rhode Island Telecom, LLC
 Cox Virginia Telecom, LLC

Please inform me if any questions should arise in connection with this submission.

Respectfully Submitted,

Joiava Philpott
 Vice President, Regulatory Affairs

Attachments (14)

cc: Barry Ohlson

¹ 47 C.F.R. § 54.410(f).



Your submission has been accepted

ECFS Filing Receipt - Confirmation number: 2016128418075

Proceeding

Name Subject
14-171 Lifeline Compliance Filings

Contact Info

Name of Filer: Cox Communications
Email Address: derrick.hanson@cox.com
Attorney/Author Name: Derrick Hanson

Address

Address For: Filer
Address Line 1: 6205 Peachtree Dunwoody Road
City: Atlanta
State: GEORGIA
Zip: 30328

Details

Type of Filing: COMPLIANCE FILING

Document(s)

File Name	Custom Description	Size
letter-JP.pdf		931 KB
AR 2015 Form 555.pdf		575 KB
AZ 2015 Form 555.pdf		575 KB
CA 2015 Form 555.pdf		575 KB
CT 2015 Form 555.pdf		575 KB
FL 2015 Form 555.pdf		575 KB
GA 2015 Form 555.pdf		575 KB
IA 2015 Form 555.pdf		575 KB
KS 2015 Form 555.pdf		575 KB
LA 2015 Form 555.pdf		575 KB
NE 2015 Form 555.pdf		575 KB
NV 2015 Form 555.pdf		575 KB
OK 2015 Form 555.pdf		575 KB
RI 2015 Form 555.pdf		575 KB
VA 2015 Form 555.pdf		575 KB

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<http://apps.fcc.gov/ecfs/comment/confirm?confirmation=2016128418075>

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