



21 West Avenue  
Spencerport, NY 14559

January 31, 2017

Ms. Beth Salak, Director  
Division of Regulatory Analysis  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, FL 32399

Filed Electronically via Florida Public Service Commission website

RE: Annual Eligibility Re-Certification of Lifeline Subscribers  
FCC Form 555

Dear Ms. Salak:

Frontier Communications of the South, LLC herein after referred to as "Frontier" hereby provides a copy of its Annual Lifeline Eligible Telecommunications Carrier Certification Form in compliance with 47 CFR 54.416 as adopted by the Federal Communication Commission (FCC) in its Lifeline Reform Order, FCC 12-11, released February 6, 2012.

Section 54.416(b) requires eligible telecommunication carriers (ETCs) to annually provide the results of their re-certification efforts performed pursuant to Section 54.410 (f) to the FCC and the Universal Service Administrative Company (USAC). ETCs are also required to provide the results of their re-certification efforts to state commissions and relevant tribal governments.

If you have any questions, please contact me at (585) 777-5823 or by email at Deborah.Fasciano@ftr.com.

Respectfully Submitted,

/s/

Deborah Fasciano  
Manager, Govt. & External Affairs  
Frontier Communications

Enclosures

Cc: A. McCall, Frontier

**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 31<sup>st</sup> (Annually)*

<p><u>210318</u> 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></p> <p><u>2016</u>                      <u>FL</u> Recertification Year      State</p> <p><u>Frontier Communications Of The South, LLC</u> DBA, Marketing, or Other Branding Name <i>(If same as ETC name, list "N/A" Do not leave blank)</i></p>	<p><u>143001561</u> Service Provider Identification Number (SPIN)</p> <p><u>Frontier Communications of the South LLC</u> ETC Name</p> <p><u>Frontier Communications Corporation</u> Holding Company Name <i>(If same as ETC name, list "N/A" Do not leave blank)</i></p>
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**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
-- See attached worksheet --	

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     jcm

**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
30	0	1	1	28

**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
28	7

**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. (List database or name of administrator here) 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 jcm

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.

<b>M = (F+K)</b>	<b>N = (J+L)</b>	<b>O = ((N ÷ M) * 100)</b>
<b>Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC</b> <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	<b>Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response</b>
28	7	25.0%

**Section 4: ETCs Subject to the Non-Usage Requirements**

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes  No

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

<b>P</b>	<b>Q</b>
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

jessica.matushek@ftr.com

Email Address of Officer

Christine Burke

Person Completing This Certification Form

Jessica C Matushek

Printed Name and Title of Officer

01/30/2017

Date

585-777-6719

Contact Phone Number

### Affiliated ETCs

SAC	Name
135200	The Southern New England Telephone Company
150072	Frontier Communications of AuSable Valley Inc.
150100	Frontier Communications of New York Inc.
150110	OGDEN TELEPHONE COMPANY
150121	Frontier Telephone of Rochester Inc.
150122	Frontier Communications of Seneca Gorham Inc.
150128	Frontier Communications of Sylvania Lake Inc.
154532	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154533	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154534	CITIZENS TELECOMMUNICATIONS COMPANY OF N
170149	Frontier Communications of Breezewood LLC
170152	Frontier Communications of Canton LLC
170161	Commonwealth Telephone Company
170168	Frontier Communications of Pennsylvania LLC
170178	Frontier Communications of Lakewood LLC
170194	Frontier Communications of Oswayo River LLC
200271	CITIZENS MOUNTAIN STATE TEL
204338	Citizens Mountain State Tel
204339	Citizens Mountain State Tel
205050	Frontier West Virginia Inc.
210318	Frontier Communications of the South LLC
210328	Frontier Florida LLC
220362	Frontier Communications of Fairmount LLC
220387	Frontier Communications of Georgia LLC
230479	Frontier Communications of the Carolinas Inc.
230509	Frontier Communications of the Carolinas Inc.
240479	Frontier Communications of the Carolinas Inc.
240526	Frontier Communications of the Carolinas Inc.
250301	Frontier Communications Lamar County LLC
250306	Frontier Communications of Alabama LLC
250318	Frontier Communications of the South LLC
280460	Frontier Communications of Mississippi Inc.
290580	CITIZENS TEL OF VOLUNTEER STATE
294336	CITIZENS TEL OF TENNESSEE LLC
300615	Frontier North Inc.
300682	Frontier Communications of Michigan Inc.
310682	Frontier Communications of Michigan Inc.
310695	Frontier North Inc.
313033	Frontier Midstates Inc.
320750	Frontier Communications of Indiana Inc.
320772	Frontier North Inc.
320779	Frontier North Inc.
320828	Frontier Communications of Thorntown Inc.
323034	Frontier Midstates Inc.
330870	RHINELANDER TEL CO
330886	Frontier North Inc.
330891	Rhinelanders Tel Co
330912	Frontier Communications of Mondovi LLC
330940	Rhinelanders Tel Co
330941	Rhinelanders Tel Co

### Affiliated ETCs

SAC	Name
330944	Frontier Communications - St. Croix LLC
330964	Frontier Communications of Wisconsin LLC
330967	Frontier Communications of Viroqua LLC
340998	Frontier Communications of DePue Inc.
341011	Frontier Communications of Lakeside Inc.
341015	Frontier North Inc.
341036	Frontier North Inc.
341038	Frontier Communications of Illinois Inc.
341055	Frontier Communications - Midland Inc.
341061	Frontier Communications of Mt. Pulaski Inc.
341067	Frontier Communications of Orion Inc.
341073	Frontier Communications - Prairie Inc.
341079	Frontier Communications - Schuylers Inc.
341183	CITIZENS TEL OF ILLINOIS INC
343035	Frontier Communications of the Carolinas Inc.
351127	Frontier Communications of Iowa Inc
361123	CITIZENS TEL OF MINNESOTA
361367	Frontier Communications of Minnesota Inc.
367123	CITIZENS TEL OF MINNESOTA
371128	CITIZENS TEL OF NEBRASKA
442080	Frontier Southwest Incorporated
442154	Frontier Southwest Incorporated
452172	CITIZENS UTILITIES RURAL TEL CO
452302	Frontier Communications of the Southwest Inc.
454426	CITIZENS UTILITIES CO
454449	NAVAJO COMM CO
472416	Frontier Communications Northwest Inc.
474427	CITIZENS TELECOMM CO OF IDAHO
484322	CITIZENS TELECOMM CO OF MONTANA
494449	NAVAJO COMM CO
504429	CITIZENS TELECOMM CO OF UTAH
504449	NAVAJO COMM CO
522416	Frontier Communications Northwest Inc.
522449	Frontier Communications Northwest Inc.
532416	Frontier Communications Northwest Inc.
533401	CITIZENS TELECOMM CO OF OREGON
541863	Frontier Communications of the Southwest Inc.
542302	Frontier California Inc.
542308	CITIZENS TELECOMM CO OF CA
542315	CITIZENS TELECOMM CO OF CA
542319	Frontier California Inc.
542344	CITIZENS TELECOMM CO OF CA. Frontier Communica
543402	CITIZENS TELECOMM CO OF CA
544342	CITIZENS TELECOMM CO OF CA
552302	Frontier Communications of the Southwest Inc.
554431	CITIZENS TEL COMPANY
554432	CITIZENS TEL COMPANY

**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 31<sup>st</sup> (Annually)*

210328		143001435	
Study Area Code (SAC)		Service Provider Identification Number (SPIN)	
<i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC through which it provides Lifeline service).</i>			
2016	FL	Frontier Florida LLC	
Recertification Year	State	ETC Name	
Frontier Florida LLC		Frontier Communications Corporation	
DBA, Marketing, or Other Branding Name		Holding Company Name	
<i>(If same as ETC name, list "N/A" Do not leave blank)</i>		<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
-- See attached worksheet --	

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     jcm

**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
4013	0	0	324	3689

**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
3689	1106

**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. (List database or name of administrator here) 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 jcm

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.

<b>M = (F+K)</b>	<b>N = (J+L)</b>	<b>O = ((N ÷ M) * 100)</b>
<b>Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC</b> <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	<b>Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response</b>
3689	1106	29.98%

**Section 4: ETCs Subject to the Non-Usage Requirements**

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes  No

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

<b>P</b>	<b>Q</b>
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  
jessica.matushek@ftr.com  
 Email Address of Officer  
Christine Burke  
 Person Completing This Certification Form

Jessica C Matushek  
 Printed Name and Title of Officer  
01/30/2017  
 Date  
585-777-6719  
 Contact Phone Number

### Affiliated ETCs

SAC	Name
135200	The Southern New England Telephone Company
150072	Frontier Communications of AuSable Valley Inc.
150100	Frontier Communications of New York Inc.
150110	OGDEN TELEPHONE COMPANY
150121	Frontier Telephone of Rochester Inc.
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150128	Frontier Communications of Sylvania Lake Inc.
154532	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154533	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154534	CITIZENS TELECOMMUNICATIONS COMPANY OF N
170149	Frontier Communications of Breezewood LLC
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170161	Commonwealth Telephone Company
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204339	Citizens Mountain State Tel
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341183	CITIZENS TEL OF ILLINOIS INC
343035	Frontier Communications of the Carolinas Inc.
351127	Frontier Communications of Iowa Inc
361123	CITIZENS TEL OF MINNESOTA
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371128	CITIZENS TEL OF NEBRASKA
442080	Frontier Southwest Incorporated
442154	Frontier Southwest Incorporated
452172	CITIZENS UTILITIES RURAL TEL CO
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