# Annual Reporting for High-Cost Recipients 47 C.F.R. §54.313(a)(2) through (a)(6) and §54.422



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

July 12, 2018

Ms. Carlotta S. Stauffer, Commission Clerk Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

RE: Docket No. 20180122-TP, Annual Certifications Related to Eligible Telecommunications Carriers (ETC) Use of the Federal Universal Support, WC Docket No. 14-58

Pursuant to Section 54.313 and 54.422 of the Federal Communications Commission's rules, all reports pursuant to this section shall be filed with the FCC, Universal Service Administrative Company (USAC) and relevant state commissions. I have enclosed a copy of the 2018 annual report and certification that has been filed with the Administrator for the following:

SAC 210336 - Windstream Florida, Inc.

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

Sincerely,

/s/ Jeff Heacox

Jeff Heacox Staff Manager Regulatory Compliance

**Enclosures** 

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	210336	
<015>	Study Area Name	WINDSTREAM FL	
<020>	Program Year	2019	
<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	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	210336
<015>	Study Area Name	WINDSTREAM FL
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Heacox
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.l.heacox@windstream.com

<210> For the prior calendar year, were there any reportable voice service outages?

<220>

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

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	10336	
<015>	Study Area Name	NDSTREAM FL	
<020>	Program Year	19	
<030>	Contact Name - Person USAC should contact	regarding this data Jeff Heacox	
<035>	Contact Telephone Number - Number of per <030>	son identified in data line 5017485390 ext.	
<039>	Contact Email Address - Email Address of per <030>	son identified in data line jeff.l.heacox@windstream.com	
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.		
<410>	Complaints per 1000 customers for fixed voice		
<420>	Complaints per 1000 customers for mobile voice		

•	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018		
<010>	Study Area Code	210336			
<015>	Study Area Name	WINDSTREAM FL			
<020>	Program Year	2019			
<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.1.heacox@windstream.com			
<515>	<515> Certify compliance with applicable minimum service standards				

Data Co	ollection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2018
<010>	Study Area Code	210336	
<015>	Study Area Name	WINDSTREAM FL	
<020>	Program Year	2019	
<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	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	
<610>	Descriptive document for Functionality in Emergency Situations	210336FL610.pdf	

FCC Form 481

(600) Functionality in Emergency Situations

	erating Companies ection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2018
		10.1, 20.0
<010>	Study Area Code	210336
<015>	Study Area Name	WINDSTREAM FL
<020>	Program Year	2019
<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 Florida, LLC	
<811>	Holding Company Windstream Holdings, Inc.	

<812> Operating Company

Windstream Florida, LLC

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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-	See attacl	ned workshee	
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(900) Tribal Lands Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018
<010> Study Area Code	210336
<015> Study Area Name	WINDSTREAM FL
<020> Program Year	2019
<030> Contact Name - Person USAC should contact regarding this data	Jeff Heacox 5017485390 ext.
<035> Contact Telephone Number - Number of person identified in data line <030>	jeff.l.heacox@windstream.com
<039> Contact Email Address - Email Address of person identified in data line <030>	
<900> Does the filing entity offer tribal land services? (Y/N)	No
<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 PDF, on line 920,	<del></del> -
demonstrates coordination with the Tribal government pursuant to	Select
§ 54.313(a)(5) includes:	Yes or No or
<921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning;	Not Applicable
<923> Marketing services in a culturally sensitive manner;	
<924> Compliance with Rights of way processes	
<925> Compliance with Highest of way processes <925> Compliance with Land Use permitting requirements	
<927> Compliance with Environmental Review processes	
<928> Compliance with Cultural Preservation review processes	
<929> Compliance with Tribal Business and Licensing requirements.	

			1 480 0
•	oice and Broadband Service Rate Comparability ection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2018
<010>	Study Area Code		210336
<015>	Study Area Name		WINDSTREAM FL
<020>	Program Year		2019
<030>	Contact Name - Person USAC should contact regarding this data		Jeff Heacox
<035>	Contact Telephone Number - Number of person identified in data line		5017485390 ext.
<039>	Contact Email Address - Email Address of person identified in data line	e <030>	jeff.l.heacox@windstream.com
<1000>	Voice services rate comparability certification	Yes	5
<1010>	Attach detailed description for voice services rate comparability compliance	2103	336FL1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		s - Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	21033	36FL1030.pdf
			Name of Attached Document

	o Terrestrial Backhaul Reporting lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-08 July 2018	819
<010>	Study Area Code	210336	
<015>	Study Area Name	WINDSTREAM FL	
<020>	Program Year	2019	
<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	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<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 upstream within the supported area pursuant to § 54.313(g).	6 kbps	
<1140>	Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.	Not Applicable	

(1200) Te	erms and Condition for Lifeline Customers		FCC Form 481
Lifeline			OMB Control No. 3060-0986/OMB Control No. 3060-0819
<b>Data Coll</b>	ection Form		July 2018
<010>	Study Area Code	210336	
<015>	Study Area Name	WINDSTREAM FL	
<020>	Program Year	2019	
<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	
	ſ	210336FL1210.pdf	
		210336FL1210.pd1	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		
	•	N	Jame of Attached Document
<1220>	Link to Public Website HTTP		
	<del>-</del>		
	heck these boxes below to confirm that the attached document(s), on line 1210,		
	bsite listed, on line 1220, contains the required information pursuant to		
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must		
annually	report:		
412245	Information describing the terms and conditions of converge		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,		
	telephony service plans offered to Elicinic 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.		

(2005) Price (	Cap Carrier Additional Documentation		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819
	e-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2018
meraamy nac	e of neturn earners affinited with the ear Exertange earners		<u> </u>
	udy Area Code	210336	
	udy Area Name	WINDSTREAM FL 2019	
	ogram Year ntact Name - Person USAC should contact regarding this data	Jeff Heacox	
	ntact Telephone Number - Number of person identified in data line <030>	5017485390 ext.	
	ntact Email Address - Email Address of person identified in data line <030>	jeff.l.heacox@windstream	eam.com
to offset			mpliance as a recipient of frozen High Cost support, High Cost support set forth in 47 CFR 54.313(c),(d),(e). The information reported on this
<2015>	> 2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)	No
<b>Price Cap</b> <2016>	Carrier Connect America ICC Support {47 CFR § 5	4.313(d)}	voa
<2016>	<ul> <li>Certification support used to build broadband</li> </ul>		Yes
Connect	America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		Yes
<2017C>	Total amount of Phase II support, if any, the price cap capital expenditures in 2017.	carrier used for	3015732
<2018>	Attach the number, names, and addresses of community anchor		Name of Attached Document Listing
	institutions to which the carrier newly began providing broadband service in the preceding calendar year - 54.		Required Information
<2019>	Recipient certifies that it bid on category one telecomn	nunications and	
	Internet access services in response to all FCC Form 47	0 postings seeking	
	broadband service that meets the connectivity targets		
	libraries universal service support program for eligible		
	libraries located within any area in a census block whe		
	receiving Phase II model-based support, and that such		
	reasonably comparable to rates charged to eligible sch		
	urban areas for comparable offerings - 54.313(e)(1)(ii)(	C)	

(3005) Rate	Of Return Carrier Additional Documentation on Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	210336
<015>	Study Area Name	WINDSTREAM FL
<020>	Program Year	2019
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<039>	Contact Email Address - Email Address of person identified in data line <030>	jeff.l.heacox@windstream.com

# CAF BLS Reporting

(3008A)	Please indicate whether new locations were deployed during the prior calendar year.	(Yes/No)
(3008B)	Please enter the number of new locations deployed in the prior calendar year associated with each of the following speed tiers.	
(3008B1)	Number of newly built locations with access to broadband speeds of at least 10/1 Mbps but less than 25/3 Mbps.	
(3008B2)	Number of newly built locations with access to broadband speeds of 25/3 Mbps or higher.	
(3008C)	Please provide the percentage of deployment across the entire study area.	

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	210336
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Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure 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.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)			
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}		Γ	
(3010B)	Please Provide Attachment	Name of Attached Doc Information	cument Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}		Г	
(3012B)	Please Provide Attachment	Name of Attached Doc Information	cument Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	00	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	0 0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports			
(2013)	(Operating Report for Telecommunications Borrowers)			
(3016)	Document(s) with 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 Doc Information	cument Listing Required	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	0 0	
(3019)	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: Either a copy of their audited financial statement; or			
(3019)	(2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			
(3021)	Management letter and/or 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			
(3022)	3026 pursuant to § 54.313(f)(2), contains: 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			
(3023)	Telecommunications Borrowers Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Doc Information	cument Listing Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	210336
<015>	Study Area Name	WINDSTREAM FL
<020>	Program Year	2019
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<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
		·

Financial Data Summary	
Financial Data Summary	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(222)	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	
(303 I) Dividends	

(4005) Rural Broadband Experiment Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	210336
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<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 5017485390 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ine <030> jeff.l.heacox@windstream.com

## **4005 Rural Broadband Experiment**

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations and provide a list of newly served community anchor institutions.

## Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001**. Recipient certifies that it is offering broadband meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas.

# Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

## If yes to 4003A, please provide a response for 4003B.

**4003b**. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

(5005) Alaska Plan Participants Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	210336
<015>	Study Area Name	WINDSTREAM FL
<020>	Program Year	2019
<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.1.heacox@windstream.com

5005 Alaska Plan

(5010)	Do you participate in the Alaska plan?	(Yes/No)
(5011)	Please indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.	(Yes/No)
(5012)	If the filing carrier identified in its approved perfomance plans that it relies exclusively on satellite backhaul for a certain poriton of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas that were previously served exclusively by satellite backhaul.	(Yes/No)

<5013>	<a></a>	<b></b>	<c></c>
	Description Of Backhaul Technology	Date Backhaul Available	Newly Served Locations or Population
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Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	210336
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<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: WINDSTREAM FL

Signature of Authorized Officer: CERTIFIED ONLINE

Date 07/09/2018

Printed name of Authorized Officer: Tim Loken

Title or position of Authorized Officer:  ${ t Director}$ 

Telephone number of Authorized Officer: 5017487442 ext.

Study Area Code of Reporting Carrier: 210336 Filing Due Date for this form: 07/16/2018

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.

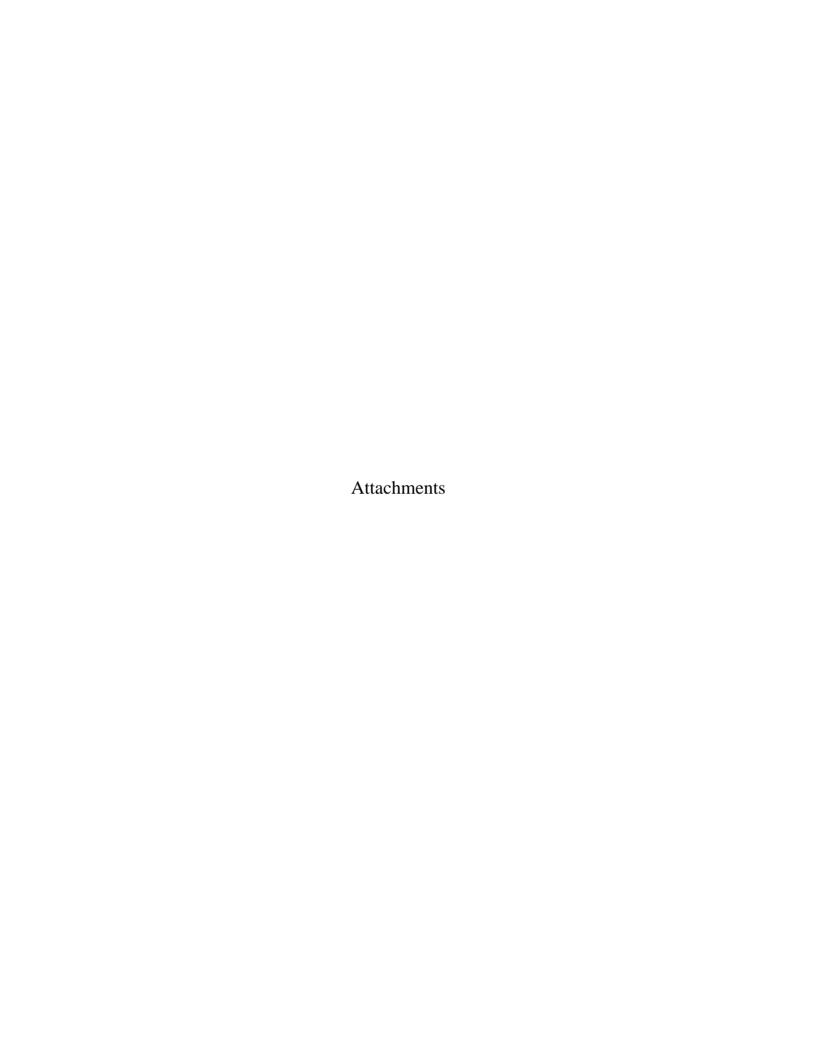
Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	210336
<015>	Study Area Name	WINDSTREAM FL
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Jeff Heacox
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<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:

is authorized to submit the information reported on behalf of the reporting carrier. nsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ovided to the authorized agent is accurate.		
Date:		
Telephone number of Authorized Officer:		
Filing Due Date for this form:		

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipie	ents on Behalf of Reporting Carrier	
	norized to submit the annual reports for universal service support reporting carrier; and, to the best of my knowledge, the informat	• • • • • • • • • • • • • • • • • • • •	
Name of Reporting Carrier:			
Name of Authorized Agent Firm:			
Signature of Authorized Agent or Employee of Agent:	ignature of Authorized Agent or Employee of Agent: Date:		
Name of Authorized Agent Employee:			
Title or position of Authorized Agent or Employee of Agent			
Telephone number of Authorized Agent or Employee of A	gent:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:		
Persons willfully making false statements on this form	n can be punished by fine or forfeiture under the Communications Act of 18 of the United States Code, 18 U.S.C. § 1001.	1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title	



(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code		210336
<015>	Study Area Name		WINDSTREAM FL
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<810>	Reporting Carrier	Windstream Florida, LLC	
<811>	Holding Company	Windstream Holdings, Inc.	
<812>	Operating Company	Windstream Florida, LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	US LEC of Florida, LLC		PAETEC Business Services
	Windstream Communications, LLC		
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## 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.

# **AFFIDAVIT**

STATE OF <u>ARKANSAS</u>	)
	)
COUNTY OF PULASKI	)

I, <u>Tim Loken</u>, 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 14 of June 2018.

Notary Public

My Commission expires:

# **Carrier List**

State	Local Estitu	CAC	Windstream certifies its fixed voice service is lower than \$45.38, which is two standard deviations above the applicable national average urban rate.
State AL	Legal Entity	SAC	Yes/No
AR	Windstream Arkenses, LLC	250302	Yes
FL	Windstream Arkansas, LLC Windstream Florida, LLC	401691 210336	Yes
GA	Windstream Georgia, LLC	220357	Yes
GA	Windstream Georgia, LLC Windstream Georgia Telephone, LLC	220364	Yes Yes
GA	Windstream Standard, LLC	220386	Yes
GA	Windstream Accucomm Telecommunications, LLC	220300	Yes
GA	Georgia Windstream, LLC	223036	Yes
GA	Windstream Georgia Communications, LLC	223037	Yes
IA	Windstream Iowa Communications, LLC	351167	Yes
IA IA	Windstream Iowa Communications, LLC	351107	Yes
IA IA	Windstream Iowa Communications, LLC	351178	Yes
IA	Windstream Montezuma, LLC	351248	Yes
KY	Windstream Kentucky West, LLC	260402	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, LLC	421885	Yes
MS	Windstream Mississippi, LLC	280453	Yes
NC	Windstream Concord Telephone, LLC	230474	Yes
NC	Windstream North Carolina, LLC	230474	Yes
NC	Windstream Lexcom Communications, LLC	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
ОН	Windstream Ohio, LLC	300665	Yes
ОН	Windstream Western Reserve, LLC	300666	Yes
OK	Valor Telecommunications of Texas, LLC	431165	Yes
ОК	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
TX	Valor Telecommunications of Texas, LLC	441163	Yes
TX	Windstream Communications Kerrville, LLC	442097	Yes
TX	Windstream Sugar Land, LLC	442147	Yes
TX	Texas Windstream, LLC	442153	Yes

FCC Form 481 Line 1030 - Description of Broadband Comparability Compliance

Windstream offers the following broadband plans:

<b>Download Speeds</b>	<b>Upload Speeds</b>	<b>Usage Allowance</b>	Rate	Benchmark
6MB	1MB	Unlimited	\$ 59.99	\$ 86.71
12MB	1.5MB	Unlimited	\$ 69.99	\$ 88.86
16MB	1.5MB	Unlimited	\$ 69.99	\$ 90.35
20MB	1.5MB	Unlimited	\$ 69.99	\$ 91.91
25MB	4MB	Unlimited	\$ 69.99	\$ 94.49
50MB	4MB	Unlimited	\$ 79.99	\$ 106.34
75MB	8MB	Unlimited	\$ 99.99	\$ 118.71
100MB	8MB	Unlimited	\$ 99.99	\$ 126.08

Windstream's broadband pricing is well below the relevant benchmark rates.

# **Carrier List**

			Certify Windstream's broadband pricing is below the relevant benchmark rate.
STATE	Legal Entity	SAC	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
МО	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
ОН	Windstream Ohio, Inc.	300665	Yes
ОН	Windstream Western Reserve, Inc.	300666	Yes
ОК	Valor Telecommunications of Texas, LLC	431165	Yes

			Certify Windstream's broadband pricing is below the relevant benchmark rate.
STATE	Legal Entity	SAC	Yes/No
ОК	Windstream Oklahoma, LLC	431965	Yes
ОК	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

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. Funding for Lifeline Service is obtained from a universal service support mechanism to which all telecommunications carriers that provide interstate telecommunications services contribute on an equitable and nondiscriminatory basis. Lifeline is a government benefit program, and consumers who willfully make false statements to obtain the benefit can be punished by fine or imprisonment or can be barred from the program.

#### 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) benefit 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 they can provide certification or authorize agency verification of their participation in one of the following programs:

Medicaid Supplemental Nutrition Assistance Program (SNAP) Supplemental Security Income (SSI) Federal Public Housing Assistance Veteran's Pension/Survivor's Pension benefit D. The customer must sign, under penalty of perjury, a document certifying:

He/she receive(s) benefits from one of the program(s) identified above or

He/she's annual household income is at or below 135 percent of the Federal Poverty Guidelines.

He/she must notify their service provider within 30 days if he/she no longer meets the program or income eligibility criteria

He/she must acknowledge that the household only receives one Lifeline Program benefit

He/she acknowledges the data provided on this application form is true and correct to the best of their knowledge.

He/she agrees the company may transmit this data to the Administrator of the National Lifeline Accountability Database to ensure the proper administration of the Lifeline Program. He/she understands that if they refuse to have this information transmitted to the Administrator, they will be denied Lifeline Program benefits.

He/she acknowledges that falsifying information to obtain Lifeline Program benefits is punishable by law and can result in fines, imprisonment, de-enrollment, or being barred from the program.

He/she will be required to recertify eligibility annually and failure to recertify eligibility for the Lifeline Program will result in removal from the Lifeline Program and termination of Lifeline benefit.

He/she if seeking to qualify for Lifeline as an eligible resident of Tribal Land, he/she certifies they live on Tribal Land as defined in Section 54.400(e) of Lifeline rules.

- 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 method for verification of the eligibility criteria set forth above shall be a national eligibility verifier. Until the national eligibility verifier has been established to verify eligibility the verification method will be self-certification by the recipients of the eligible programs. 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 I	Lifeline Discounts	With Life	eline Discounts
Year	SAC	Low	High	Low	High
2017	210336	\$18.61	\$21.83	\$5.86	\$9.08

# Template for Reporting Community Anchor Institutions (Lines 2018, 3012B, and 4003B)

Number	Name	Street Address	State	Zip
1				
2				
3				
4				
5				
6				