

Federal Regulatory Affairs 2300 N St. NW, Suite 710 Washington DC 20037 www.Frontier.com

REDACTED—FOR PUBLIC INSPECTION

June 12, 2015

BY HAND

Marlene H. Dortch Secretary Federal Communications Commission 445 12th St., S.W. Washington, D.C. 20554

Re: ETC Annual Reports and Certifications, WC Dkt. No. 14-58

Dear Ms. Dortch:

Frontier Communications Corp. hereby files its annual report and certifications as required by Sections 54.313 and 54.422 of the Commission's rules. A copy of this report is also being filed with the Universal Service Administrative Company, each relevant State public service commission in which Frontier operates as an ETC, and relevant authorities and Tribal governments pursuant to Section 54.313(i) of the Commission's rules.¹

Pursuant to 47 C.F.R. § 0.459, Frontier requests confidential treatment for portions of these filings. Specifically, Frontier requests confidential treatment of the detailed reporting of outages lasting longer than 30 minutes in 2014, which includes the location, cause, duration and efforts taken to prevent further outages. This information is competitively sensitive and is not normally released to the public; release of such sensitive data could give Frontier's competitors an advantage in the markets described therein.²

Frontier also requests confidential treatment of its unfulfilled voice and broadband service requests. This information is competitively sensitive as it may provide an indication of where Frontier may target future service expansion. This information is not normally released to the public; release of such sensitive data could give Frontier's competitors an advantage in the markets described therein.

Finally, Frontier requests confidential treatment of its broadband price offerings. While broadband price offerings may be publicly available on a targeted and localized basis, Frontier does not make available a companywide description of its pricing across all markets, which is what this report

¹ 47 C.F.R. § 54.313(i).

² Frontier notes that section 4.2 of the Commission's rules, which governs disruptions of communications service, states that reports of service disruptions are "presumed to be confidential." 47 C.F.R. § 4.2.

provides. This information is competitively sensitive as pricing is a key component of broadband competition and is not normally released to the public at this scale; release of such sensitive data could give Frontier's competitors an advantage in the markets described therein.³

The non-redacted submissions have been marked as confidential. Frontier requests that the documents marked as confidential be withheld from public inspection. Frontier is also filing a redacted copy of this report for public inspection.

State	Study Area Name	SAC
AL	Frontier Comm. of Alabama, Inc.	250306
AL	Frontier Comm. of Lamar County	250301
AL	Frontier of the South - Alabama	250318
AZ	CTC White Mountains	454426
AZ	CTC Mohave (Rural)	452172
AZ	Frontier Comm. of the Southwest, Inc (AZ-Contel)	452302
AZ	Navajo Comm - Arizona	454449
CA	CTC California	542308
CA	CTC Golden St	543402
CA	CTC Tuolomne	544342
CA	Frontier Comm. of the Southwest, Inc (CA-Contel)	541863
CA	Frontier West Coast, Inc (CA)	542344
CA	Global Valley Networks, Inc.	542315
СТ	The Southern New England Telephone Company (SNET)	135200
FL	Frontier of the South - Florida	210318
GA	Frontier Comm. of Fairmount	220362
GA	Frontier Comm. of Georgia, Inc.	220387
IA	Frontier Comm. of Iowa, Inc.	351127
ID	CTC Idaho	474427
ID	Frontier Comm. Northwest, Inc (ID-GTE)	472416
IL	CTC Illinois	341183
IL	Frontier Comm Schuyler, Inc.	341079
IL	Frontier Comm Midland, Inc.	341055
IL	Frontier Comm. of Illinois, Inc.	341038
IL	Frontier Comm. of Lakeside, Inc.	341011
IL	Frontier Comm. of Mt. Pulaski	341061
IL	Frontier Comm. of Orion, Inc.	341067
IL	Frontier Comm. of Prairie, Inc.	341073
IL	Frontier Comm. of the Carolinas, Inc (IL-Alltel)	343035
IL	Frontier CommDePue, Inc.	340998
IL	Frontier North, Inc (IL-GTE)	341015
IL	Frontier North, Inc. (IL-Contel)	341036
IN	Frontier Comm. of Indiana, Inc.	320750
IN	Frontier Comm. of Thorntown, Inc.	320828
IN	Frontier Midstates, Inc (IN-Alltel)	323034
IN	Frontier North, Inc (IN-Contel)	320779
IN	Frontier North, Inc (IN-GTE)	320772

Frontier submits today information for all of its 92 study areas:

³ Frontier notes that section 4.2 of the Commission's rules, which governs disruptions of communications service, states that reports of service disruptions are "presumed to be confidential." 47 C.F.R. § 4.2.

MI	Frontier Comm. of Michigan, Inc.	310682
MI	Frontier Midstates, Inc (MI-Alltel)	313033
MI	Frontier North, Inc (MI-GTE)	310695
MN	CTC Minnesota-Lakes (Includes MN, ND and SD)	361123
MN	CTC Minnesota-Lakes (includes with, the and SD)	367123
MN	Frontier Comm. of Minnesota, Inc.	361367
MS		
	Frontier Comm. of Mississippi CTC Montana	280460
MT		484322
NC NC	Frontier Comm. of the Carolinas, Inc (NC-Contel)	230509
	Frontier Comm. of the Carolinas, Inc (NC-GTE)	230479
NE	CTC Nebraska	371128
NM	Navajo Comm - New Mexico	494449
NV	CTC of Nevada - North	554431
NV	CTC of Nevada - South	554432
NV	Frontier Comm. of the Southwest, Inc (NV-Contel)	552302
NY	CTC of NY - Red Hook	154533
NY	CTC of NY - Upstate	154532
NY	CTC of NY - Western Counties	154534
NY	CTC Ogden, Inc.	150110
NY	Frontier Comm. of New York	150100
NY	Frontier Comm. of Sylvan Lake	150128
NY	Frontier CommAusable Valley	150072
NY	Frontier CommSeneca Gorham	150122
NY	Frontier Telephone of Rochester	150121
OH	Frontier North, Inc (OH-GTE)	300615
OH	Frontier of Michigan, Inc Ohio	300682
OR	CTC Oregon	533401
OR	Frontier Comm. Northwest, Inc (OR-GTE)	532416
PA	Commonwealth of PA	170161
PA	Frontier Comm. of Breezewood	170149
PA	Frontier Comm. of Canton, Inc.	170152
PA	Frontier Comm. of Oswayo River	170194
PA	Frontier Comm. of Pennsylvania	170168
PA	Frontier Comm.of Lakewood, Inc	170178
SC	Frontier Comm. of the Carolinas, Inc (SC-Contel)	240526
SC	Frontier Comm. of the Carolinas, Inc (SC-GTE)	240479
TN	CTC Tennessee	294336
TN	CTC Volunteer State	290580
UT	CTC Utah	504429
UT	Navajo Comm - Utah	504449
WA	Frontier Comm. Northwest, Inc (WA-Contel)	522449
WA	Frontier Comm. Northwest, Inc (WA-GTE)	522416
WI	Frontier Comm of St. Croix	330944
WI	Frontier Comm. of Mondovi, Inc.	330912
WI	Frontier Comm. of Viroqua, Inc.	330967
WI	Frontier Comm. of Wisconsin, Inc.	330964
WI	Frontier North, Inc (WI-GTE)	330886
WI	Rhinelander Telco - Crandon	330870
WI	Rhinelander Telco - Headwaters	330891
WI	Rhinelander Telco - Rhinelander	330940
WI	Rhinelander Telco - Rib Lake	330941
WV	CTC West Virginia - Bluefield	204339
WV	CTC West Virginia - Mountain St.	200271

WV	CTC West Virginia - St. Marys	204338
WV	Frontier West Virginia, Inc	205050

Please feel free to contact me with any further questions.

Sincerely,

/s/ AJ Burton

AJ Burton Director of Federal Regulatory Affairs Frontier Communications (202) 223-6807

Attachment

cc: Alexander Minard

FCC For	m 481 - Carrier Annual Reporting Data Collection Form	CTED FOR PUBLIC INSI		C Form 481 VB Control No. 3060-0986/OMB Contro vy 2013	l No. 3060-0819
<010>	Study Area Code	522416			
<015>	Study Area Name	Frontier Communications	s Northwest, Inc.		
<020>	Program Year	2016			
<030>	Contact Name: Person USAC should contact with questions about this data	Cassandra Guinness			
<035>	Contact Telephone Number: Number of the person identified in data line <0302	5857774557 ext.			
<039>	Contact Email Address: Email of the person identified in data line <030>	Cassandra.guinness@ftr.	.com		
ANNUA	L REPORTING FOR ALL CARRIERS			54.313 Completion Required (check box w	54.422 Completion Required
<100>	Service Quality Improvement Reporting	(co	mplete attached worksh		
<200>	Outage Reporting (voice)	(co	mplete attached worksh	eet)	✓
<210>	< check box if	no outages to report			
<300>	Unfulfilled Service Requests (voice)			L	
<310>	Detail on Attempts (voice)			✓	
<310>	Detail of Attempts (Voice)			<u> </u>	
				(attach descriptive document)	
<320>	Unfulfilled Service Requests (broadband)				
<220×	522416WA330.pdf			√	
<330>	Detail on Attempts (broadband)			(attach descriptive document)	
<400>	Number of Complaints per 1,000 customers (voice)		1	
<410>	Fixed 0.32			✓	_ √
<420> <430>	Number of Complaints per 1,000 customers (broad	dhand)			
<440>	Fixed 0.01				
<450>	Mobile 0.0 Service Quality Standards & Consumer Protection	Bulos Complianco			
<500>	522416WA510.pdf		heck to indicate certifica	tion) ✓	
<510>			(attached descriptive do	ocument) 🗸	√
<600>	Functionality in Emergency Situations	(c	heck to indicate certifica	tion)	
	522416WA610.pdf				
		(at	tached descriptive docun	ment)	√
<610>					
<700>	Company Price Offerings (voice)		omplete attached worksł	heet)	//////
	Company Price Offerings (broadband)		omplete attached worksh		
<800>	Operating Companies and Affiliates	(c	omplete attached works	heet)	✓
	Tribal Land Offerings (Y/N)?	(if yes, co	omplete attached worksh	heet)	
<1000>	Voice Services Rate Comparability Certification	Yes		¥	777777
	522416WA1010.pdf				
<1010>		(0	attach descriptive docum	nent) 🗸	
(1100)					
<1100>	Certify whether terrestrial backhaul options exist	(Yes or No)	(if not, check to indicate o	certification)	
<1110>	Terms and Condition for Lifeline Customers		complete attached works	111111	
~1200>	Price Cap Carriers, Proceed to Price Cap Additiona		complete attached works	ileet)	
	Including Rate-of-Return Carriers affiliated with F				
<2000>			heck to indicate certificat	tion)	
<2005>			omplete attached worksh	neet)	
<3000>	Rate of Return Carriers, Proceed to <u>ROR Additiona</u>		<u>et</u> heck to indicate certificat	tion)	11111
<3005>			omplete attached worksh		

-

Data Collection Form OMB Control No. 3060-0386/OMB Control No. 3060 <010> Study Area Code \$203416 <010> Study Area Code \$203416 <010> Study Area Name Promiter Commutentions Northwest, Inc. <020> Contact Name - Person USAC should contact regarding this data \$203616 <030> Contact Telephone Number - Number of person identified in data line <030> \$203714597 <030> Contact Email Address - Email Address of person identified in data line <030> \$203714597 <030> Contact Email Address - Email Address of person identified in data line <030> \$203714597 <031> Has your company received its ETC certification from the FCC? (yes / no) Image: Communication Common State Communication State Communication State Communication State Communication State Communication State Communication Common State Communication State Communication Communication Communication Communication State Communication Co	(100) Se	ervice Quality Improvement Reporting			FCC Form 481	
c015> Study Area Name Program Year 2014 c0200 Program Year 2014 Contact Telephone Number - Number of person identified in data line <0300 Soutact Telephone Number - Number of person identified in data line <0300 Soutact Telephone Number - Number of person identified in data line <0300 Soutact Telephone Number - Number of person identified in data line <0300 Soutact Telephone Number - Number of person identified in data line <0300 Soutact Telephone Number - Number of person identified in data line <0300 c0392 Contact Email Address - Email Address of person identified in data line <0300 Consumtra.guistmesseft:r.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Soutact Telephone Number of person identified in data line <0300 <111> year plan' filed with the FCC? (yes / no) Image: Soutact Telephone Number of person identified in data line <0300 <111> year plan'' no file with the FCC? (yes / no) Image: Soutact Telephone Number of person identified in data line <0300 <112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report on line <112> delineating the status of your company is a CETC which only receives frozen support, your 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. Name of Attached Document <th>Data Co</th> <th>Ilection Form</th> <th></th> <th></th> <th>OMB Control No. 3060-0986/OMB Control No. 3060- July 2013</th> <th>-0819</th>	Data Co	Ilection Form			OMB Control No. 3060-0986/OMB Control No. 3060- July 2013	-0819
<020> Program Year 2014 <030> Contact Name - Person USAC should contact regarding this data Caseandra. Outmeese <035> Contact Telephone Number - Number of person identified in data line <030> 9837774537 ext. <039> Contact Telepidone Number - Service Quality address of person identified in data line <030> Caseandra.gutmeesettr.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Caseandra.gutmeesettr.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Caseandra.gutmeesettr.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Caseandra.gutmeesettr.com <111> year plan" filed with the FCC? (yes / no) Image: Caseandra.gutmeesettr.com <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 on its five-year service quality improvement Plan or, in subsequent years, service quality improvement Plan or, subsequent years, service quality improvement plan pursuant to \$54.202(a). The information shall be submitted at the wire center level or census block as appropriate. Name of Attached Document <113> Maps detailing progress toravdras meeting plan targets service qualit	<010>	Study Area Code	522416			
<030> Contact Name - Person USAC should contact regarding this data Casesandra @uianess <035> Contact Telephone Number - Number of person identified in data line <030> Star774343-guianessettr.com <039> Contact Email Address - Email Address of person identified in data line <030> Casesandra.guianessettr.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Contact Telephone Number - Star74435 (yes / no) Image: Contact Telephone Number - Star74435 (yes / no) Image: Contact Telephone Number - Telep	<015>	Study Area Name	Frontier Co	mmunications Northwest, Inc.		
<035> Contact Telephone Number - Number of person identified in data line <030> b897774557 ext. <039> Contact Email Address - Email Address of person identified in data line <030> Ceasandra.guinness@Etr.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Contact Email Address of person identified in data line <030> Ceasandra.guinness@Etr.com <110> Has your company received its ETC certification from the FCC? (yes / no) Image: Contact Email Address of person identified in data line <030> Ceasandra.guinness@Etr.com <111> year plan" filed with the FCC? (yes / no) Image: Contact Email Address of person identified in data line <030> Ceasandra.guinness@Etr.com <111> year plan" on file with the FCC? (yes / no) Image: Contact Email Address of person identified in garogress <112 year plan" on file with the FCC, as it relates to your provision of voice telephony service. (yes / no) Image: Contact Email Address report file dursuant 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 select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(5), on line 112, contains a progress report is nils its ve-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at	<020>	Program Year	2016			
Contact Telephone Number - Number of person identified in data line <030> Caseandra.guinneseEtx.com <110 Has your company received its ETC certification from the FCC? (yes / no) Image: Contact Telephone Number - Number of person identified in data line <030> <111 Year plan" filed with the FCC? (yes / no) Image: Contact Telephone Number of Parameters <111 year plan" filed with the FCC? (yes / no) Image: Contact Telephone Number of Parameters <111 year plan" filed with the FCC? (yes / no) Image: Contact Telephone Number of Parameters <111 year plan" filed with the FCC? (yes / no) Image: Contact Telephone Number of Parameters <112 Attach Filex-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 select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to 554.202(a). The information shall be submitted at the wire center level or census block as appropriate. Image: Contact Telephone Service (Contact Telephone Service Quality improvement largets How much (USF) was used to improve service quality and how support was used to improve service c	<030>	Contact Name - Person USAC should contact regarding this data				
<110> Has your company received its ETC certification from the FCC? (yes / no) If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 (yes / no) <	<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557	ext.		
Its of company received inserved interventing \$4,202(a) "5 (yes / no.) <111> 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 <111> 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. Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to 554.202(a). The information shall be submitted at the wire center level or census block as appropriate. <113	<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.g	uinness@ftr.com		
<111> 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 select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(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 (USF) was used to improve service quality and how support was used to improve service quality <115 How much (USF) was used to improve service coverage and how support was used to improve service coverage <116 How much (USF) was used to improve service coverage and how support was used to improve service coverage <117 How much (USF) was used to improve service coverage and how support was used to improve service coverage <118 Provide an explanation of network improvement targets not met	<110>		(ye	us / 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 that the attached document(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 much (USF) was used to improve service and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How much (USF) was used to improve service capacity and how support was used to improve service capacity How	<111>		(ve	$(n_0) \bigcirc \bigcirc$		
Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(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 much (USF) was used to improve service quality and how support was used to improve service quality <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity <118> Provide an explanation of network improvement targets not met	<112>	54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. 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 of CETC which only receives frozen support, your progress report is only	company is a			
<114> Report how much universal service (USF) support was received <115> How much (USF) was used to improve service quality and how support was used to improve service quality <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity <118> Provide an explanation of network improvement targets not met		that the attached document(s), on line 112, contains a progress report on its five service quality improvement plan pursuant to §54.202(a). The information shall l	e-year	N	Name of Attached Document	
 <115> How much (USF) was used to improve service quality and how support was used to improve service quality <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity <118> Provide an explanation of network improvement targets not met 	<113>	Maps detailing progress towards meeting plan targets]	
<116> How much (USF) was used to improve service coverage and how support was used to improve service coverage <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity <118> Provide an explanation of network improvement targets not met	<114>	Report how much universal service (USF) support was received				
 <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity <118> Provide an explanation of network improvement targets not met 	<115>	How much (USF) was used to improve service quality and how support was used to improve	ove service quali	ty]	
<118> Provide an explanation of network improvement targets not met		How much (USF) was used to improve service coverage and how support was used to imp	prove service cov	verage]	
	<117>		rove service cap	acity]	
	<118>]	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com

<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS									Did This Outage		
			Outage Start			Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
-							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
ſ												
Ī												
-												
-												
ľ												
ŀ												
-												
ŀ												
-												
-												
_												

(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010> Study Area Code 522416 Study Area Name <015> Frontier Communications Northwest, Inc. <020> Program Year 2016 Contact Name - Person USAC should contact regarding this data <030> Cassandra Guinness <035> Contact Telephone Number - Number of person identified in data line <030> 5857774557 ext. Contact Email Address - Email Address of person identified in data line <030> <039> Cassandra.guinness@ftr.com

<701> Residential Local Service Charge Effective Date

<702> Single State-wide Residential Local Service Charge

<a1> <a2> <a3> <b1> <b2> <b3> <b4> <b5> <c> <703> **Residential Local** Mandatory Extended Area SAC (CETC) State Exchange (ILEC) Rate Type Service Rate State Subscriber Line Charge State Universal Service Fee Service Charge Total per line Rates and Fees -- See attached worksheet

1/1/2015

(710) Broadband Price Offerings		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010> Study Area Code	522416	

<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com

.

						Broadband Service -		.	Usage Allowance
	-			State Regulated		Download Speed	Broadband Service -	Usage Allowance	Action Taken When
-	State	Exchange (ILEC)	Residential Rate	Fees	Total Rate and Fees	(Mbps)	Upload Speed (Mbps)	(GB)	Limit Reached {select }
F									
L									
F									
-									
				 See attacl 	hed				
Γ				worksheet	1				
F									
-									
L									
ŀ	I								
⊢									
Γ									
F									
⊢									
L									

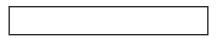
-	Study Area Code				July 2013
			522416		
	Study Area Name		Exection Comm	unications Northwest,	Inc
<020> P	Program Year		2016	unications Northwest,	110.
-		ISAC should contact regarding this data	Cassandra Gui	nness	
		per - Number of person identified in data line <030>	5857774557 ex		
-		mail Address of person identified in data line <030>	Cassandra.gui	inness@ftr.com	
<810> R	Reporting Carrier	Frontier Communications Northwest Inc			
<811> H	Holding Company	Frontier Communications Corporation			
<812> C	Operating Company	Frontier Communications Northwest Inc			
<813>		<a1></a1>		<a2></a2>	<a3></a3>
		Affiliates		SAC	Doing Business As Company or Brand Designation
_					
_					
		······	See atta	ched workshe	ef
			000 a		

(900) Tribal Lands Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<020> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030> <910> Tribal Land(s) on which ETC Serves		Fr 20 Ca <030> 51 2<030> Ca 2<030> Ca Sauk-Suiatt Stillaguami	ish Tribe of Washington Indian Tribal Community
<920>	Tribal Government Engagement Obligation	522416WA92	Name of Attached Document
to confi demons	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to 3(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules	Y Y Y Y	
<926> <927> <928> <929>	Compliance with Facilities Siting rules Compliance with Environmental Review processes Compliance with Cultural Preservation review processes Compliance with Tribal Business and Licensing requirements.	Y	es es es

(1100) No Terrestrial Backhaul Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).



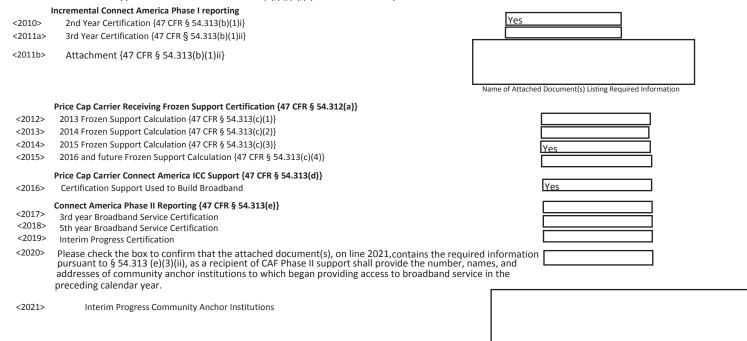
<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).



(1200) Te	rms and Condition for Lifeline Customers	FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form	July 2013
<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <0302	
<039>	Contact Email Address - Email Address of person identified in data line <030	Cassandra.guinness@ftr.com
		522416WA1210.pdf
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
<1210>	Terms & conditions of voice relephony Lifeline Flans	
		Name of Attached Document
<1220>	Link to Public Website	
<1220×	Link to Public website HTTP	//www frontier.com/discountprograms/lifelineprogram
	-	
"Please c	neck 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		
annuany	eport.	
<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,	
12222		
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2000) Price Cap Carrier Additional Documentation FCC Form 481 **Data Collection Form** OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers <010> Study Area Code 52241 <015> Study Area Name Frontier Communications Northwest, Inc <020> Program Year 2016 <030> Contact Name - Person USAC should contact regarding this data Cassandra <035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030>

Select the appropriate responses below (Yes, No, Not Applicable) 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.



Name of Attached Document(s) 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	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035> <039>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com
CHECK t		nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 ne 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 3 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addre providing access to broadband service in the preceding calendar year.	
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	
	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)} If yes, does your company file the RUS annual report	Name of Attached Document Listing Required Information (Yes/No) (Yes/No)
Please	check these boxes to confirm that the attached document(s), on line 301	7, 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 Ca	sh 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)	$\dot{E}ither$ a copy of their audited financial statement; or (2) a financial report $% \dot{E}$ in a financial statement \dot{E} is a copy of the constant \dot{E} in the constant \dot{E} is a copy of the copy of the constant \dot{E} is a copy of the constant \dot{E} is a copy of the copy o	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of C	ash Flows
(3021)	Management letter and audit opinion issued by the independent certified p	Jubic 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) (3025)	Underlying information subjected to an officer certification. Document(s) for Balance Sheet, Income Statement and Statement of Ca	ash Flows
(3026)	Attach the worksheet listing required information	
	l	Name of Attached Document Listing Required Information

	REDACTED FOR PUBLIC INSPECTION
(3000) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com
-		

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends

(TPIS)	

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	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

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: Frontier Communications Northwe	est, Inc.			
Signature of Authorized Officer: CERTIFIED ONLINE		Date 05/14/2015		
Printed name of Authorized Officer: Allison Ellis				
Fitle or position of Authorized Officer: Vice President, Regulate	ory Affairs			
Telephone number of Authorized Officer: 9199413005 ext.				
Study Area Code of Reporting Carrier: 522416	Filing Due Date for this form: 07/01/2015			

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	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.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) also certify that I am an officer of the reporting carrier; r agent; and, to the best of my knowledge, the reports and	is authorized to submit the information reported on behalf of the reporting carrier. responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized lata 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 c	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:

I.

E.

	Certification of Age	ent Authorized to File Annual Reports for CAF or LI Recipients o	on Behalf of Reporting Carrier			
	, 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 he 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	e of Reporting Carrier:					
Name	e of Authorized Agent or Employee of Agent:					
Signa	ture of Authorized Agent or Employee of Agent:		Date:			
Printe	ed name of Authorized Agent or Employee of Age	nt:				
Title (or position of Authorized Agent or Employee of Ag	zent				
Telep	hone number of Authorized Agent or Employee o	f 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, 18 of the United States Code, 18 U.S.C. § 1001.	47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title			

Attachments

Line 100 – Service Quality Improvement Reporting [47 CFR 54.313(a)(1)]

In the FCC's Public Notice DA 14-951, released May 1, 2014, the FCC waived the requirement for price cap ETCs to file a five-year plan.¹

¹ The Public Notice stated, in relevant part:

We now grant a waiver of this requirement for price cap ETCs for an additional year. Because the Bureau just finalized the Connect America Cost Model, and price cap carriers have not yet had the opportunity to make a state-level commitment for Connect America Phase II, we find that it is not in the public interest to require price cap ETCs to file new five-year plans in 2014 for the same reason as last year: they do not yet know which areas they will be serving in the future.

Draft FCC Form 481 (Pending OMB Approval) Line 310 - Unfulfilled Voice Telephony Service Requests Resolution (Business and Residence; No Special Access)

State: Study Area Code: Study Area Name:	WASHINGTON ntier Comm Northwest Inc (WA-C 522416	Year: TE)	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2014, include date of fulfillment)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416		I	1
Study Area Name:	GTE Washington			
(A)	(В)	(C)	(D)	(E)
(/ ()	(8)	(0)		
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Charles			2014	1
State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			-
Study Area Name:	GTE Washington			
	(2)			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

Study Area Name: GTE Washin	gton		-
(A) (B) (C)	(D)	(E)
Date of Potential was Co Customer's Request Unfu	the Request nsidered Ifilled Name of Exchange dd/yyyy) Wire Center	e/ Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416			1
, Study Area Name:	GTE Washington			
	Ū.			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			Low Convice Fulfillment was Attempted /Descen
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)
(,, , , , , , , , , , , , , , ,	((

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
Study Area Name.				
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
(74)		(0)		(-)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

npted/Reason f fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

	·			
State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	Teal.	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Data Whan the Request			
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	Teal.	2014	
Study Area Name:	GTE Washington			
,	Ũ			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	Tear.	2014	
Study Area Name:	GTE Washington			
····, ····				
(-)	(-)		(-)	
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Stata	Washington	Voor	2014	1
State: Study Area Code:	Washington 522416	Year:	2014]
	GTE Washington			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Data Whan the Dequest			
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)
(1111)/00/ 9999)	(חוווי) ממי עישעין	Whe center	Request	(in turnined in 2013, include date of furninent.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	fedi.	2014	
Study Area Name:	GTE Washington			
Study Area Name.				
(A)	(B)	(C)	(D)	(E)
(**)	(-)	()	(-)	(-)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	ieai.	2014	
Study Area Name:	GTE Washington			
····, ···				
(A)	(B)	(C)	(D)	(E)
	Data M/han tha Danwart			
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416		L	1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416		2011	
, Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
		()		
	Date When the Request			
Date of Potential	was Considered		_	How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (D) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

				1
State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			Liou Comics Fulfilles and use Attempted (Dessen
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
	(D)			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014]
(В)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential Customer's Request	was Considered Unfulfilled	Name of Exchange /	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Name of Exchange/ Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416	·		
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416	Teal.	2014	
Study Area Name:	GTE Washington			
,				
(0)	(D)			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Voor	2014	1
Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
Study Area Name.				
(A)	(B)	(C)	(D)	(E)
			()	
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B) Date When the Request	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416		2014	
Study Area Name:	GTE Washington			
,	Ŭ			
(A)	(B)	(C)	(D)	(E)
	Data M/han tha Damaat			
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
	_			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington 522416	Year:	2014]
Study Area Code: Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request	Date When the Request was Considered Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code: Study Area Name:	522416 GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential Customer's Request	was Considered Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	Teal.	2014	
Study Area Name:	GTE Washington			
Study Area Hume.				
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416		-	1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			Liou Consist Fulfilles and use Attempted /Decom
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

				1
State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request (mm/dd/yyyy)	Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
(A) Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered	Name of Exchange/ Wire Center	(D) Description of Service Request	(E) How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
	(D)			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered	Nove of Euclosure (How Service Fulfillment was Attempted/Reason for Unfulfillment
Customer's Request (mm/dd/yyyy)	Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	(If fulfilled in 2013, include date of fulfillment.)
(1111) (12) yyyy	(1111) (11, 10, 19, 19, 19, 19, 19, 19, 19, 19, 19, 19	wire center	Request	

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416		2011	I
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			I
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Sonvice Fulfillment was Attempted /Beason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)
() 0.0, , , , , , , ,				

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(4)	(5)			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

_				1
State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)
			· ·	

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	Tear.	2014	
Study Area Name:	GTE Washington			
,	Ū			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			-
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

o				1
State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
(~)	(8)	(0)		
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416		2011	I
, Study Area Name:	GTE Washington			
	Ŭ			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request		Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request (mm/dd/yyyy)	Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416	Teur.	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416	i cui i	2011	
, Study Area Name:	GTE Washington			
	, , , , , , , , , , , , , , , , , , ,			
(0)				(5)
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered Unfulfilled	Nome of Euchanza /	Departmention of Consist	How Service Fulfillment was Attempted/Reason for Unfulfillment
Customer's Request (mm/dd/yyyy)	(mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	(If fulfilled in 2013, include date of fulfillment.)
(1111) dd/ yyyy)	(חוווי) ממי עישיאין	Whe center	Nequest	(in fullimed in 2013, include date of fulliminent.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
Study Area Name.				
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416	·		
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (D) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
	(0)			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416	rear.	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416	icai.	2014	
Study Area Name:	GTE Washington			
,	Ũ			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request (mm/dd/yyyy)	Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			1
Study Area Name:	GTE Washington			
	(D)	(C)		(5)
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential	Date When the Request was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request (mm/dd/yyyy)	Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
()				
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B) Date When the Request	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code: Study Area Name:	522416 GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014]
(В)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014]
Study Area Code: Study Area Name:	522416 GTE Washington			
Study Area Name.				
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request (mm/dd/yyyy)	Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
				(

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request	Date When the Request was Considered Unfulfilled	Name of Exchange/	Description of Service	How Service Fulfillment was Attempted/Reason for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Washington 522416 GTE Washington	Year:	2014	
(B)	(C)	(D)	(E)
Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
	522416 GTE Washington (B) Date When the Request was Considered Unfulfilled	522416 GTE Washington (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/	522416 GTE Washington (B) (C) (B) (C) Date When the Request was Considered Unfulfilled Name of Exchange/ Description of Service

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(В)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	
Study Area Code:	522416			
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

Chata		Veen	2014	1
State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
Study Area Name.	GIE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State:	Washington	Year:	2014	1
Study Area Code:	522416	i cui.	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
	Date When the Request			
Date of Potential	was Considered			How Service Fulfillment was Attempted/Reason
Customer's Request	Unfulfilled	Name of Exchange/	Description of Service	for Unfulfillment
(mm/dd/yyyy)	(mm/dd/yyyy)	Wire Center	Request	(If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014]
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code: Study Area Name:	Washington 522416 GTE Washington	Year:	2014	
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014	
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

State: Study Area Code:	Washington 522416	Year:	2014]
Study Area Name:	GTE Washington			
(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)

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

The Frontier ILEC companies certify that they comply with applicable state and FCC service quality standards. Service quality metrics are monitored and reported on a monthly basis. Frontier has implemented numerous Consumer Protection measures to protect customer information from improper use and disclosure as well as to protect against fraud. For example, Frontier has implemented Customer Proprietary Network Information (policies and procedures) that are consistent with the FCC's regulations. Frontier regularly trains employees who have access to CPNI on the rules and our procedures for securing accounts and authenticating callers. Frontier also has a comprehensive Identity Theft Protection Program (or Red Flag program) which is consistent with the FTC's guidance on measures to detect and prevent identity theft. All employees are trained on Frontier's Code of Business Conduct and Ethics, which requires employees to protect sensitive customer information from improper use and disclosure. Frontier also has a Data Privacy and Security policy which applies to all employees. Further, Frontier also has implemented a strict third-party qualification protocol to prevent unauthorized charges ("Cramming") from appearing on customer's bills. Frontier also follows a "First Call" resolution policy, which aims to resolve customer complaints about unauthorized charges in one call, without referral to any third party. In addition to the foregoing, Frontier, has implemented customary IT security measures to protect our network and customer information.

Frontier certifies compliance with Washington state consumer protection rules; Washington Chapter 480-120 WAC Telephone Companies.

The Washington state consumer protection rules are available at:

http://apps.leg.wa.gov/wac/default.aspx?cite=480-120

Row 610 - Description of Functionality in Emergency Situations

In December 2013, the FCC adopted new rules to promote 911 resiliency, and it has requested initial certification of substantial progress towards meeting these new requirements by October 15, 2015. *See* DA 14-1664. Frontier is currently in the process of ensuring that its back-up power, circuit auditing, and network monitoring practices comply with these new rules and anticipates that it will be able to provide the necessary certification by October 15, 2015.

As Frontier works to ensure compliance with these new rules, Frontier's past procedures are described below, and they represent the minimum level of functionality of Frontier's network in emergency situations. Again, Frontier anticipates it will comply with the FCC's initial certification by October 15, 2015.

The Frontier ILEC companies certify that they follow best practices that are designed to allow them to remain functional in an emergency situation through the use of back-up power to ensure functionality in the event of a limited commercial power failure. Frontier's policy is that at sites where there is a generator, it will also have batteries capable of providing three-to-four hours of backup power. Sites that are provisioned to allow portable generators typically have up to eight hours of battery backup power available. Frontier adheres to formal maintenance and testing schedules of batteries and generators based on the GTE practices, the Bell standard and manufacturer standards. Batteries are load tested routinely. On site generators are tested monthly with an annual "blackout" test also incorporated. Routine maintenance occurs regularly throughout the year. Portable generators are load tested once a year along with performing the manufacturer recommended maintenance.

The Frontier ILEC companies' network is engineered to provide maximum capacity in order to handle excess traffic in the event of traffic spikes resulting from emergency situations. Frontier audits its circuits in order to provide redundancy in its network where feasible for use in re-rerouting traffic when facilities are damaged.

Data Collection Form OMB Control	No. 3060-0986/OMB Control No. 3060-0819
July 2013	

<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com

<701> Residential Local Service Charge Effective Date

1/1/2015

<702> Single State-wide Residential Local Service Charge

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
WA	All - Flat		FR	13.15	0.0	0.0	0.0	13.15
WA	All - Measured		MS	14.03	0.0	0.0	0.0	14.03
		1	1	1	1	11		·

	Dadband Pri lection Forn	ce Offerings n					FCC Form 4 OMB Contr July 2013	181 rol No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			522416			
<015>	Study Area					ications Northwest, Inc.		
<020>	Program Ye				2016	· · · · · ·		
<030>	-	ame - Person USAC shou	Id contact regarding	this data	Cassandra Guinn	ess		
<035>		lephone Number - Num			5857774557 ext.			
<039>		nail Address - Email Add			Cassandra.guinne	ess@ftr.com		
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	:c> <d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Broadband Service - Broadband Service - Download Speed - Upload Speed (Mbps)		Usage Allowance Action Taken When Limit Reached {select}
	_							

(710) Broa	adband Pri	ice Offerings						FCC Form 48	1			
Data Colle	ection Forr	n							l No. 3060-0986/OMB Control No. 3060-0819			
								July 2013				
<010>	Study Area				522416							
<015>	Study Area	Name				Frontier Communications Northwest, Inc.						
<020>	Program Y				2016							
<030>	Contact Na	ame - Person USAC shou	ld contact regarding t	his data	Cassandra Guinn	ess						
<035>	Contact Te	elephone Number - Num	ber of person identifi	ed in data line <030>	5857774557 ext.							
<039>	Contact En	nail Address - Email Add	ress of person identifi	ied in data line <030>	Cassandra.guinne	ess@ftr.com						
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <c2< th=""><th>> <d1></d1></th><th><d2< th=""><th><pre><d3></d3></pre></th><th>,</th><th><d4></d4></th></d2<></th></c2<></b2>	> <d1></d1>	<d2< th=""><th><pre><d3></d3></pre></th><th>,</th><th><d4></d4></th></d2<>	<pre><d3></d3></pre>	,	<d4></d4>			
		5	Residential	State Regulated	Total Rates	Broadband Service	- Broadband Service	Usage Allowance	Usage Allowance			
	State	Exchange (ILEC)	Rate	Fees	and Fees	Download Speed	-Upload Speed (Mbps) (GB)	Action Taken			
						(Mbps)	- p p (p	,	When Limit Reached {select}			

	adband Pri ection Forr	ce Offerings n							FCC Form 48 OMB Contro July 2013	31 ol No. 3060-0986/OMB Control No. 3060-0819		
<010>	Study Area	a Code				522416						
<015>	Study Area						cations Northwest	The				
<020>	Program Y					2016		., 1				
<030>		ame - Person USAC shou	Ild contact regarding t	this data		Cassandra Guinne	255					
<035>		lephone Number - Num			>	5857774557 ext.						
<039>		nail Address - Email Add				Cassandra.guinne	ss@ftr_com					
					-	ouppunara i garinio						
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< th=""><th>2> <d3< p=""></d3<></th><th>></th><th><d4></d4></th></d2<>	2> <d3< p=""></d3<>	>	<d4></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}		

	adband Pri lection Forr	ce Offerings n							FCC Form 48 OMB Contro July 2013	81 ol No. 3060-0986/OMB Control No. 3060-0819		
<010>	Study Area	a Code			522416							
<015>	Study Area				Frontie	r Communi	ications Northwest	., Inc.				
<020>	Program Y				2016							
<030>	Contact Na	ame - Person USAC shou	Id contact regarding	this data	Cassand	lra Guinne	ess					
<035>	Contact Te	lephone Number - Num	ber of person identifi	ied in data line <030>	5857774	5857774557 ext.						
<039>	Contact Er	nail Address - Email Add	ress of person identif	ied in data line <030>	Cassand	ra.guinne	ess@ftr.com					
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< td=""><td>> <d3< td=""><td>></td><td><d4></d4></td></d3<></td></d2<>	> <d3< td=""><td>></td><td><d4></d4></td></d3<>	>	<d4></d4>		
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total R and Fe			- Broadband Service -Upload Speed (Mbps	Usage Allowance ;) (GB)	Usage Allowance Action Taken When Limit Reached {select}		

(710) Bro	adband Pri	ce Offerings					FCC Form 4	81
ata Coll	ection Forn	n						ol No. 3060-0986/OMB Control No. 3060-0819
							July 2013	
<010>	Study Area	Code			522416			
<015>	Study Area					ications Northwest, Inc.		
<020>	Program Ye	ear			2016			
<030>	Contact Na	ime - Person USAC shou	Ild contact regarding	this data	Cassandra Guinr	less		
<035>		lephone Number - Num			5857774557 ext.			
<039>	Contact En	nail Address - Email Add	Iress of person ident	fied in data line <030>	Cassandra.guinn	ess@ftr.com		
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Broadband Download Speed -Upload Sp (Mbps)		Usage Allowance Action Taken When Limit Reached {select}
						(1115)53		

ata Coll	badband Pri lection Form						FCC Form 48 OMB Contro July 2013	1 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			522416			
<015>	Study Area					ications Northwest, Inc.		
<020>	Program Y				2016			
<030>	Contact Na	ame - Person USAC shou	ld contact regarding	this data	Cassandra Guinn	ess		
<035>	Contact Te	lephone Number - Num	ber of person identif	ied in data line <030>	5857774557 ext.			
:039>	Contact En	nail Address - Email Add	ress of person identi	fied in data line <030>	Cassandra.guinn	ess@ftr.com		
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <c< td=""><td>> <d1></d1></td><td><d2> <d3></d3></d2></td><td></td><td><d4></d4></td></c<></b2>	> <d1></d1>	<d2> <d3></d3></d2>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Broadband Service Download Speed -Upload Speed (Mbps) (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forr	ce Offerings n						FCC Form 48 OMB Contro July 2013	31 Il No. 3060-0986/OMB Control No. 3060-0819			
<010>	Study Area	Code			522416							
<015>	Study Area	Name			Frontier Commun	ications Northwest	t, Inc.					
<020>	Program Y				2016							
<030>	Contact Na	ame - Person USAC shou	ld contact regarding t	his data	Cassandra Guinn	ess						
<035>	Contact Te	lephone Number - Num	ber of person identifi	ed in data line <030>	5857774557 ext.	5857774557 ext.						
<039>	Contact En	nail Address - Email Add	ress of person identif	ied in data line <030>	Cassandra.guinne	ess@ftr.com						
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2< td=""><td>2> <d3></d3></td><td>></td><td><d4></d4></td></d2<>	2> <d3></d3>	>	<d4></d4>			
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		- Broadband Service -Upload Speed (Mbps)	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}			

(710) Bro	D) Broadband Price Offerings FCC Form 481										
Data Coll	ection Forr	n							No. 3060-0986/OMB Control No. 3060-08	319	
								July 2013			
<010>	Study Area				522416						
<015>	Study Area	a Name				ications Northwest	t, Inc.				
<020>	Program Y	ear			2016						
<030>		ame - Person USAC shoul			Cassandra Guinn	888					
<035>		elephone Number - Numb	•		5857774557 ext.						
<039>	Contact En	mail Address - Email Addr	ess of person identi	fied in data line <030>	Cassandra.guinne	ess@ftr.com					
										_	
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	c> <d1></d1>	<d2< th=""><th><d3:< th=""><th>></th><th><d4></d4></th><th></th></d3:<></th></d2<>	<d3:< th=""><th>></th><th><d4></d4></th><th></th></d3:<>	>	<d4></d4>		
		5 (1150)	Residential	State Regulated	Total Rates	Broadband Service	- Broadband Service	Usage Allowance	Usage Allowance		
	State	Exchange (ILEC)	Rate	Fees	and Fees	Download Speed	-Upload Speed (Mbps) (GB)	Action Taken		
						(Mbps)		,	When Limit Reached {select}		

	adband Pri ection Forr	ce Offerings n							FCC Form 48 OMB Contro July 2013	81 bl No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	1 Code			5	22416				
<015>	Study Area				F	rontier Communi	cations Northwest	t, Inc.		
<020>	, Program Y					016				
<030>	-	ame - Person USAC shou	ld contact regarding t	his data	C	Cassandra Guinne	255			
<035>		lephone Number - Num			5	857774557 ext.				
<039>		nail Address - Email Add			· c	assandra.guinne	ss@ftr.com			
			·							
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< th=""><th>2> <d3< th=""><th>></th><th><d4></d4></th></d3<></th></d2<>	2> <d3< th=""><th>></th><th><d4></d4></th></d3<>	>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		Total Rates and Fees		- Broadband Service -Upload Speed (Mbps	Usage Allowance ₅₎ (GB)	Usage Allowance Action Taken When Limit Reached {select}

	lection For	ice Offerings					FCC Form	481 trol No. 3060-0986/OMB Control No. 3060-0819
Data CO	lection For	11					July 2013	
<010>	Study Area	a Code			522416			
<015>	Study Area	a Name			Frontier Commun	ications Northwest, Inc.		
<020>	Program Y				2016			
<030>		ame - Person USAC shou			Cassandra Guinn	ess		
<035>		elephone Number - Num			5857774557 ext.			
<039>	Contact Er	nail Address - Email Add	ress of person identif	ied in data line <030>	Cassandra.guinne	ess@ftr.com		
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <c< th=""><th><d1></d1></th><th><d2></d2></th><th><d3></d3></th><th><d4></d4></th></c<></b2>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Broadbar Download Speed -Upload S (Mbps)		Usage Allowance Action Taken When Limit Reached {select}

(710) Broa	adband Pri	ce Offerings						FCC Form 48	31
Data Colle	ection Forn	n							I No. 3060-0986/OMB Control No. 3060-0819
								July 2013	
<010>	Study Area	Code			522416				
<015>	Study Area	Name			Frontier Commun	ications Northwest	t, Inc.		
<020>	Program Ye	ar			2016				
<030>	Contact Na	me - Person USAC shoul	d contact regarding t	his data	Cassandra Guinn	ess			
<035>	Contact Te	lephone Number - Numl	ber of person identifie	ed in data line <030>	5857774557 ext.				
<039>	Contact Err	nail Address - Email Addı	ress of person identifi	ed in data line <030>	Cassandra.guinn	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	c> <d1></d1>	<d2< th=""><th><pre><d3< pre=""></d3<></pre></th><th>></th><th><d4></d4></th></d2<>	<pre><d3< pre=""></d3<></pre>	>	<d4></d4>
			Residential	State Regulated	Total Rates	Broadband Service	- Broadband Service	Usage Allowance	Usage Allowance
	State	Exchange (ILEC)	Rate	Fees	and Fees		-Upload Speed (Mbps		Action Taken
			hate			(Mbps)	opioda opeea (inope		When Limit Reached {select}

	adband Pri ection Forr	ice Offerings n						FCC Form 48 OMB Contro July 2013	31 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	a Code			522416				
<015>	Study Area	Name			Frontier Commun	ications Northwest	, Inc.		
<020>	Program Y				2016				
<030>		ame - Person USAC shou			Cassandra Guinn	less			
<035>		lephone Number - Nun	· · · · · · · · · · · · · · · · · · ·		5857774557 ext.				
<039>	Contact En	nail Address - Email Add	dress of person identif	ied in data line <030>	Cassandra.guinn	ess@ftr.com			
744	(-1)	<a2></a2>	4-1-	4-25		cha	> <d3< th=""><th></th><th><d4></d4></th></d3<>		<d4></d4>
<711>	<a1></a1>	<97>	<b1></b1>	<b2> <c></c></b2>		<d2< th=""><th></th><th></th><th>Usage Allowance</th></d2<>			Usage Allowance
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		Broadband Service -Upload Speed (Mbps	Usage Allowance) (GB)	Action Taken When Limit Reached {select}

	oadband Pr lection For	ice Offerings n						FCC Form 48 OMB Contro July 2013	1 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Are	a Code			522416				
<015>	Study Are				Frontier Commun:	ications Northwest	t, Inc.		
<020>	Program ۱				2016				
<030>		ame - Person USAC shou	Id contact regarding t	his data	Cassandra Guinn	ess			
<035>	Contact To	lephone Number - Num	ber of person identifi	ed in data line <030>	5857774557 ext.				
<039>		nail Address - Email Add			Cassandra.guinne	ess@ftr.com			
			•						
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	<c> <d1></d1></c>	<d2< th=""><th>2> <d3></d3></th><th>`</th><th><d4></d4></th></d2<>	2> <d3></d3>	`	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		 Broadband Service -Upload Speed (Mbps 	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forn	ce Offerings n							FCC Form 48 OMB Contro July 2013	1 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			522	416				
<015>	Study Area	Name			Fro	ntier Commun	ications Northwest	:, Inc.		
<020>	Program Y	ear			201	6				
<030>	Contact Na	ame - Person USAC shou	ld contact regarding t	his data	Cas	sandra Guinn	ess			
<035>	Contact Te	lephone Number - Num	ber of person identifi	ed in data line <030>	585	7774557 ext.				
<039>	Contact En	nail Address - Email Add	ress of person identifi	ed in data line <030>	Cas	sandra.guinne	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< td=""><td><d3></d3></td><td>•</td><td><d4></d4></td></d2<>	<d3></d3>	•	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		tal Rates d Fees		- Broadband Service -Upload Speed (Mbps	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	oadband Pri lection Forr	ce Offerings n						FCC Form 48 OMB Contro July 2013	31 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			522416				
<015>	Study Area					ications Northwest	Inc		
<020>	Program Y				2016		., 110.		
<030>		ame - Person USAC shou	d contact regarding t	his data	Cassandra Guinn	ess			
<035>		lephone Number - Num			5857774557 ext.				
<039>		nail Address - Email Add			Cassandra.guinne	ess@ftr_com			
					cappanara . garmie	5556101100m			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2< th=""><th><d3:< th=""><th>•</th><th><d4></d4></th></d3:<></th></d2<>	<d3:< th=""><th>•</th><th><d4></d4></th></d3:<>	•	<d4></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}

(710) Broadband Price Offerings FCC Form 481										81
Data Colle	ection For	n							OMB Contro	ol No. 3060-0986/OMB Control No. 3060-0819
									July 2013	
<010>	Study Area	a Code				522416				
<015>	Study Area	a Name				Frontier Communi	ications Northwest	t, Inc.		
<020>	Program Y	ear				2016				
<030>	Contact Na	ame - Person USAC shoul	ld contact regarding t	his data		Cassandra Guinne	ess			
<035>	Contact Te	elephone Number - Numl	ber of person identifie	ed in data line <030>		5857774557 ext.				
<039>	Contact Er	mail Address - Email Addı	ress of person identifi	ed in data line <030>	•	Cassandra.guinne	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< th=""><th>2> <d3></d3></th><th>></th><th><d4></d4></th></d2<>	2> <d3></d3>	>	<d4></d4>
						Total Rates	Broadband Service	- Broadband Service	Usage Allowance	Usage Allowance
	State	Exchange (ILEC)	Residential	State Regulated Fees		and Fees	Download Speed	-Upload Speed (Mbps		Action Taken
			Rate	rees		and rees	(Mbps)	-ohioad sheed (wiphs) (00)	When Limit Reached {select}

(710) Broa	adband Pri	ce Offerings						FCC Form 48	1
Data Colle	ection Forr	n							I No. 3060-0986/OMB Control No. 3060-0819
								July 2013	
<010>	Study Area				522416				
	Study Area	Name				er Communi	ications Northwest, Inc.		
<020>	Program Y				2016				
<030>		ame - Person USAC shou				ıdra Guinne	888		
<035>		lephone Number - Num				4557 ext.			
<039>	Contact Er	nail Address - Email Add	ress of person identif	ied in data line <030>	Cassan	dra.guinne	ess@ftr.com		
	4.		.i. 4.	4.2			دوله		
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2> <d3:< th=""><th></th><th><d4> Usage Allowance</d4></th></d3:<></d2>		<d4> Usage Allowance</d4>
	State	Exchange (ILEC)	Residential	State Regulated	Total I		Broadband Service - Broadband Service	Usage Allowance	Action Taken
	State	_//e//a//86 (/0/	Rate	Fees	and Fe	es	Download Speed -Upload Speed (Mbps) (GB)	
							(Mbps)		When Limit Reached {select}

(710) Broa	adband Pri	ce Offerings						FCC Form 48	1
Data Colle	ection Form	n							l No. 3060-0986/OMB Control No. 3060-0819
								July 2013	
<010>	Study Area	Code			522416				
<015>	Study Area	Name			Frontier Commun	ications Northwest	, Inc.		
<020>	Program Y	ear			2016				
<030>	Contact Na	ame - Person USAC shoul	d contact regarding t	his data	Cassandra Guinn	ess			
<035>	Contact Te	lephone Number - Numl	per of person identifie	ed in data line <030>	5857774557 ext.				
<039>	Contact En	nail Address - Email Addr	ess of person identifi	ied in data line <030>	Cassandra.guinne	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <o< th=""><th>c> <d1></d1></th><th><d2< th=""><th>> <d3></d3></th><th></th><th><d4></d4></th></d2<></th></o<></b2>	c> <d1></d1>	<d2< th=""><th>> <d3></d3></th><th></th><th><d4></d4></th></d2<>	> <d3></d3>		<d4></d4>
			Residential	Ctoto Degulated	Total Rates	Broadband Service	Broadband Service	Usage Allowance	Usage Allowance
	State	Exchange (ILEC)	Rate	State Regulated Fees	and Fees		-Upload Speed (Mbps)		Action Taken
			Nate		andrees	(Mbps)	opioda speca (mops)	, ,	When Limit Reached {select}

	adband Pri ection Forr	ce Offerings n					FCC Form 4 OMB Contr July 2013	81 ol No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			522416			
<015>	Study Area				Frontier Commun	ications Northwest, Inc.		
<020>	Program Y				2016			
<030>	Contact Na	ame - Person USAC shou	ld contact regarding	this data	Cassandra Guinn	ess		
<035>	Contact Te	lephone Number - Num	ber of person identifi	ed in data line <030>	5857774557 ext.			
<039>		nail Address - Email Add			Cassandra.guinne	ess@ftr.com		
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <c< td=""><td><pre><> <d1></d1></pre></td><td><d2></d2></td><td><d3></d3></td><td><d4></d4></td></c<></b2>	<pre><> <d1></d1></pre>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Broadband S Download Speed -Upload Speed		Usage Allowance Action Taken When Limit Beached (select)
						(Mbps)		When Limit Reached {select}

	adband Pri ection Forr	ce Offerings n								1 No. 3060-0986/OMB Control No. 3060-0819
									July 2013	
<010>	Study Area	Code			52241	.6				
<015>	Study Area						ications Northwest, I	Inc.		
<020>	Program Y				2016		,			
<030>		ame - Person USAC shou	d contact regarding	this data	Cassa	andra Guinn	ess			
<035>	Contact Te	lephone Number - Num	per of person identif	ied in data line <030>	58577	774557 ext.				
<039>	Contact En	nail Address - Email Add	ess of person identi	fied in data line <030>	Cassa	ndra.guinn@	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	:c>	<d1></d1>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Tota and	l Rates Fees	Broadband Service - Br Download Speed _{-U} (Mbps)		Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forn	ce Offerings n							FCC Form 48 OMB Contro July 2013	81 ol No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code				522416				
<015>	Study Area	Name				Frontier Communi	ications Northwest	., Inc.		
<020>	Program Y	ear				2016				
<030>	Contact Na	ame - Person USAC shou	ld contact regarding	this data		Cassandra Guinn	ess			
<035>	Contact Te	lephone Number - Num	ber of person identif	ied in data line <030>	>	5857774557 ext.				
<039>	Contact En	nail Address - Email Add	ress of person identi	fied in data line <030	>	Cassandra.guinne	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< td=""><td>> <d3:< td=""><td>></td><td><d4></d4></td></d3:<></td></d2<>	> <d3:< td=""><td>></td><td><d4></d4></td></d3:<>	>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		Total Rates and Fees		- Broadband Service -Upload Speed (Mbps	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forn	ce Offerings n							FCC Form 48 OMB Contro July 2013	1 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			52	22416				
<015>	Study Area				F	rontier Communi	ications Northwest	., Inc.		
<020>	Program Y					016				
<030>	Contact Na	ame - Person USAC shou	Id contact regarding t	this data	C	Cassandra Guinne	285			
<035>		lephone Number - Num			51	857774557 ext.				
<039>	Contact En	nail Address - Email Add	ress of person identif	ied in data line <030>	Ca	assandra.guinne	ss@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< td=""><td>2> <d3></d3></td><td>></td><td><d4></d4></td></d2<>	2> <d3></d3>	>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		Total Rates and Fees		- Broadband Service -Upload Speed (Mbps)	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forn	ce Offerings n							FCC Form 48 OMB Contro July 2013	1 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			52	22416				
<015>	Study Area	Name			Fr	contier Communi	ications Northwest	:, Inc.		
<020>	Program Y	ear			20)16				
<030>	Contact Na	ame - Person USAC shoul	d contact regarding t	this data	Ca	assandra Guinne	888			
<035>	Contact Te	lephone Number - Numl	per of person identifi	ed in data line <030>	58	857774557 ext.				
<039>	Contact En	nail Address - Email Addr	ess of person identifi	ied in data line <030>	Ca	ssandra.guinne	ss@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< th=""><th>> <d3< th=""><th>></th><th><d4></d4></th></d3<></th></d2<>	> <d3< th=""><th>></th><th><d4></d4></th></d3<>	>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		otal Rates and Fees	Broadband Service - Download Speed (Mbps)	- Broadband Service -Upload Speed (Mbps	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forn	ce Offerings n						FCC Form 48 OMB Contro July 2013	81 bl No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			522416				
<015>	, Study Area				Frontier Communi	ications Northwest	t, Inc.		
<020>	Program Y				2016				
<030>	-	ime - Person USAC shou	ld contact regarding t	his data	Cassandra Guinn	ess			
<035>		lephone Number - Num			5857774557 ext.				
<039>		nail Address - Email Add			Cassandra.guinne	ss@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2< th=""><th>2> <d3></d3></th><th>></th><th><d4></d4></th></d2<>	2> <d3></d3>	>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		- Broadband Service -Upload Speed (Mbps	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	oadband Pri lection Forr	ice Offerings n						FCC Form 48 OMB Contro July 2013	31 I No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area				522416				
<015>	Study Area	a Name				ications Northwest	, Inc.		
<020>	Program Y				2016				
<030>		ame - Person USAC sho			Cassandra Guinn	ess			
<035>		elephone Number - Nur			5857774557 ext.				
<039>	Contact Er	nail Address - Email Ad	aress of person identii	ied in data line <030>	Cassandra.guinn	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <c></c></b2>	<d1></d1>	<d2< th=""><th>> <d3:< th=""><th>•</th><th><d4></d4></th></d3:<></th></d2<>	> <d3:< th=""><th>•</th><th><d4></d4></th></d3:<>	•	<d4></d4>
() 11/	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service	- Broadband Service -Upload Speed (Mbps	Usage Allowance	Usage Allowance Action Taken When Limit Reached {select}

	ection Forn	ice Offerings n						FCC Form 48 OMB Control July 2013	31 ol No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	a Code			522416				
<015>	Study Area				Frontier Commu	nications Northwest	t, Inc.		
<020>	Program Ye				2016				
<030>		ame - Person USAC shou	Id contact regarding t	this data	Cassandra Guin	iness			
<035>	Contact Te	elephone Number - Num	ber of person identifi	ed in data line <030>	5857774557 ext				
<039>	Contact En	nail Address - Email Add	ress of person identifi	ied in data line <030>	Cassandra.guin	ness@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	<c> <d1></d1></c>	<d2< th=""><th>2> <d3></d3></th><th>></th><th><d4></d4></th></d2<>	2> <d3></d3>	>	<d4></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}

	adband Pri ection Forn	ce Offerings n							FCC Form 48 OMB Contro July 2013	31 Il No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area	Code			5224	16				
<015>	, Study Area				Fron	tier Commun:	ications Northwest	. Inc.		
<020>	Program Y				2016					
<030>	-	ame - Person USAC shou	ld contact regarding t	his data	Cass	sandra Guinne	ess			
<035>		lephone Number - Num				7774557 ext.				
<039>		nail Address - Email Add			Cass	andra.guinne	ess@ftr.com			
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	:C>	<d1></d1>	<d2< th=""><th>> <d3< th=""><th></th><th><d4></d4></th></d3<></th></d2<>	> <d3< th=""><th></th><th><d4></d4></th></d3<>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		al Rates d Fees	Broadband Service - Download Speed (Mbps)	- Broadband Service -Upload Speed (Mbps	Usage Allowance ;) (GB)	Usage Allowance Action Taken When Limit Reached {select}

	adband Pri ection Forn	ce Offerings n								FCC Form 48 OMB Contro July 2013	31 Il No. 3060-0986/OMB Control No.	3060-0819
<010>	Study Area	Code				522416						
<015>	Study Area	Name				Frontier Communi	ications Northwest	t, Inc.				
<020>	Program Ye	ear				2016						
<030>	Contact Na	ime - Person USAC shou	Id contact regarding t	his data		Cassandra Guinne	ess					
<035>	Contact Te	lephone Number - Num	ber of person identifie	ed in data line <030>		5857774557 ext.						
<039>	Contact En	nail Address - Email Add	ress of person identifi	ed in data line <030>	>	Cassandra.guinne	ess@ftr.com					
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2< th=""><th>!> <</th><th><d3></d3></th><th></th><th><d4></d4></th><th></th></d2<>	!> <	<d3></d3>		<d4></d4>	
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees		Total Rates and Fees		- Broadband Service -Upload Speed (Ml		llowance	Usage Allowance Action Taken When Limit Reached {select}	

	adband Pri ection Forn	ce Offerings n						FCC Form 48 OMB Contro July 2013	31 ol No. 3060-0986/OMB Control No. 3060-0	0819
<010>	Study Area	Code			522416					
	Study Area					cations Northwest	. Inc.			
	Program Y				2016		-,			
		ime - Person USAC shou	Id contact regarding	this data	Cassandra Guinne	285				
<035>		lephone Number - Num			5857774557 ext.					
		nail Address - Email Add			Cassandra.guinne	ss@ftr.com				
			·							
<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2> <</b2>	:c> <d1></d1>	<d2< th=""><th>> <d3;< p=""></d3;<></th><th>></th><th><d4></d4></th><th></th></d2<>	> <d3;< p=""></d3;<>	>	<d4></d4>	
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		- Broadband Service -Upload Speed (Mbps	Usage Allowance) (GB)	Usage Allowance Action Taken When Limit Reached {select}	

(800) Op	erating Companies	FCC Form 481
Data Coll	lection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com
<810>	Reporting Carrier Frontier Communications Northwest Inc	

 <811> Holding Company
 Frontier Communications Corporation

 <812> Operating Company
 Frontier Communications Northwest Inc

<a1></a1>	<a2></a2>	<a3></a3>
Affiliates	SAC	Doing Business As Company or Brand Designation
Frontier Comm. of Alabama, Inc.	250306	Frontier Communications of Alabama, LLC
Frontier Comm. of Lamar County	250301	Frontier Communications of Lamar County, I
Frontier of the South - Alabama	250318	Frontier Communications of the South, LLC
CTC White Mountains	454426	Frontier Communications of the White Mount
Citizens Utilities Rural Company	452172	Frontier Citizens Utilities Rural
Frontier Comm. of the Southwest, Inc (AZ-Contel)	452302	Frontier Communications of the Southwest
Navajo Comm - Arizona	454449	Frontier Navajo Communications / Frontier Navajo Communications C
CTC California	542308	Frontier Communications of California
CTC California (Golden St)	543402	Frontier Communications of California
CTC California (Tuolomne)	544342	Frontier Communications of California
Frontier Comm. of the Southwest, Inc (CA-Contel)	541863	Frontier Communications of the Southwest
CTC California (West Coast)	542344	Frontier Communications of California
CTC-California (Global Valley)	542315	Frontier Communications of California
Frontier of the South - Florida	210318	Frontier Communications of the South, LLC
Frontier Comm. of Fairmount	220362	Frontier Communications of Fairmount LLC
Frontier Comm. of Georgia, Inc.	220387	Frontier Communications of Georgia LLC
Frontier Comm. of Iowa, Inc.	351127	Frontier Communications of Iowa, LLC
CTC Idaho	474427	Frontier Communications of Idaho
Frontier Comm. Northwest, Inc (ID-GTE)	472416	Frontier Communications Northwest Inc.
CTC Illinois	341183	Frontier Citizens Communications of Illing
Frontier Comm Schuyler, Inc.	341079	Frontier Communications - Schuyler, Inc.
Frontier Comm Midland, Inc.	341055	Frontier Communications - Midland, Inc.
Frontier Comm. of Illinois, Inc.	341038	Frontier Communications of Illinois, Inc.

	erating Companies ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	522416	
<015>	Study Area Name	Frontier Communications Northwest, Inc.	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Cassandra.guinness@ftr.com	

<810>	Reporting Carrier	Frontier Communications Northwest Inc
<811>	Holding Company	Frontier Communications Corporation
<812>	Operating Company	Frontier Communications Northwest Inc

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	Frontier Comm. of Lakeside, Inc.	341011	Frontier Communications of Lakeside, Inc.
	Frontier Comm. of Mt. Pulaski	341061	Frontier Communications of Mt. Pulaski, Inc.
	Frontier Comm. of Orion, Inc.	341067	Frontier Communications of Orion, Inc.
	Frontier Comm. of Prairie, Inc.	341073	Frontier Communications - Prairie, Inc.
	Frontier Comm. of the Carolinas, Inc (IL-Alltel)	343035	Frontier Communications of the Carolinas LLC
	Frontier CommDePue, Inc.	340998	Frontier Communications of DePue, Inc.
	Frontier North, Inc (IL-GTE)	341015	Frontier North Inc.
	Frontier North, Inc. (IL-Contel)	341036	Frontier North Inc.
	Frontier Comm. of Indiana, Inc.	320750	Frontier Communications of Indiana LLC
	Frontier Comm. of Thorntown, Inc.	320828	Frontier Communications of Thorntown LLC
	Frontier Midstates, Inc (IN-Alltel)	323034	Frontier Midstates Inc.
	Frontier North, Inc (IN-Contel)	320779	Frontier North Inc.
	Frontier North, Inc (IN-GTE)	320772	Frontier North Inc.
	Frontier Comm. of Michigan, Inc.	310682	Frontier Communications of Michigan, Inc.
	Frontier Midstates, Inc (MI-Alltel)	313033	Frontier Midstates Inc.
	Frontier North, Inc (MI-GTE)	310695	Frontier North Inc.
	CTC Minnesota-Lakes	361123	Frontier Citizens Communications of Minnesot
	CTC Minnesota-South	367123	Frontier Citizens Communications of Minnesot
	Frontier Comm. of Minnesota, Inc.	361367	Frontier Communications of Minnesota, Inc.
	Frontier Comm. of Mississippi	280460	Frontier Communications of Mississippi LLC
	CTC Montana	484322	Frontier Communications of Montana
	Frontier Comm. of the Carolinas, Inc (NC-Contel)	230509	Frontier Communications of the Carolinas LLC
	Frontier Comm. of the Carolinas, Inc (NC-GTE)	230479	Frontier Communications of the Carolinas LLC

(800) Operating Companies Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 30 July 2013		
<010>	Study Area Code	522416		
<015>	Study Area Name	Frontier Communications Northwest, Inc.		
<020>	Program Year	2016		
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness		
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.		

<810>	Reporting Carrier	Frontier Communications Northwest Inc
<811>	Holding Company	Frontier Communications Corporation
<812>	Operating Company	Frontier Communications Northwest Inc

<039> Contact Email Address - Email Address of person identified in data line <030> Cassandra.guinness@ftr.com

>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	CTC Nebraska	371128	Frontier Communications of Nebraska
	Navajo Comm - New Mexico	494449	Frontier Navajo Communications / Frontier Navajo Communications Compa
	CTC of Nevada - North	554431	Fronter Communications of Nevada
	CTC of Nevada - South	554432	Fronter Communications of Nevada
	Frontier Comm. of the Southwest, Inc (NV-Contel)	552302	Frontier Communications of the Southwest Inc
	CTC of NY - Red Hook	154533	Frontier Communications of New York
	CTC of NY - Upstate	154532	Frontier Communications of New York
	CTC of NY - Western Counties	154534	Frontier Communications of New York
	CTC Ogden, Inc.	150110	Frontier Ogden Telephone Company
	Frontier Comm. of New York	150100	Frontier Communications of New York, Inc.
	Frontier Comm. of Sylvan Lake	150128	Frontier Communications of Sylvan Lake, Inc.
	Frontier CommAusable Valley	150072	Frontier Communications of AuSable Valley, I
	Frontier CommSeneca Gorham	150122	Frontier Communications of Seneca-Gorham, In
	Frontier Telephone of Rochester	150121	Frontier Telephone of Rochester, Inc.
	Frontier North, Inc (OH-GTE)	300615	Frontier North Inc.
	Frontier of Michigan, Inc Ohio	300682	Frontier Communications of Michigan, Inc.
	CTC Oregon	533401	Frontier Communications of Oregon
	Frontier Comm. Northwest, Inc (OR-GTE)	532416	Frontier Communications Northwest Inc.
	Commonwealth of PA	170161	Frontier Communications Commonwealth Telephone Com
	Frontier Comm. of Breezewood	170149	Frontier Communications of Breezewood, LLC
	Frontier Comm. of Canton, Inc.	170152	Frontier Communications of Canton, LLC
	Frontier Comm. of Oswayo River	170194	Frontier Communications of Oswayo River LLC
	Frontier Comm. of Pennsylvania	170168	Frontier Communications of Pennsylvania, LLC

(800) Op	erating Companies	FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
		July 2015
<010>	Study Area Code	522416
<015>	Study Area Name	Frontier Communications Northwest, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.

<810>	Reporting Carrier	Frontier Communications Northwest Inc
<811>	Holding Company	Frontier Communications Corporation
<812>	Operating Company	Frontier Communications Northwest Inc

<039> Contact Email Address - Email Address of person identified in data line <030> Cassandra.guinness@ftr.com

813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	Frontier Comm.of Lakewood, Inc	170178	Frontier Communications of Lakewood, LLC
	Frontier Comm. of the Carolinas, Inc (SC-Contel)	240526	Frontier Communications of the Carolinas LLC
	Frontier Comm. of the Carolinas, Inc (SC-GTE)	240479	Frontier Communications of the Carolinas LLC
	CTC Tennessee	294336	Frontier Communications of Tennessee
	CTC Volunteer State	290580	Frontier Communications of the Volunteer Stat
	CTC Utah	504429	Frontier Communications of Utah
	Navajo Comm - Utah	504449	Frontier Navajo Communications / Frontier Navajo Communications Company
	Frontier Comm. Northwest, Inc (WA-Contel)	522449	Frontier Communications Northwest Inc.
	Frontier Comm. Northwest, Inc (WA-GTE)	522416	Frontier Communications Northwest Inc.
	Frontier Comm of St. Croix	330944	Frontier Communications - St. Croix LLC
	Frontier Comm. of Mondovi, Inc.	330912	Frontier Communications of Mondovi LLC
	Frontier Comm. of Viroqua, Inc.	330967	Frontier Communications of Viroqua LLC
	Frontier Comm. of Wisconsin, Inc.	330964	Frontier Communications of Wisconsin LLC
	Frontier North, Inc (WI-GTE)	330886	Frontier North Inc.
	Rhinelander Telco - Crandon	330870	Frontier Rhinelander Telephone Company
	Rhinelander Telco - Headwaters	330891	Frontier Rhinelander Telephone Company
	Rhinelander Telco - Rhinelander	330940	Frontier Rhinelander Telephone Company
	Rhinelander Telco - Rib Lake	330941	Rib Lake Telecom, Inc.
	CTC West Virginia - Bluefield	204339	Frontier Communications of West Virginia
	CTC West Virginia - Mountain St.	200271	Frontier Communications of West Virginia
	CTC West Virginia - St. Marys	204338	Frontier Communications of West Virginia
	Frontier West Virginia, Inc	205050	Frontier West Virginia Inc.
	The Southern New England Telephone Company	135200	Frontier Communications of Connecticut

Line 920 – Tribal Government Engagement Obligation

During the months of June and July of 2014, the company contacted the respective tribal leader for each Tribal Land identified on line 910 by mailing via U.S. Postal Service, Certified Mail an Annual Tribal Government Engagement letter, which an example is included as Attachment "A". The letter included a copy of the Public Notice, released July, 19, 2012 by the Office of Native Affairs and Policy, Wireless Telecommunications Bureau and Wireline Competition Bureau which provided further guidance on the Tribal engagement obligation and an informational bulletin describing the Federal Tribal Lifeline and Tribal Linkup support programs.

In addition, the company's local general manager or representative responsible for making decisions contacted each tribal leader via telephone or, in some cases, in person to initiate on-going discussions to address the Tribal engagement obligations.

Attachment "A"

 \mathbf{i}



595 Pease Road Burlington, WA 98233

July 30, 2014

Mr. Brian Cladoosby, Chairman Swinomish Indian Tribal Community 11404 Moorage Way La Conner, WA 98257

RE: Annual Tribal Government Engagement and Lifeline Availability

Dear Chairman Cladoosby:

In November 2011 the Federal Communications Commission (FCC) issued its *USF/ICC Transformation Order* reforming the federal Universal Service Fund (USF) and intercarrier compensation system.¹ As part of the *USF/ICC Transformation Order*, the FCC adopted a Tribal government engagement requirement for all eligible telecommunications carriers that are currently serving or are seeking to serve tribal lands.² The Tribal government engagement requirement is intended to benefit Tribal government leaders, communication service providers and consumers living on Tribal lands, ultimately providing greater connectivity to 21st century economic opportunities, education, health care and public safety.

Enclosed is a copy of the Public Notice released July 19, 2012, by the FCC's Office of Native Affairs and Policy, which provides further guidance on the Tribal government engagement obligations.

At your earliest convenience, I would appreciate hearing from you in order to schedule a meeting and begin discussing these important issues which are vitally important to the successful deployment and provision of communication services on Tribal lands.

I have also enclosed an informational bulletin which describes the Federal Tribal Lifeline and Tribal Linkup support programs available to eligible residents of Tribal lands. I hope you find this information helpful and will share it with your tribal members and constituents.

Sincerely,

use Sperle

Denise Sperle General Manager

Telephone: 360-757-6140 Email: <u>denise.sperle@ftr.com</u>

Attachments

¹ See Connect America Fund, et al., W.C. Docket. No. 10-90 et al., Report and Order and Further Notice of

Proposed Rulemaking, 26 FCC Rcd. 17663, FCC 11-161 (rel. November. 18, 2011).

² See id., at para. 637.

FC PUBLIC NOTICE

Federal Communications Commission 445 12th St., S.W. Washington, D.C. 20554

News Media Information 202 / 418-0500 Internet: http://www.fcc.gov TTY: 1-888-835-5322

> DA 12-1165 Released: July 19, 2012

OFFICE OF NATIVE AFFAIRS AND POLICY, WIRELESS TELECOMMUNICATIONS BUREAU, AND WIRELINE COMPETITION BUREAU ISSUE FURTHER GUIDANCE ON TRIBAL GOVERNMENT ENGAGEMENT OBLIGATION PROVISIONS OF THE CONNECT AMERICA FUND

WC Docket Nos. 10-90, 07-135, 05-337, 03-109 CC Docket Nos. 01-92, 96-45 WT Docket No. 10-208 GN Docket No. 09-51

I. INTRODUCTION AND SUMMARY

1. By this Public Notice, the Federal Communications Commission's (FCC or Commission) Office of Native Affairs and Policy (ONAP), in coordination with the Wireless Telecommunications and Wireline Competition Bureaus (the Bureaus), provides further guidance on the Tribal engagement obligation adopted in the USF/ICC Transformation Order.¹ This document is intended to facilitate the required discussions between Tribal government officials and communications providers either currently providing or seeking to provide service on Tribal lands with the use of Universal Service Fund (USF) support.²

2. The broad goal of the guidance provided today, and future efforts to establish best practices, is to ensure the effective exchange of information that will lead to a common understanding between Tribal governments and communications providers receiving USF support, on the deployment and improvement of communications services on Tribal lands. The Tribal engagement obligation is intended to benefit Tribal government leaders, service providers, and consumers living on Tribal lands, ultimately providing greater connectivity to 21st century economic opportunities, education, health care, and public safety. This obligation is related to the very essence of universal service – facilitating and supporting connectivity to and from the most remote areas of our nation inures to the benefit of all. Requiring Tribal engagement is intended to begin and, in some cases, to strengthen, the dialogue between communications providers and Tribal governments. We anticipate that genuine dialogue and common understandings will ultimately lead to improvement of communications services on Tribal lands.

¹ See Connect America Fund, WC Docket No. 10-90 et al., Report and Order and Further Notice of Proposed Rulemaking, 26 FCC 17663 at 17868-69, para. 637 (2011) (USF/ICC Transformation Order); pets. for review pending sub nom. In re: FCC 11-161, No. 11-9900 (10th Cir. filed Dec. 18, 2011).

² See id. In the context of the USF/ICC Transformation Order, "Tribal lands" is defined as "any federally recognized Indian tribe's reservation, pueblo or colony, including former reservations in Oklahoma, Alaska Native regions established pursuant to the Alaska Native Claims Settlements [sic] Act (85 Stat. 688), and Indian Allotments, see 47 C.F.R. § 54.400(e), as well as Hawaiian Home Lands—areas held in trust for native Hawaiians by the state of Hawaii, pursuant to the Hawaiian Homes Commission Act, 1920, Act July 9, 1921, 42 Stat. 108, et seq., as amended." Id. at para. 125, n.197.

3. Good guidance, by definition, must include assistance on how to undertake an endeavor with an aim towards success. Any attempt at actual and meaningful dialogue must be predicated on the genuineness of the intent on both sides. This engagement cannot be viewed as simply another "check the box" requirement by either party. In many places, we expect that there are good and productive relationships between communications providers and Tribal Nations. To the extent that there might be existing differences, however, the parties should put aside those differences for the purposes of this engagement. This engagement process should not be approached as an adversarial undertaking. Instead, Tribal governments and carriers should take advantage of the engagement to improve communications and foster a greater common understanding of the factors necessary to deploy and sustain services on Tribal lands, as well as an honest dialogue to learn from one another what factors would lead to success in those endeavors. In all cases, a high degree of receptivity and responsiveness is necessary to achieve meaningful dialogue, as well as confidence in the reliability of information exchanged. Candid and sincere dialogue on both sides will minimize the possibility that unreasonable expectations by either party will derail common understandings and genuine solutions.

4. Creating a substantive, meaningful dialogue is an iterative process, one which, in certain regions, is at its earliest stages of development. In a similar sense, the further guidance contained in this Public Notice represents the first step in the Commission's implementation of the Tribal engagement obligation. We recognize that priorities and plans of individual Tribal governments and individual service providers can vary greatly, as do the existing relationships between Tribal governments and carriers currently serving Tribal lands. Therefore, there is no one size fits all guidance that can be provided that will be universally applicable. As a result, the guidance provided herein is somewhat general in nature at this stage, but we anticipate that our guidance, as well as the development of best practices, will evolve over time based on initial implementation experiences and the feedback of both Tribal governments and communications providers.

5. ONAP, in coordination with the Bureaus, will track and monitor this feedback and will develop further guidance in the form of best practices based on actual experiences.³ In an effort to further facilitate engagement efforts at this initial stage, ONAP will employ training and industry meeting opportunities, as well as its coordination events with Tribal Nations. These efforts will include, for example, working with national and regional communications industry associations and national and regional inter-Tribal government associations and organizations.⁴ ONAP will focus particular efforts -- for example, by identifying commonalities, increasing efficiencies, building upon current working relationships, and engaging all regional stakeholders, as appropriate -- to foster engagement in states and regions in which Tribes and providers are particularly remote and in which Tribes are particularly numerous.⁵ ONAP, in coordination with the Bureaus, will continue to serve as a resource for Tribal governments and communications providers and is always available for individually tailored assistance.

³ See id. at para. 637, n.1054 (directing ONAP, in coordination with the Bureaus, to develop best practices).

⁴ See Letter from the Hon. Mark Begich, United States Senator, State of Alaska; the Hon. Lisa Murkowski, United States Senator, State of Alaska; and the Hon. Don Young, United States Congressman, State of Alaska, to the Hon. Julius Genachowski, Chairman, FCC, dated Feb. 22, 2012 ("[W]e request that you work with the tribal groups, carriers and the State of Alaska to clarify the tribal consultation requirements included in the reform order"). See also Letter of Becky Hultberg, Commissioner, Department of Administration, State of Alaska, to the Hon. Julius Genachowski, Chairman, FCC, dated February 17, 2012.

⁵ For example, there are 229 federally recognized Tribes in Alaska, 108 in California, 38 in Oklahoma, 23 in New Mexico, and 21 in Arizona. *See* Federal Register Notice – Indian Entities Recognized and Eligible to Receive Services from the United States Bureau of Indian Affairs, 75 Fed. Reg. 60,810 (Oct. 1, 2010). *See also* Supplemental Federal Register Notice – Indian Entities 1 Page Recognized and Eligible to Receive Services from the United State Bureau of Indian Affairs, 75 Fed. Reg. 66,124 (Oct. 27, 2010).

II. BACKGROUND

6. In the USF/ICC Transformation Order, the Commission adopted a Tribal engagement requirement for all eligible telecommunications carriers (ETCs) either currently serving or seeking to serve Tribal lands.⁶ The Commission agreed with commenters that engagement between Tribal governments and communications providers is vitally important to the successful deployment of and provision of service on Tribal lands.⁷

7. The Commission therefore required, at a minimum, that ETCs demonstrate on an annual basis that they have meaningfully engaged with Tribal governments in their universal service supported areas.⁸ At a minimum, the *USF/ICC Order* stated that such discussions must include: (1) a needs assessment and deployment planning with a focus on Tribal community anchor institutions; (2) feasibility and sustainability planning; (3) marketing services in a culturally sensitive manner; (4) rights of way processes, land use permitting, facilities siting, environmental and cultural preservation review processes; and (5) compliance with Tribal business and licensing requirements.⁹ Failure to satisfy the Tribal engagement obligation will subject ETCs to financial consequences, including potential reduction in universal service support should they fail to fulfill their engagement obligations.¹⁰

8. In requiring Tribal engagement, the Commission did not intend to supplant its own ongoing obligation to consult with Tribes on a government-to-government basis, but instead recognized the important role that all parties play in expediting communications service to Tribal lands throughout the nation, including in Alaska and Hawaii.¹¹ ETCs will be required to submit to the Commission and appropriate Tribal government officials an annual certification and summary of their compliance with the Tribal government engagement obligation as part of the new Connect America Fund reporting requirements.¹² The Commission defined appropriate Tribal government officials as elected or duly authorized government officials of federally recognized American Indian Tribes and Alaska Native Villages.¹³ For Hawaiian Home Lands, this engagement must occur with the State of Hawaii Department of Hawaiian Home Lands and the Office of Hawaiian Affairs.¹⁴ The Commission delegated to ONAP, in coordination with the Bureaus, the authority to develop specific procedures regarding the Tribal

⁸ Id. at para. 637. See also 47 C.F.R. §§ 54.313(a)(9), 54.1004(d), 54.1009.

⁹ Id.

¹⁰ See USF/ICC Transformation Order, 26 FCC Rcd at 17868-69, para. 637.

¹¹ Id.

¹² Id. See also id. at para. 575 ("Under this uniform framework, ETCs will provide annual reports and certifications regarding specific aspects of their compliance with public interest obligations to the Commission, USAC [the Universal Service Administrative Company], and the relevant state commission, relevant authority in a U.S. Territory, or Tribal government, as appropriate by April 1 of each year.") See generally id. at paras. 576-606 (articulating specific reporting requirements). See also Connect America Fund, WC Docket No. 10-90 et al., Order, 27 FCC Rcd 2142 at 2144-47, paras. 4-14 (2012) (USF/ICC Clarification Order) (revising and clarifying certain reporting obligations for recipients of Connect America Fund support).

¹³ USF/ICC Transformation Order, 26 FCC Rcd at 17869, para. 637, n.1053.

¹⁴ Id.

⁶ See USF/ICC Transformation Order, 26 FCC Rcd at 17868-69, para. 637.

⁷ Id. Mobility Fund and Tribal Mobility Fund Phase I winning bidders will be required to comply with this Tribal engagement obligation at the long-form application stage, in annual reports, and prior to any disbursement of support. Id. at para. 489. We note, however, that any such engagement must be done consistent with our auction rules prohibiting certain communications during the competitive bidding process. Id. at para. 810. In the Further Notice of Proposed Rulemaking, the Commission proposed to apply the same Tribal engagement obligation to Phase II of the general and Tribal Mobility Funds and sought comment on that proposal. Id. at para. 1166.

engagement process, as necessary.¹⁵ The Commission also directed ONAP, in coordination with the Bureaus, to develop best practices regarding the Tribal engagement process to help facilitate these discussions.¹⁶

III. FURTHER GUIDANCE ON THE TRIBAL GOVERNMENT ENGAGEMENT OBLIGATION

A. Overview/General Guidance

9. As stated above, the purpose of this guidance is to ensure the effective exchange of information between Tribal governments and communications providers concerning the deployment and improvement of communications services on Tribal lands throughout the nation, including in Alaska and Hawaii. This exchange of information should foster new opportunities for genuine dialogue that could achieve an alignment of interests and goals. Between certain carriers and Tribal governments, this will be an opportunity for introduction and dialogue in the first instance. In other parts of the country, this will be an opportunity for a new depth of dialogue and more meaningful interaction. An important goal of this guidance is the achievement of a level of engagement between principals on both sides that represents collaborative discussions and actual live conversation.¹⁷ We encourage stakeholders to go beyond merely perfunctory exchanges of basic documents, simplistic sales or marketing presentations, or one-dimensional lists of demands.

10. It is imperative that this dialogue be undertaken at a level within communications providers and Tribal governments that is commensurate with this important engagement requirement. The discourse should be between decision-makers on both sides. While it may be necessary to include administrative staff on both sides to administer and maintain the continuity of relations, this engagement cannot be merely between sales and marketing individuals on one side and administrative staff or advisors on the other. The perspectives on needs, expectations, priorities, and abilities that would formulate meaningful exchange often can come only from those with the requisite authority to make decisions.

11. On the Tribal government side, there are certain actions that should be taken to best prepare for this valuable engagement. It is important for Tribal leaders to recognize and act upon this opportunity to become organized, maintain continuity, and provide for certainty in conveying their communications needs and priorities. The Commission has long recognized the right of sovereign Tribal governments "to set their own communications priorities and goals for the welfare of their membership."¹⁸ This is a critical time for Tribal Nations to update and make comprehensive their communications priorities and goals. Tribal governments should consider all community needs that would be supported by communications services. These might include, but are not limited to, anchor institutions, economic development, education, healthcare, and public safety. Each Tribal Nation has unique elements to its communications needs and priorities, but effectively articulating those needs is a critical first step in addressing them.

12. As Tribal government administrations change and develop, this is an important opportunity to demonstrate, both to communications providers and to the Commission, their continuity in communications priorities and goals. Certain Tribal governments have created their own governmental

¹⁵ *Id.* Although our focus here is on providing guidance, the Commission thus will consider the need for further guidance, or to clarify the existing rules regarding Tribal engagement or pursue new rules with specific procedures, if warranted in the future based on actual experiences and outcomes resulting from this guidance.

¹⁶ Id. at n.1054.

¹⁷ For example, engagement may occur when necessary by phone or video conference where extreme weather conditions and/or extreme remoteness are present.

¹⁸ Statement of Policy on Establishing a Government-to-Government Relationship with Indian Tribes, 16 FCC Rcd 4078, 4080-81 (2000) (*Tribal Policy Statement*).

offices and commissions to interact with the FCC and communications providers. Others have designated key members of their Tribal Councils to lead their communications prerogatives for their governments, in effect creating communications committees on their Councils. Other Tribes have yet to organize their governmental or administrative systems with respect to communications services. This engagement obligation necessitates a level of organization within the Tribal government that can convey both a high degree of certainty in the communications priorities of the Tribal Nation and maintain the continuity of those priorities to the greatest extent possible in a governmental environment that, by definition, changes over time. Updating Tribal communications priorities and goals, and ensuring the establishment of effective organizational structures concerning communications issues, are important first steps. However, ETCs must begin the Tribal engagement process this year to be able to report on meaningful engagement by July 1, 2013.¹⁹ Therefore, Tribal governments may need to take interim measures in the short term as they consider establishing new or modified communications goals and priorities.

13. Tribal Nations also should immediately begin preparations to receive, record, and process this engagement dialogue and any related correspondence. Specific efforts should be made to chronicle details of engagement dialogue sessions. Recordkeeping should be established for documentation of the initial contact, any follow-up communications, and the resulting annual certification documentation. Records should include, for example, a summary of all verbal interactions as well as copies of all electronic and hard copy communications.²⁰

14. Similarly, communications providers should take immediate steps to prepare for and initiate engagement with the Tribal governments whose lands they serve. Certifications articulating the steps taken to comply with the annual Tribal engagement obligation in 2012 are due on July 1, 2013 and each year thereafter.²¹ That is, the Tribal engagement obligation must be fulfilled by the end of each calendar year. Communications providers should, for example, take immediate steps to establish a lead and/or a team within their companies and to identify the appropriate Tribal government leaders with whom they will initiate the engagement process. The National Congress of American Indians (NCAI)²² maintains a routinely updated and comprehensive directory of American Indian Tribal and Alaska Native Village government leaders, addresses, and telephone numbers. The NCAI Tribal directory can be sorted by geographical area and can be found at <u>http://www.ncai.org/tribal-directory</u>.²³ Where needed, ONAP also will serve as a resource for communications providers and Tribal governments.

15. In addition, communications providers should retain copies of all communications with Tribal leaders they would need in order to demonstrate compliance with their annual certification requirement. In the event that a Tribal government does not respond to repeated efforts to engage, the provider should document all attempts at engagement and certify to that effect. As with the entire engagement process, reasonableness should prevail. As a general matter, we expect that a provider would not be penalized for a failure to respond on the part of a Tribal Nation, if the provider can demonstrate repeated good faith efforts to meaningfully engage with the Tribal government.

²¹ See Third Reconsideration Order, FCC 12-52 at para. 10. See also 47 C.F.R. §§ 54.313, 54.1009...

²² NCAI is the nation's oldest, largest, and most representative inter-Tribal government and communities organization, representing American Indian Tribes and Alaska Native Villages.

²³ For a listing of all federally recognized American Indian Tribes and Alaska Native Villages, *see* <u>www.bia.gov/cs/groups/xofa/documents/document/idc012038.pdf</u>. ONAP, in coordination with the Bureaus, will endeavor to provide additional resources to Tribal governments and carriers to help facilitate this engagement, including the possibility of using the Commission's website as a repository of information.

¹⁹ See Connect America Fund, WC Docket No. 10-90 et al., Third Order on Reconsideration, FCC 12-52 at para. 10 (rel. May 14, 2012) (*Third Reconsideration Order*) (changing the filing deadline from April 1 to July 1).

²⁰ For example, all ETCs receiving high-cost are now subject to a 10-year document retention requirement. See USF/ICC Transformation Order, 26 FCC Rcd at 17864, para. 620. See also Third Reconsideration Order, FCC 12-52 at para. 14.

B. Needs Assessment and Deployment Planning

16. Tribal governments play a vital role in identifying and serving the needs and interests of their local communities, often in remote, insular, cyclically impoverished communities with a historic lack of critical infrastructure. Tribal government leaders are intimately acquainted with their members' needs and have valuable insight into how to meet them. "Tribal-centric" business models – those that actively engage the Tribe, its core community institutions, and members in deployment and adoption planning – have a greater chance of establishing sustainable services on Tribal lands.²⁴ Communications providers also have experience and a valuable perspective on the challenges, economics, and other realities of providing service to remote, low-income, and underserved regions of the country, including certain Tribal lands.

17. The Tribal engagement obligation provides Tribal governments and communications providers alike with a new opportunity – the opportunity to have a genuine conversation about communications needs and deployment planning on Tribal lands. When telephone service was originally deployed, there was no such obligation and, as a result, in many instances, Tribal needs and carrier deployment efforts were not aligned. The Tribal engagement obligation affords both Tribal governments and communications providers the opportunity to move forward with a shared vision. This will only occur, however, if Tribal governments and communications providers and communications providers the communications providers alike take advantage of this historic opportunity to improve the communications landscape on Tribal lands.

18. To that end, Tribal governments should come to the table with a serious, well-thought out assessment of the Tribes' communications needs. Issues that Tribal governments should consider include, for example, the Tribe's communications goals, needs, and priorities, as well as what the Tribe intends to do with communications services (e.g., provide connectivity to those living on Tribal lands, encourage economic opportunity). Tribal governments should also assess what core community or anchor institutions are central to deployment, and what in the nature and operations of these institutions is relevant to the need for communications services. In addition, Tribal governments should consider whether there are economic factors and possibly Tribally-driven opportunities that will assist in making the business case for deployment on Tribal lands, as well as opportunities where Tribal governments and communications providers can partner. In analyzing and discussing communications goals, needs, and priorities, Tribal governments should note that recipients of Connect America Fund (CAF) support, including the Mobility Fund, are subject to public interest obligations, as established in the *USF/ICC Transformation Order*.²⁵

19. Similarly, communications providers should come to the table ready to articulate their deployment priorities, the process by which they arrived at these priorities, and their initial plans for deployment on Tribal lands. Issues that communications providers should be prepared to discuss include, for example, the services they currently deploy, and what services they intend to deploy, on Tribal lands. Providers should also be prepared to discuss their timelines for the provision of services not currently available on Tribal lands, as well as their priorities in terms of service and the factors that led them to prioritize deployment to particular areas. Communications providers should also identify any opportunities they envision to partner with Tribal governments.

C. Feasibility and Sustainability Planning

20. Feasibility and sustainability planning for communications services on Tribal lands presents issues of concern for both Tribal governments and communications providers. Tribal governments generally want services rapidly deployed for their members to support the economic, educational, public safety, and health care opportunities that communications services afford. Communications providers

²⁴ See Improving Communications Services for Native Nations, CG Docket No. 11-41, Notice of Inquiry, 26 FCC Rcd 2672, 2679-80, para. 12 (2011) (Native Nations NOI).

²⁵ See USF/ICC Transformation Order, 26 FCC Rcd at 17691-17709, paras. 74-114.

generally want business models that will be practical in terms of build out, and viable in terms of revenue flow and quality of service. While some commonalities likely exist, we believe there are many differences from one provider to another and from one Tribal government to another. The Tribal engagement obligation affords both parties the opportunity to share specific perspectives and information and to begin charting a path forward to address feasibility and sustainability in coordination with one another.

21. Tribal lands nationwide face some of the greatest challenges to the feasibility and sustainability of a 21st century communications infrastructure, including rugged and remote terrain and often endemic levels of poverty. Therefore, communications build out plans based purely on population density or proximity to other robust networks can face major cost benefit analysis challenges. Tribal government leaders, who are largely responsible for managing a wide array of government services and economic opportunities for their communities, are uniquely situated to advise communications providers of the specific challenges associated with deploying and sustaining a communications network on their lands. The Tribal engagement obligation will facilitate discussion between Tribal government leaders and communications providers an important opportunity to draw upon the knowledge gained to inform and coordinate their feasibility and sustainability planning.

22. Tribal Nations should be prepared to discuss any additional resources they may bring to bear in feasibility and sustainability planning for communications services, because many federal grant or loan programs provide direct access to, or particular standing for, Tribal Nations and their entities. That is, there are federal government programs that support infrastructure deployment and support the economic, health, safety, and welfare missions in Native communications—the very same priorities for the deployment of robust communications networks on Tribal lands. For example, Tribes may be considering business ventures that would benefit from coordination on communications planning at the outset. Together, providers and Tribal Nations have the opportunity to discuss how to coordinate in planning, providing, and meeting the expenses for communications services on Tribal lands.

23. When addressing the issues of sustainability on Tribal lands, one must also calibrate expectations and develop an awareness of the unique nature of Tribal communities. Issues such as cyclical poverty, remoteness, and deployment priorities all inform the potential sustainability and ultimate profitability of a particular communications model on Tribal lands. That is, it can take a longer period of time to develop a sustainable enterprise on many Tribal lands. Increased coordination between Tribal governments and communications providers on specific elements of feasibility will heighten the chances of ultimate sustainability for communications business models on Tribal lands.

D. Marketing Services in a Culturally Sensitive Manner

24. As noted above, for the purposes of the USF/ICC proceeding and, therefore, the Tribal engagement obligation, Tribal lands are comprised of the lands of the approximately 566 federally recognized American Indian Tribes and Alaska Native Villages, as well as Hawaiian Home Lands.²⁶ Tribal lands represent a rich and diverse array of cultural heritage, history, practices, and pride. Outside the context of Tribally owned and operated providers, however, seldom have these cultural factors been fully considered in the marketing and deployment of communications services on Tribal lands. The Tribal engagement obligation provides Tribal governments and communications providers with the opportunity to discuss and explore ways in which they can coordinate or partner to ensure that services are marketed in a manner that will relate directly to the community, resonate with consumers, and stimulate increased adoption of services on Tribal lands.

25. Issues that Tribal governments and communications providers may wish to discuss include the tailoring of service offerings to the community through, for example, the feasibility of a local presence in the community. For example, locating a retail presence within a Tribal community and employing

²⁶ See supra n.2.

members of that community may increase awareness of and sensitivity to local cultural and communications needs. Providers and Tribal governments also may wish to discuss whether developing materials, separately or jointly, specific to the Tribal community would be beneficial to either the provider or consumers on Tribal lands. In addition, providers and Tribal governments also may wish to discuss what other elements of their respective organizations may need to be engaged. For Tribal governments, this may mean administrative planning, community service, and other governmental offices. For providers, this may mean customer service, technical assistance, and commercial business divisions. Through a heightened mutual understanding of one another's needs, we anticipate that Tribal governments and communications providers may discover opportunities for working together that will yield benefits to all. Studies indicate that these efforts present genuine opportunities for success, because where Native Nations and their community members have access to broadband, their rates of Internet use are on par with, if not higher than, national averages.²⁷

E. Rights of Way and Other Permitting and Review Processes

26. There are numerous regulatory processes with which service providers must comply in order to provide communications services on Tribal lands, including rights of way, land use permitting, facilities siting, and environmental and cultural review processes.²⁸ Certain of these processes involve other federal agencies, such as the Department of Interior's Bureau of Indian Affairs (BIA), and failure to comply with these processes may result in a finding of trespass. Given the widely varying circumstances on different Tribal lands, a one size fits all approach is not appropriate here. Instead, in the context of the Tribal engagement obligation, the common goal for Tribal governments and communications providers should be one of greater mutual understanding about the relevant rights of way and other permitting and review processes on Tribal lands and a plan for informing communications providers of procedures in a helpful and instructive manner, designed to bring companies into compliance, where applicable.

27. To that end, Tribal governments and communications providers should come to the table prepared to discuss the relevant rights of way and other permitting and review processes, as well as the challenges associated with these processes. For example, with respect to the BIA's appraisal process for rights of way, dialogue that prioritizes early notification might expedite Tribal governments' consultations with BIA and consent.²⁹ Tribal governments should have a comprehensive list of all processes with which communications providers serving their Tribal lands are required to comply, such as rights of way, land use permitting, facilities siting, and environmental and cultural review processes. Communications providers should have documentation of any and all processes with which they currently comply. All of this information will provide the foundation for a substantive discussion of all requirements and steps for moving forward together.

F. Compliance with Tribal Business and Licensing Requirements

28. As sovereign institutions, Tribal governments have the authority to impose Tribal business and licensing requirements on all entities doing business on their lands. While the type and form of requirements may vary greatly from one Tribal land to another, Tribal business and licensing requirements include business practice licenses that Tribal and non-Tribal business entities, whether located on or off Tribal lands, must obtain upon application to the relevant Tribal government office or division to conduct any business or trade, or deliver any goods or services, to the Tribe, Tribal members, or Tribal lands. The form of these licenses vary greatly, including certificates of public convenience and necessity, Tribal business licenses, master licenses, and other related forms of Tribal government

²⁷ See Traci L. Morris Ph.D., Native Public Media and Sascha D. Meinrath, New America Foundation, New Media, TECHNOLOGY AND INDIAN USE IN INDIAN COUNTRY: QUANTITATIVE AND QUALITATIVE ANALYSES (Nov. 19, 2009) (*NPM/NAF New Media Study*).

²⁸ See USF/ICC Transformation Order, 26 FCC Rcd at 17868-69, para. 637.

²⁹ See generally 25 C.F.R. Part 169 - Rights-of-Way Over Indian Lands.

licensure.30

29. As part of the Tribal engagement obligation, Tribal governments and communications providers should come to the table prepared to discuss in detail the relevant Tribal business and licensing requirements. Tribal governments should have a comprehensive list of any such requirements applicable to the provision of communications services. They should be prepared to provide an explanation of precisely what all such requirements entail, including specific application procedures and timeframes, as well as the governmental offices involved in the licensing process. Communications providers should be prepared to provide evidence of compliance with any Tribal business practice licenses with which they currently comply for that Tribe. Consistent with the discussion above regarding rights of way and other permitting and review processes, the common goal here should be one of greater mutual understanding about the relevant Tribal business licensing requirements and a plan for bringing companies into compliance, where applicable.

IV. CONCLUSION

30. In conclusion, the Tribal engagement obligation represents an opportunity for Tribal governments and communications providers to coordinate on many issues critical to the deployment and adoption of communications technologies on Tribal lands. As discussed in the introduction, this guidance represents the first step in an iterative process. That is, this guidance will evolve over time based on initial experiences and feedback from Tribal governments and communications providers. In an effort to identify commonalities, increase efficiencies, and build upon current working relationships, ONAP will engage all regional stakeholders, as appropriate, and will respond to needs articulated by communications providers and Tribal governments.

V. CONTACTS

31. For further information concerning this guidance, contact the offices listed below:

Office of Native Affairs and Policy Geoffrey Blackwell at (202) 418-3629 Irene Flannery at (202) 418-1307

Wireless Telecommunications Bureau Sue McNeil at (202) 418-7619

Wireline Competition Bureau Joseph Cavender at (202) 418-1548

- FCC -

³⁰ See USF/ICC Transformation Order, 26 FCC Rcd at 17868-69, para. 637, n.1052.



Informational Bulletin

Federal Tribal Lifeline and Tribal Linkup Support Programs

Eligible residents of Tribal lands may be able to save money on their local telephone service through Tribal Lifeline and Tribal Link Up support programs. These programs are established by the Federal Communications Commission (FCC) and are available through telephone companies like Frontier. Under the Tribal Lifeline program, a qualified resident receives a reduction of up to \$34.25 per month off the cost for a single local telephone service connection to the household. Under the Tribal Link Up program, a qualified resident receives a 100 percent reduction, up to \$100, of the customary charge to install a single local telephone service connection at the customer's principal place of residence. To qualify for these programs, an individual must:

- 1. Be a resident of a federally recognized tribal land
- 2. Receive assistance from one of the following programs:
 - Bureau of Indian Affairs General Assistance
 - Tribally Administered Temporary Assistance for Needy Families (TTANF)
 - Tribal Head Start Programs (income eligible)
 - Food Distribution Program on Indian Reservations (FDPIR)
 - Medicaid
 - Supplemental Security Income (SSI)
 - Supplemental Nutrition Assistance Program (Food Stamps or SNAP)
 - Temporary Assistance for Needy Families, (TANF)
 - Federal Public Housing Assistance (Section 8)
 - Low-income Home Energy Assistance Program (LIHEAP)
 - National School Lunch Program's Free Lunch Program
 - Refugee Assistance
 - DSHS Chore Services
 - Community Options Program

or

3. Income must not exceed approximately 135% of the federally established poverty levels set forth for the number of persons in the applicant's household, as updated.

Tribal Lifeline and Tribal Link Up are government assistance programs. Only eligible customers may enroll in the programs, and documentation is required for enrollment. Program benefits are limited to one per household and are non-transferable.

To enroll in Tribal Lifeline or Tribal Link Up, residents may contact Frontier at 1-800-921-8101 and ask about Tribal Lifeline or Tribal Link Up.

Line 1010 – Voice Services Rate Comparability Compliance

Voice Services Rate Comparability Compliance

The price of Frontier's fixed voice service for each exchange included within this Frontier study area, as listed on Line 703c of this Form 481 report, is below the FCC's reasonable comparability benchmark for voice services of \$47.48 based on the results of the 2015 Urban Rate Survey for fixed Voice and Broadband services released by the Wireline Competition Bureau on April 16, 2015 (WC Docket No. 10-90).

Line 1210 – Terms and Conditions of Voice Telephony Lifeline Plans

Section 2

Original Sheet 31

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

- C. General Regulations (Continued)
 - 11. Lifeline/Washington Telephone Assistance Program (WTAP)
 - a. Lifeline Service

Lifeline Service applies the current Federal Baseline Credit amount to offset the federal End User Subscriber Line Charge as specified in Frontier's Tariff FCC No. 5.

An additional supplemental reduction will be made to the local single line residential rate of qualifying Lifeline Service customers.

Lifeline Service can only be associated with the primary residential connection.

Funding for Lifeline Service baseline amount and the supplemental reduction amount is obtained from a universal service support mechanism which all telecommunications carriers, that provide interstate telecommunications services, contribute to on an equitable and non-discriminatory basis.

Lifeline Service may not be disconnected for non-payment of toll charges.

Deposit requirements do not apply to Lifeline Service customers if toll blocking is employed.

Applicants who qualify for Lifeline Service also qualify for a discount on nonrecurring service installation charges under the Washington Telephone Assistance Program.

Lifeline Toll Restriction Service is available on a voluntary basis where technically feasible to Lifeline Telephone Service customers at no charge.

Lifeline Toll Restriction Service allows access to local, 911, 0-, 1+800/877/888 etc., and EAS calls. Access to Directory Assistance is available to Lifeline customers by dialing Oand a operator surcharge will be applied. Access to Service Activation Codes "*/#" (e.g., *66, *69) is also allowed. Upon customer request, some Service Activation Codes may be blocked at no charge, where conditions and facilities permit.

Lifeline Toll Restriction Service prevents 0+, 00-, 1+NPA-NXX-XXXX, 1010XXXX, International (01+, 011+), Directory Assistance (411, 1+411, 0+411, 555-1212, 1+/0+555-1212, 1+/0+NPA-555-1212), 1+900 calls, 1+700, 976 calls, and IntraLATA toll calls.

Advice No. 3339

Section 2 Original Sheet 32

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

C. General Regulations (Continued)

- 11. Lifeline/Washington Telephone Assistance Program (WTAP) (Continued)
 - b. Washington Telephone Assistance Program (WTAP)

As provided by Chapter 229, Laws of 1987, and revised by House Bill No. 2546 effective July 1, 1990, the Washington Telephone Assistance Program (WTAP) provides for a reduced monthly rate for the provision of local residential service, as well as a 50% reduction of nonrecurring service installation charges, for certain low income customers.

The Washington Telephone Assistance Program (WTAP) provides an additional discount to Lifeline Service sufficient to reduce the monthly rate for the one-party residential flat rate local exchange telephone service to \$8.00, inclusive of the FCC's End User Subscriber Line Charge (EUSLC).

The Washington Telephone Assistance Program (WTAP) also provides for a reduction of 50% for nonrecurring service installation charges as specified in Section 3.

The Washington Telephone Assistance Program (WTAP) is applicable only to the customer's principal residence line.

The normal service request or change charge which would apply when changing to a different type, class, or grade of service will not apply when changing to WTAP.

Deposit requirements do not apply to WTAP customers if call restriction (toll blocking) is employed. See Lifeline Toll Restriction Service in Section 2, 11, a.

Tribal Land residents who qualify for Lifeline/Washington Telephone Assistance Program (WTAP) also qualify for an additional discount on nonrecurring service installation charges under Tribal Link Up (Section 3).

Advice No. 3339

Section 2 Original Sheet 33

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

C. General Regulations (Continued)

- 11. Lifeline/Washington Telephone Assistance Program (WTAP) (Continued)
 - c. Eligibility Requirements

Lifeline Service/Washington Telephone Assistance Program (WTAP) are only available to low income residential customers who meet the following criteria:

- (1) The applicant must be a participant in at least one of the following programs: ¹
 - (a) Medical Assistance
 - (b) Food Assistance
 - (c) State Supplemental Security Income
 - (d) General Assistance
 - (e) Refugee Assistance
 - (f) Community Options Program Entry System
 - (g) DSHS Chore Services
 - (h) Temporary Assistance to Needy Families
 - (i) State Family Assistance
 - (j) Federal Public Housing Assistance (Section 8)
 - (k) Low-Income Home Energy Assistance Program
 - (I) National School Lunch Program's free lunch program; or

The consumer must meet eligibility criteria established by a state for its residents provided that such state-specific criteria re based solely on income or factors directly related to income.

Applicants will be certified eligible by the Department of Social and Health Services (DSHS).

The eligibility period is a one-year period as certified by DSHS and runs from July 1 through June 30 of the succeeding year.

(3) The Company shall provide lifeline telephone service to any applicant who certifies via supporting documentation, under the penalty of perjury, the household income to be at or below 135 percent of the applicable Federal Poverty Guidelines.

¹ Applicants who qualify for these three programs may not necessarily qualify for WTAP assistance.

Section 2 2nd Revised Sheet 34

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

B. General Regulations (Continued)

- 11. Lifeline/Washington Telephone Assistance Program (WTAP) (Continued)
 - d. Rates and Charges

A total credit amount applies to the Lifeline/Washington Telephone Assistance Program (WTAP) customer's monthly bill as follows:

Federal and State Lifeline Credits for a One-Party Line:	Monthly <u>Rate</u>
a. Federal Lifeline Support Credit	\$9.25

The matrix below shows the WTAP credit amounts applied to each rate group to reduce the customer's service rate to \$8.00 per month.

Rate Group	WTAP Credit
1	\$6.15
1A	6.15

Advice No. 3339

Section 2 Original Sheet 35

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

C. General Regulations (Continued)

- 11. Lifeline/Washington Telephone Assistance Program (WTAP) (Continued)
 - d. Rates and Charges (Continued)

With the exception of the initial installation charges, (see Washington Telephone Assistance Program (WTAP), Section 2.b all recurring and nonrecurring charges for any service ordered by the customer shall be billed at the tariffed rates.

When a customer is no longer eligible for Lifeline Service/Washington Telephone Assistance Program (WTAP), the credit amounts specified previously will be discontinued.

Advice No. 3339

Section 2 Origianl Sheet 36

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

C. General Regulations (Continued)

12. Native American Lifeline¹

Residential customers who reside on federally recognized tribal lands are eligible to receive additional enhanced federal Lifeline support in order to reduce the price for basic local telephone service. An individual living on tribal lands shall qualify for an additional enhanced federal Lifeline credit of up to \$25.00 per month if the individual participates in any state or federal programs identified in Section 2 preceding or one of the following assistance programs:

Bureau of Indian Affairs General Assistance Tribally Administered Temporary Assistance for Needy Families Head Start (only those households meeting its income qualifying standard) Food Distribution Program on Indian Reservations (FDPRI)

If a resident of a federally recognized tribal land satisfies the Lifeline/Washington Telephone Assistance Program (WTAP) eligibility criteria as defined in Section 2, the resident will receive the state support, as well as the additional enhanced federal support.

The Company shall provide lifeline telephone service to any applicant who certifies via supporting documentation, under the penalty of perjury, the household income to be at or below 135 percent of the applicable Federal Poverty Guidelines.

The additional enhanced federal credit will be available to Lifeline customers who reside on tribal lands in the following exchanges:

Reservation	<u>Exchange</u>
Confederated Tribes of the Colville Reservation	Tonasket Republic Brewster Bridgeport
Lummi Tribe of the Lummi Reservation	Ferndale
Nooksack Indian Tribe	Everson Deming Lynden
Samish Indian Nation	Anacortes
Sauk-Sujattle Indian Tribe	Darrington

1

Effective: September 12, 2013

Section 2 Original Sheet 37

GENERAL AND LOCAL EXCHANGE TARIFF

RULES AND REGULATIONS

- C. General Regulations (Continued)
 - 12. Native American Lifeline (Continued)¹

Reservation	Exchange
Samish Indian Nation	Anacortes
Sauk-Suiattle Indian Tribe	Darrington
Shoalwater Bay Tribe of the Shoalwater Bay Indian Reservation	Grayland
Stillaguamish Tribe	Arlington
Swinomish Indians of the Swinomish Reservation	Anacortes LaConner
Tulalip Tribes of the Tulalip Reservation	Marysville
Upper Skagit Indian Tribe	Sedro Woolley

¹ Program will be available on October 1, 2000.

Advice No. 3339

Issued: August 12, 2013 Issued by Frontier Communications Northwest Inc. By Kenneth Mason, Vice President of Government and Regulatory Affairs Effective: September 12, 2013