SILVER STAR COMMUNICATIONS

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IDAHO PUBLIC
UTILITIES COMMISSION

October 15, 2013

VIA ELECTRONIC SUBMISSION

Jean Jewell, Commission Secretary
Idaho Public Utilities Commission
472 W. Washington
PO Box 83720
Boise, ID 83720-0074

Re: Gold Star Communications, LLC (SAC 479011) 2013 Eligible Telecommunications Carrier (ETC) Annual Report Filing; Docket No. GNR-T-13-01

Dear Ms. Jewell:

Gold Star Communications, LLC ("Gold Star") hereby files with the Commission its 2013 ETC Annual Report Filing, as follows:

A copy of the FCC Form 481 – Carrier Annual Reporting Collection Form, completed pursuant to 47 CFR §§ 54.313 and 54.422, as applicable; and,

Affidavit of Business or Corporate Officer certifying compliance with applicable rules and guidelines.

Request is hereby made that the Commission notify the Federal Communications Commission and the Universal Service Administration Company, prior to December 16, 2013, that Gold Star is eligible for federal high-cost support for the year 2014.

Questions regarding this filing should be directed to my attention as shown below.

Thank you,

Michelle Motzkus
Legal & Regulatory Administrator
307-883-6690
mamotzkus@silverstar.net

Enclosures

FCC Form 481 - Carrier Annual Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479011
<015>	Study Area Name	Gold Star Communications LLC
<020>	Program Year	2014
<030>	Contact Name: Person USAC should contact with questions about this data	Michelle Motzkus
<035>	Contact Telephone Number: Number of the person identified in data line <030>	307-883-6690
<039>	Contact Email Address: Email of the person identified in data line <030>	mamotzkus@silverstar.net

ANNUAL REPORTING FOR ALL CARRIERS

(check box when complete)

			54.313 Completion Required	54.422 Completion Required
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	✓	
<200>	Outage Reporting (voice)	(complete attached worksheet)	✓	✓
<210>	✓ <-- check box if no outages to report			
<300>	Unfulfilled Service Requests (voice)	0	✓	
<310>	Detail on Attempts (voice)	(attach descriptive document)		
<320>	Unfulfilled Service Requests (broadband)			
<330>	Detail on Attempts (broadband)	(attach descriptive document)		
<400>	Number of Complaints per 1,000 customers (voice)		✓	✓
<410>	Fixed			
<420>	Mobile	0.0		
<430>	Number of Complaints per 1,000 customers (broadband)			
<440>	Fixed			
<450>	Mobile			
<500>	Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	✓	✓
<510>	479011id510	(attached descriptive document)	✓	✓
<600>	Functionality in Emergency Situations	(check to indicate certification)	✓	✓
<610>	479011id610	(attached descriptive document)	✓	✓
<700>	Company Price Offerings (voice)	(complete attached worksheet)		
<710>	Company Price Offerings (broadband)	(complete attached worksheet)		
<800>	Operating Companies and Affiliates	(complete attached worksheet)	✓	✓
<900>	Tribal Land Offerings (Y/N)? ○ ◉	(if yes, complete attached worksheet)	✓	
<1000>	Voice Services Rate Comparability	(check to indicate certification)		
<1010>		(attach descriptive document)		
<1100>	Terrestrial Backhaul (Y/N)? ◉ ○	(if not, check to indicate certification)		
<1110>		(complete attached worksheet)		
<1200>	Terms and Condition for Lifeline Customers	(complete attached worksheet)		✓

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

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

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

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

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

(100) Service Quality Improvement Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479011
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<020>	Program Year	2014
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<110>	Has your company received its ETC certification from the FCC?	(yes / no)	○ ●
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no)	○ ○

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	☐
<114>	Report how much universal service (USF) support was received	☐
<115>	How (USF) was used to improve service quality	☐
<116>	How (USF)was used to improve service coverage	☐
<117>	How (USF) was used to improve service capacity	☐
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	☐

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<020>	Program Year	2014
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<220>

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

-- See attached worksheet --

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<701>	Residential Local Service Charge Effective Date	1/1/2013
<702>	Single State-wide Residential Local Service Charge	

<703>

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

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<711>

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

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479011
<015>	Study Area Name	Gold Star Communications LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	307-883-6690
<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<810>	Reporting Carrier	Gold Star Communications, LLC
<811>	Holding Company	Horizon Communications, Inc.
<812>	Operating Company	Gold Star Communications, LLC

<813>

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

-- See attached worksheet --

(900) Tribal Lands Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<015>	Study Area Name	Gold Star Communications LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	307-883-6690
<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

		Select (Yes,No, NA)
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

(1100) No Terrestrial Backhaul Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479011
<015>	Study Area Name	Gold Star Communications LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

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

<1130> Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) ☐

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479011
<015>	Study Area Name	Gold Star Communications LLC
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Motzkus
<035>	Contact Telephone Number - Number of person identified in data line <030>	307-883-6690
<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans — 479011id1210

Name of attached document (.pdf)

<1220> Link to Public Website — HTTP

"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☑

<1222> Details on the number of minutes provided as part of the plan, ☑

<1223> Additional charges for toll calls, and rates for each such plan. ☑

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

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
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<010>	Study Area Code	479011
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

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

Incremental Connect America Phase I reporting

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

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

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

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

<2016> Certification Support Used to Build Broadband ☐

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

<2017> 3rd year Broadband Service Certification ☐
<2018> 5th year Broadband Service Certification ☐
<2019> Interim Progress Certification ☐
<2020> Please check the box to confirm that the attached PDF , on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐
<2021> Interim Progress Community Anchor Institutions — Name of Attached Document Listing Required Information _____

(3000) Rate Of Return Carrier Additional Documentation

Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	479011
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<035>	Contact Telephone Number - Number of person identified in data line <030>	307-883-6690
<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

(3010)	Milestone Certification {47 CFR § 54.313(f)(1)(i)} Please check this box to confirm that the attached PDF , on line 3012,	Name of Attached Document Listing Required Information	☐
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.		
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}		☐ (Yes/No)
(3014)	If yes, does your company file the RUS annual report		☐ (Yes/No)
	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		☐
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		☐
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, Is your company audited?		☐ (Yes/No)
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains :		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications		☐
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		☐
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.		☐
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:		
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,		☐
(3023)	Underlying information subjected to a review by an independent certified public accountant		☐
(3024)	Underlying information subjected to an officer certification.		☐
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		☐
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

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

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

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: Gold Star Communications LLC

Signature of Authorized Officer: CERTIFIED ONLINE Date 10/14/2013

Printed name of Authorized Officer: Jefferson England

Title or position of Authorized Officer: Chief Financial Officer

Telephone number of Authorized Officer: 307-883-6621

Study Area Code of Reporting Carrier: 479011 Filing Due Date for this form: 10/15/2013

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	479011
<015>	Study Area Name	Gold Star Communications LLC
<020>	Program Year	2014
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

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

I certify that (Name of Agent)_____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.

Name of Authorized Agent:

Name of Reporting Carrier:

Signature of Authorized Officer: Date:

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

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

I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier:

Name of Authorized Agent or Employee of Agent:

Signature of Authorized Agent or Employee of Agent: Date:

Printed name of Authorized Agent or Employee of Agent:

Title or position of Authorized Agent or Employee of Agent

Telephone number of Authorized Agent or Employee of Agent:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	mamotzkus@silverstar.net

<810>	Reporting Carrier	Gold Star Communications, LLC
<811>	Holding Company	Horizon Communications, Inc.
<812>	Operating Company	Gold Star Communications, LLC

<813>

<a1> Affiliates	<a2> SAC	<a3> Doing Business As Company or Brand Designation
Silver Star Tel - WY	512295	Silver Star Communications
Silver Star Tel - WY	519001	Silver Star Communications
Columbine Telephone Company, Inc.	472295	Silver Star Communications
Silver Star Telephone Company, Inc.	472295	Silver Star Communications
Millennium Networks, LLC		Silver Star Communications
Gold Star Communications, LLC	519005	Silver Star Communications

Gold Star Communications, LLC

dba Silver Star Communications ("Silver Star")

Service Quality Standards & Consumer Protection Rules

Statement of Compliance

Silver Star has established operating procedures designed to facilitate compliance with applicable consumer protection rules; including rules regarding verification of orders for telecommunications service as required of submitting carriers (i.e., Slamming) {Section 64.1100}, compliance with the FCC's Truth-in-Billing Requirements {64.2400}, compliance with the FCC's customer proprietary network information (CPNI) Requirements {64.2009}, consumer protection and service quality rules pursuant to the CTIA Code of Conduct, and all other customer protection rules including employee training and policy manual development as applicable.

Gold Star Communications, LLC

dba Silver Star Communications ("Silver Star")

Functionality in Emergency Situations

Statement of Compliance

Silver Star has established operating procedures designed to facilitate compliance with applicable service quality standards, which may include customer remedies and improvement plans. Specifically Silver Star maintains its entire plant and system in such condition as to enable it to furnish safe and continuous service and it inspect its system and facilities in such manner and with such frequency as may be necessary to obtain knowledge of their current condition and adequacy. Silver Star is capable of functioning in emergency situations, by maintaining both battery and generator back-up power, which ensure reasonable functionality of voice services without an external power source. Additionally, voice traffic can be rerouted around damaged facilities, and Silver Star is capable of managing traffic spikes resulting from emergency situations.

Gold Star Communications, LLC

dba Silver Star Communications ("Silver Star")

Low-Income Telephone Assistance Program Terms & Conditions

Silver Star offers a variety of local usage calling plans, ranging from local and/or low usage plans to plans providing essentially unlimited usage. Lifeline-eligible residential customer accounts are discounted by the federally authorized amount of $9.25, and state telephone assistance discounts, where applicable. Silver Star's lifeline-discounted monthly telephone service provides access to emergency, operator, interexchange, and directory assistance services. The service does not include enhanced calling features such as voice mail, caller ID, call forwarding, internet or long distance telephone service. Toll Limitation service is provided at no charge for lifeline customers, upon customer request and pursuant to FCC guidelines.

State of Wyoming)
) ss
County of Lincoln)

CERTIFICATION BY ELIGIBLE TELECOMMUNICATIONS CARRIER OF COMPLIANCE WITH SERVICE QUALITY AND CUSTOMER PROTECTION, ABILITY TO REMAIN FUNCTIONAL IN EMERGENCIES, AND USE OF FEDERAL HIGH-COST SUPPORT.

AFFIDAVIT OF BUSINESS OR CORPORATE OFFICER

The Idaho Public Utilities Commission Order No. 29841 requires that Eligible Telecommunications Carriers certify that it is compliant with applicable service quality standards and consumer protection rules; and ETCs must demonstrate the ability to remain functional in emergencies. In addition, the Commission must file an annual certification with the USAC and the FCC that all federal high-cost support provided to ETCs within the State of Idaho will be used only for the provision, maintenance, and upgrading of facilities and services for which the support is intended. Accordingly, the undersigned states and verifies under oath the following:

1. I am an officer of Gold Star Communications, LLC (dba Silver Star Communications), an eligible telecommunications carrier for receiving federal universal service support under section 214(e) of the Telecommunications Act of 1996 in the state of Idaho.

2. I am familiar with the Company's day-to-day operations in the state of Idaho and with the State's service quality standards and consumer protection rules as set forth in Commission Order No. 29841.

3. Gold Star Communications, LLC is complying with applicable service quality standards and consumer protection rules of the Federal Communications Commission and the Idaho Public Utilities Commission.

4. I certify to the Commission that the Company is able to remain functional in emergencies as set forth in Commission Order No. 29841 and in 47 C.F.R. § 54.201(a)(2).

5. I also certify that all federal universal service support funds received by Gold Star Communications, LLC during the current calendar year will be used in a manner consistent with section 254(e); that is, for the provision, maintenance, and upgrading of facilities and services for which the support is intended. The company will continue to comply for the period of January 1, 2014, through December 31, 2014, to be eligible for federal universal service fund support.

6. This verification and affidavit is provided to be the Idaho Public Utilities Commission to enable the IPUC to certify to the FCC that federal universal service support received by the eligible carriers in the state will be used in a manner consistent with Section 254(e) of the Telecommunications Act.

Jefferson H. England
Chief Financial Officer

10/15/13
Date

SUBSCRIBED AND SWORN to before me this 15th day of October, 2013.

MICHELLE MOTZKUS
Notary Public
State of Wyoming
County of Lincoln
My Commission Expires
March 15, 2017

Notary Public for Wyoming, residing at Lincoln County
My Commission expires 3-15-17