



805 Central Expressway South
Suite 200
Allen, Texas 75013

January 25, 2016

Phone 972-908-4415
Fax 214-383-2737
Email: kimberly.a.douglass@ftr.com

Ms. Jean Jewell
Commission Secretary
Idaho Public Utilities Commission
472 West Washington Street
Boise, Idaho 83720

RE: Annual Eligibility Re-Certification of Lifeline Subscribers

Dear Ms. Jewell:

Citizens Telecommunications Company of Idaho d/b/a Frontier Communications of Idaho (Study Area Code 474427) and Frontier Communications Northwest, Inc. (Study Area Code 472416) herein after referred to as "Frontier" hereby provides a copy of its Annual Lifeline Eligible Telecommunications Carrier Certification FCC Form 555 in compliance with 47 CFR 54.416 as adopted by the Federal Communication Commission (FCC) in its Lifeline Reform Order, FCC 12-11, released February 6, 2012.

Section 54.4 16(b) requires eligible telecommunication carriers (ETCs) to annually provide the results of their re-certification efforts performed pursuant to Section 54.4 10 (f) to the FCC and the Universal Service Administrative Company (USAC). ETCs are also required to provide the results of their re-certification efforts to state commissions and relevant tribal governments.

Please call me at (972) 908-4415 if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Kim Douglass" with a long horizontal flourish extending to the right.

Kim Douglass
Manager
Compliance – Regulatory Affairs

Attachments
cc: Renee Willer, Frontier

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections

Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

<p>472416</p> <hr/> <p>Study Area Code (SAC)</p> <p><i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC through which it provides Lifeline service).</i></p>	
<p>ID</p> <hr/> <p>State</p> <p>Frontier Communications Northwest Inc.</p> <hr/> <p>DBA, Marketing or Other Branding Name</p> <p><i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i></p>	<p>Frontier Communications Northwest Inc.</p> <hr/> <p>ETC Name</p> <p>Frontier Communications Corporation</p> <hr/> <p>Holding Company Name</p> <p><i>(If same as ETC name, list "N/A" Do not leave blank)</i></p>

Does the reporting company have affiliated ETCs?

Yes

No

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

Affiliated ETC's SAC	Affiliated ETC's Name
-- See attached worksheet --	

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

Section 1: Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

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

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

Initial JCM

Section 2: Annual Recertification

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

A	B	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year <i>(February data month)</i>	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were <u>initially</u> enrolled in the current Form 555 calendar year <i>(These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)</i>	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
1774	0	52	13	1709

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non-responding subscribers	Number of subscribers responding that they are no longer eligible <i>(This should be a subset of Block G.)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
50	20	30	0	30

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
1659	289

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JCM

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: Community Action Partnership Association of Idaho. Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JCM

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K)	N = (J+L)	O = ((N ÷ M) * 100)
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC <i>(This should equal the number reported in Block E)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
1709	319	18.67%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid? Yes No

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

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,
Certified Online
 Signature of Officer
jessica.matushek@ftr.com
 Email Address of Officer
Christine Burke
 Person Completing This Certification Form

Jessica C. Matushek; Director,
Accounting
 Printed Name and Title of Officer
01/20/2016
 Date
585-777-6719
 Contact Phone Number

Affiliated ETCs

SAC	Name
135200	The Southern New England Telephone Company
150072	Frontier Communications of AuSable Valley Inc.
150100	Frontier Communications of New York Inc.
150110	OGDEN TELEPHONE COMPANY
150121	Frontier Telephone of Rochester Inc.
150122	Frontier Communications of Seneca Gorham Inc.
150128	Frontier Communications of Sylvania Lake Inc.
154532	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154533	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154534	CITIZENS TELECOMMUNICATIONS COMPANY OF N
170149	Frontier Communications of Breezewood LLC
170152	Frontier Communications of Canton LLC
170161	Commonwealth Telephone Company
170168	Frontier Communications of Pennsylvania LLC
170178	Frontier Communications of Lakewood LLC
170194	Frontier Communications of Oswayo River LLC
200271	CITIZENS MOUNTAIN STATE TEL
204338	Citizens Mountain State Tel
204339	Citizens Mountain State Tel
205050	Frontier West Virginia Inc.
210318	Frontier Communications of the South LLC
220362	Frontier Communications of Fairmount LLC
220387	Frontier Communications of Georgia LLC
230479	Frontier Communications of the Carolinas Inc.
230509	Frontier Communications of the Carolinas Inc.
240479	Frontier Communications of the Carolinas Inc.
240526	Frontier Communications of the Carolinas Inc.
250301	Frontier Communications Lamar County LLC
250306	Frontier Communications of Alabama LLC
250318	Frontier Communications of the South LLC
280460	Frontier Communications of Mississippi Inc.
290580	CITIZENS TEL OF VOLUNTEER STATE
294336	CITIZENS TEL OF TENNESSEE LLC
300615	Frontier North Inc.
300682	Frontier Communications of Michigan Inc.
310682	Frontier Communications of Michigan Inc.
310695	Frontier North Inc.
313033	Frontier Midstates Inc.
320750	Frontier Communications of Indiana Inc.
320772	Frontier North Inc.
320779	Frontier North Inc.
320828	Frontier Communications of Thorntown Inc.
323034	Frontier Midstates Inc.
330870	RHINELANDER TEL CO
330886	Frontier North Inc.
330891	Rhineland Tel Co
330912	Frontier Communications of Mondovi LLC
330940	Rhineland Tel Co
330941	Rhineland Tel Co
330944	Frontier Communications - St. Croix LLC

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<p>ID</p> <hr/> <p>State</p> <p>Frontier Communications of Idaho</p> <hr/> <p>DBA, Marketing or Other Branding Name</p> <p><i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i></p>	<p>CITIZENS TELECOMM CO OF IDAHO</p> <hr/> <p>ETC Name</p> <p>Frontier Communications Corporation</p> <hr/> <p>Holding Company Name</p> <p><i>(If same as ETC name, list "N/A" Do not leave blank)</i></p>

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Yes

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Affiliated ETC's SAC	Affiliated ETC's Name
-- See attached worksheet --	

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Section 1: Initial Certification *All ETCs must complete this section*

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

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

Initial JCM

Section 2: Annual Recertification

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

A	B	C	D	E = (A - B - C - D)
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466	0	3	6	457

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non-responding subscribers	Number of subscribers responding that they are no longer eligible <i>(This should be a subset of Block G.)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
457	108

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

AND/OR

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Initial JCM

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

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Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC <i>(This should equal the number reported in Block E)</i>	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
457	108	23.63%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid? Yes No

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

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,
Certified Online
 Signature of Officer
jessica.matushek@ftr.com
 Email Address of Officer
Christine Burke
 Person Completing This Certification Form

Jessica C. Matushek; Director,
Accounting
 Printed Name and Title of Officer
01/21/2016
 Date
585-777-6719
 Contact Phone Number

Affiliated ETCs

SAC	Name
135200	The Southern New England Telephone Company
150072	Frontier Communications of AuSable Valley Inc.
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