Annual Certification of Requirements Imposed by the Commission in Docket Number 06-GIMT-446-GIT

1. All ETCs must provide detailed information on any outage in the prior calendar year, as that term is defined in 47 CFR 4.5, of at least 30 minutes in duration for each service area in which an eligible telecommunications carrier is designated for any facilities it owns, operates, leases, or otherwise utilizes that potentially affect: (i) at least 10% of the end users served in a designated service area; or (ii) a 911 specialty facility as defined in 47 CFR 4.5(e). (Please complete if information is not reported on Form 481.)

Date and time of Onset of the Outage	Description of the Outage and its Resolution	Particular services affected	Geographic Areas Affected	Steps Taken to Prevent a Similar Situation in the Future	Number of Customers Affected
None					

(If necessary, please provide additional pages.)

2. Please provide the number of requests for service from potential customers within the recipient's service areas that were unfulfilled during the prior calendar year. If applicable, please explain how you attempted to provide service to those potential customers. (Please complete if information is not reported on Form 481.) None

3. Please provide the number of complaints per 1,000 connections (fixed or mobile) in the prior calendar year. (Please complete if information is not reported on Form 481.) Telrite Corporation d/b/a Life Wireless had one (1) complaint or .2649 per 1,000 wireless connections in Kansas.

4. A wireline ETC must certify that it is in compliance with the Commission's quality of service standards and a wireless ETC must certify that it is in compliance with the CTIA Code. Please complete the following, as applicable to your company:

QUALITY OF SERVICE <u>WIRELINE</u> ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

2. By this affidavit, I certify that _____(Company/ Cooperative) is in compliance with the Commission's quality of service standards as adopted in Docket No. 191,206-U.

I certify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed on _____(date).

Signature

Printed/Typed Name

QUALITY OF SERVICE <u>WIRELESS</u> ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

 1. My title is _Treasurer__ of the _Telrite Corporation d/b/a Life Wireless_____

 (Company/ Cooperative). In this capacity, I am in a position of authority to certify whether the

 Company/ Cooperative is complying with required quality of service standards. I am binding ____

 Telrite Corporation d/b/a Life Wireless _____(Company/Cooperative) to the statements made

 in this certification.

2. By this affidavit, I certify that **Telrite Corporation d/b/a Life Wireless** (Company/ Cooperative) is in compliance with the CTIA Code.

I certify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed on $\frac{\langle \rho / \partial \rho / \beta \rangle}{(date)}$.

Kelly Jesel

Print / Typed Name

5. An ETC must certify that it will be able to function in an emergency as set forth in 47 CFR § 54.202(a)(2). **All ETCs must complete the following:**

ABILITY TO FUNCTION IN AN EMERGENCY ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT (Please type or print legibly)

1. My title is <u>Treasurer</u> of the <u>Telrite Corporation d/b/a Life Wireless</u> (Company/ Cooperative). In this capacity, I am in a position of authority to certify whether the Company/ Cooperative is able to function in an emergency. I am binding <u>Telrite</u> **Corporation d/b/a Life Wireless** (Company/Cooperative) to the statements made in this certification.

2. By this affidavit, I certify that ____ Telrite Corporation d/b/a Life Wireless _____ (Company/ Cooperative) is capable of functioning in an emergency.

I certify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. (Pursuant to Kan. Stat. Ann. 53-601.) Executed on $\frac{\log 22}{18}$ (date).

Keen Signature

Kelly Jesel

Printed / Typed Name

6. 47 U.S.C. § 214(e)(1)(B) requires an ETC to advertise its services throughout the service area for which it has been designated "using media of general distribution." All ETCs must complete the following:

Name of Media	Type of Media	Geographic Areas Reached	Dates Published
Company Website	Internet	`All	Ongoing
Flyers	Print	All	Ongoing
Banners/Posters	Print	All	Ongoing

(If necessary, please attach additional pages.)

7. A competitive ETC must certify that it offers a local usage plan comparable to that of the incumbent. Please provide a description of the local usage plan(s) that is comparable to that of the incumbent and complete the certification.

All Telrite Corporation d/b/a Life Wireless calling plans include the following: local calls, Nationwide Domestic Long Distance, Caller ID, Call Waiting, Call Forwarding, 3-Way Calling, Voicemail, Nationwide Domestic Text Messaging, Roaming at no additional charge, 411 Directory Assistance, 911 and E911 where available (plan minutes are not decremented for 911 and E911 services and this service will remain available even when all plan minutes have been used), 611 access to customer service, as well as access to 211 services. Telrite's Lifeline service offering in KS includes a 500 Minute Plan. Text messages decrement available plan minutes at a rate of 1 text. whether sent or received, per 1/3 plan minute.

COMPARABLE LOCAL USAGE PLAN ANNUAL CERTIFICATION KCC Docket Reference: 06-GIMT-446-GIT

(Please type or print legibly)

My title is Treasurer of the Telrite Corporation d/b/a Life Wireless 1. (Company/ Cooperative). In this capacity, I am in a position of authority to certify whether the Company/ Cooperative offers a local usage plan comparable to that of the incumbent. I am binding _____ Telrite Corporation d/b/a Life Wireless _____(Company/Cooperative) to the statements made in this certification.

By this affidavit, I certify that Telrite Corporation d/b/a Life Wireless 2. (Company/ Cooperative) offers a local usage plan comparable to that of the incumbent.

I certify under penalty of periury under the laws of the state of Kansas that the foregoing (Pursuant to Kan. Stat. Ann. 53-601.) Executed on is true and correct. 6/22/18 (date).

Kelly Jesel

Printed/Typed Name

State of:_Georgia____County of:___Newton___ Sworn and subscribed to before me on this 27^{44} Day of June, 2018.

Signature: Kathy Kenp

My commission expires: 3/18/2022

