

**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)**

389008	143034468	
Study Area Code (SAC)	Service Provider Identification Number (SPIN)	
<i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for <b>each</b> SAC that provides Lifeline service).</i>		
2024	ND	North Dakota RSA 3
Recertification Year	State	ETC Name
		Verizon Communications Inc.
DBA, Marketing, or Other Branding Name	Holding Company Name	
<i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i>	<i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i>	

**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
575020	Verizon Washington, DC Inc.
565010	Verizon Delaware LLC
165120	Verizon New Jersey Inc
155130	Verizon New York Inc.
170201	Verizon North LLC
170170	Verizon North LLC
170169	Verizon North LLC
175000	Verizon Pennsylvania LLC.
585114	Verizon Massachusetts
115112	Verizon Massachusetts
185030	Verizon Maryland LLC
190479	Verizon South Inc
195040	Verizon Virginia LLC
190233	Verizon South Inc
359070	Iowa 7 partnership
359071	Iowa 8 Monona Limited Partnership
389006	North Central RSA 2 of North Dakota
389009	North Dakota 4 Badlands
389007	North Dakota 1 - Northwest Dakota LP
389010	Verizon Wireless
299011	TracFone Wireless, Inc.

219003	TracFone Wireless, Inc.
199010	TracFone Wireless, Inc.
119002	TracFone Wireless, Inc.
229010	TracFone Wireless, Inc.
159016	TracFone Wireless, Inc.
179011	TracFone Wireless, Inc.
239010	TracFone Wireless, Inc.
319021	TracFone Wireless, Inc.
569002	TracFone Wireless, Inc.
259021	TracFone Wireless, Inc.
169001	TracFone Wireless, Inc.
209013	TracFone Wireless, Inc.
139002	TracFone Wireless, Inc.
129004	TracFone Wireless, Inc.
579001	TracFone Wireless, Inc.
339025	TracFone Wireless, Inc.
309002	TracFone Wireless, Inc.
349021	TracFone Wireless, Inc.
189006	TracFone Wireless, Inc.
279026	TracFone Wireless, Inc.
159015	New York RSA 2 Cellular
449058	TracFone Wireless, Inc.
429010	TracFone Wireless, Inc.
109008	TracFone Wireless, Inc.
639009	TracFone Wireless, Inc.
559006	TracFone Wireless, Inc.
289026	TracFone Wireless, Inc.
529012	TracFone Wireless, Inc.
589002	TracFone Wireless, Inc.
409014	TracFone Wireless, Inc.
249012	TracFone Wireless, Inc.
509004	TracFone Wireless, Inc.
269025	TracFone Wireless, Inc.
459008	TracFone Wireless, Inc.
359127	TracFone Wireless, Inc.
329012	TracFone Wireless, Inc.
159014	St. Lawrence Seaway RSA Cellular Partnership
499012	TracFone Wireless, Inc.
419031	TracFone Wireless, Inc.

629005	TracFone Wireless, Inc.
149006	TracFone Wireless, Inc.
339023	Alltel Communications
369032	TracFone Wireless, Inc.
549028	TracFone Wireless, Inc.
479021	TracFone Wireless, Inc.
439067	TracFone Wireless, Inc.
469033	TracFone Wireless, Inc.
519034	TracFone Wireless, Inc.
380002	TracFone Wireless, Inc.

**Initial Certification** *All ETCs must complete this section.*

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

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

Initial     SP    

**Annual Recertification Results**

Report the results of recertification efforts for the current calendar year.

*Do not leave blocks empty. If the National Verifier is responsible for conducting recertification, enter zero for blocks A - F. If the state Lifeline Administrator is responsible for conducting recertification, report the results for each block.*

A. Subscribers eligible for recertification within current calendar year	
B. Subscribers de-enrolled prior to recertification attempts	
C. Total number of subscribers required to be recertified (A-B)	
D. Subscribers successfully recertified	
E. Subscribers de-enrolled for failed recertification	
F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from:  state Lifeline administrator  National Verifier

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

Initial     SP    

**No Subscribers Certification** *Complete this section if ETC claimed no Lifeline subscribers.*

I certify that my company did not claim federal low income support for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed on this form

Initial     SP

## ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes  No

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

G	H
Month	Subscribers De-Enrolled for Non-Usage
<b>January</b>	
<b>February</b>	
<b>March</b>	
<b>April</b>	
<b>May</b>	
<b>June</b>	
<b>July</b>	
<b>August</b>	
<b>September</b>	
<b>October</b>	
<b>November</b>	
<b>December</b>	
<b>Total Subscribers</b>	0

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.

## Signature Block

By signing below, I certify that the information provided is true and accurate. I am an officer of the company named above. I am authorized to make this certification for this SAC.

Signed,

Stephen Prew

\_\_\_\_\_  
Signature of Officer

stephen.prew@verizon.com

\_\_\_\_\_  
Email Address of Officer

Linda Stevens

\_\_\_\_\_  
Person Completing This Certification Form

Stephen Prew - Vice President - Taxes

\_\_\_\_\_  
Printed Name and Title of Officer

01-16-2025

\_\_\_\_\_  
Date

5405204000

\_\_\_\_\_  
Contact Phone Number