

Cyndi Gallagher

Director – External Affairs

Idaho

AT&T Services, Inc. 161 Inverness Drive W Room 153D Englewood, CO 80112 T: 720.472.3624 M: 785.633.2966 CG6985@att.com www.att.com

RECEIVED 2020January 31,PM 1:15 IDAHO PUBLIC UTILITIES COMMISSION

## Via Email

January 31, 2020

Ms. Diane Hanian Commission Secretary Idaho Public Utilities Commission 11331 W. Chinden Blvd. Building 8, Suite 201-A Boise, ID 83714 secretary@puc.idaho.gov

Re: FCC Form 555, Annual Lifeline Eligible Telecommunications Carrier Certification
Form for New Cingular Wireless PCS, LLC ("AT&T Mobility")
(Docket GNR-T-20-01)

Dear Ms. Hanian:

On behalf of AT&T Mobility, attached please find a copy of FCC Form 555. AT&T Mobility is providing you with a copy of this FCC filing in accordance with 47 C.F.R. §54.422(c). Receipt of this information requires NO action on your part. It is strictly informational.

Please contact me with any questions or concerns you may have at 720-472-3624.

Sincerely,

Cyndi Gallagher

cc: Daniel Klein, ID PUC <u>Daniel.Klein@puc.idaho.gov</u>

Margaret Thomson, Esq.

Cyndi Gallaghes

Attachment

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<sup>&</sup>lt;sup>1</sup> AT&T Mobility filed its FCC Form 555 online with the Universal Service Administrative Company (USAC). Once a carrier enters its six-digit study area code (SAC) into USAC's online FCC Form 555, the online tool automatically populates a name associated with that SAC. In some cases, this automatically generated name differs from (*e.g.*, is an abbreviated version of) the legal entity name for AT&T Mobility's eligible telecommunications carrier affiliate.)

**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)

479006		143029765
Study Area Code (SAC (An Eligible Telecommunicati		Service Provider Identification Number (SPIN)  e a certification form for each SAC through which it provides Lifeline service).
2019	ID	Cingular Wireless
Recertification Year	State	ETC Name
N/A		New Cingluar Wireless PCS, LLC
DBA, Marketing, or Ot		Holding Company Name
(If same as ETC name, list "N.		(If same as ETC name, list "N/A" Do not leave blank)
(If same as ETC name, list "Notes the reporting comparation of all ETCs that are termined in accordance with S	"/A" Do <u>not</u> leave blank)  Any have affiliated ETCs?  The affiliated with the reporting ET lection 3(2) of the Communication	(If same as ETC name, list "N/A" Do not leave blank)
Oes the reporting comparovide a list of all ETCs that are termined in accordance with Sons or controls, is owned or controls.	"/A" Do <u>not</u> leave blank)  Any have affiliated ETCs?  The affiliated with the reporting ET lection 3(2) of the Communication	(If same as ETC name, list "N/A" Do not leave blank)  Yes  No  O  C, using page 4 and additional sheets if necessary. Affiliation shall be ns Act. That Section defines "affiliate" as "a person that (directly or indirectly)

## 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 in Section 4. 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 O

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

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.

## **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.

	ALG
Initial	

## **Minimum Service Level**

I certify that the company listed above is in compliance with the minimum service levels set forth in the 47 CFR Section 54.408.

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

Initial ALG

#### **Annual Recertification**

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

Report the number of Lifeline subscribers due for recertification by month (January-December)

- A. Subscribers eligible for recertification by anniversary month
- B. Subscribers de-enrolled prior to recertification attempts
- C. Total number of subscribers ETC is responsible for recertifying (A-B)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
A.	0	0	0	0	0	0	0	0	0	0	0	0	0
B.	0	0	0	0	0	0	0	0	0	0	0	0	0
C.	0	0	0	0	0	0	0	0	0	0	0	0	0

#### **Recertification Methods**

#### State of federal database

D. Subscribers recertified through ETC access to state or federal database by anniversary month

Report the number of eligible subscribers verified through access to a state or federal database.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
D.	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Name of the data source(s) used to verify consumer eligibility:

\_\_\_\_\_

#### **ETC Direct Contact**

F. Subscribers contacted by ETC directly to recertify (You may also use this section to report subscriber initiated recertifications).

Report the number of Lifeline subscribers the ETC contacted directly to obtain recertification of eligibility

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
F.	0	0	0	0	0	0	0	0	0	0	0	0	0

G. Subscribers who failed to recertify through ETC direct outreach attempt

Report the number of Lifeline subscribers de-enrolled due to ineligibility or non-response to the ETC's outreach attempt.

Repor	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
G.	0	0	0	0	0	0	0	0	0	0	0	0	0

H. Subscribers who recertified through ETC direct outreach attempt

Report the number of Lifeline subscribers that successfully recertified through ETC's outreach attempt.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
H.	0	0	0	0	0	0	0	0	0	0	0	0	0

#### Third Party

I. Subscribers whose eligibility was reviewed by state administrator, third party administrator, or USAC

Report the number of Lifeline subscribers contacted by a state administrator, third party administrator, or USAC for the purpose of recertification.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
I.	0	0	0	0	0	0	0	0	0	0	0	0	0

J.	Name of this	d party	administrator	used to	verify	subscriber	eligibility:
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K. Subscribers de-enrolled as a result of a third party recertification attempt

Report the number of subscribers as a result of ineligibility or non-response to outreach from a state administrator, third party administrator, or USAC.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
K.	0	0	0	0	0	0	0	0	0	0	0	0	0

L. Subscribers who recertified through a state administrator, third party administrator, or USAC's recertification effort

Report the number of subscribers that recertified through a request from a state administrator, third party administrator, or USAC

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
L.	0	0	0	0	0	0	0	0	0	0	0	0	0

#### **Certification:**

## **Recertification Method: Database**

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on a database. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

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#### **Recertification Method: ETC**

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

Initial	
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## **Recertification Method: Third Party**

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on an administrator. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial	

#### No Subscribers

I certify that my company did not claim federal low income support for any Lifeline subscribers 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 listed above.

## Initial ALG

M = (G+K)	$\mathbf{N} = (\mathbf{D} + \mathbf{F} + \mathbf{I})$	O = M/N*100
Total number of subscribers de-enrolled as a result of recertification	Total number of subscribers ETC is responsible for recertifying	Percent of subscribers due for recertification who were de-enrolled
0	0	0.0%

## **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,

Anisa Latif Green, Director
Signature of Officer
al7161@att.com
Email Address of Officer
Anisa Latif Green
Person Completing This Certification Form

Anisa Latif Green, Director

Printed Name and Title of Officer

Jan 31, 2020

Date

202-457-3068

Contact Phone Number

# **Affiliated ETCs**

SAC		Name
-	209012	Cingular Wireless
	259908	Cingular Wireless
	269905	Cingular Wireless
	279010	Cingular Wireless
	289912	Cingular Wireless
	319026	Cingular Wireless
	389015	ATandT Mobility LLC
	399015	Cingular Wireless
	409004	ATandT Mobility LLC
	449022	Cingular Wireless
	529910	Cingular Wireless
	619004	Cingular Wireless
	639005	Cingular Wireless
	215191	BellSouth Telecommunications LLC
	225192	BellSouth Telecommunications LLC
	235193	BellSouth Telecommunications LLC
	245194	BellSouth Telecommunications LLC
	255181	BellSouth Telecommunications LLC
	265182	BellSouth Telecommunications LLC
	275183	BellSouth Telecommunications LLC
	285184	BellSouth Telecommunications LLC
	295185 BellSouth Telecommunications LLC	
	305150 The Ohio Bell Telephone Company	
	315090	Michigan Bell Telephone Company
	325080	Indiana Bell Telephone Company Incorporated
	335220	Wisconsin Bell Inc.
	345070	Illinois Bell Telephone Company LLC
405211		Southwestern Bell Telephone Company
	415214	Southwestern Bell Telephone Company
	555173	Nevada Bell Telephone Company
	545170	Pacific Bell Telephone Company
	549004	ATandT Corp.
	539010	ATandT Mobility LLC
	445216	Southwestern Bell Telephone Company
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