## **AFFIDAVIT**

I, <u>Sheila Allcood</u>, a natural person, do hereby swear and affirm that I am an officer or general partner of Applicant and that the following information and statements are true and correct to the best of my knowledge and belief:

(1) Applicant's basic information:

Northeast Rural Services, Inc. 27039 So. 4440 Rd. PO Box 399 Vinita, Oklahoma (OK) 74301

Telephone:

918-787-9316

Email:

sallgood@boltfiber.com

**Anthony Due** 

CEO

Sheila Allgood

**BOLT Fiber Services Manager** 

Connie Porter

Manager of Finance

- (2) Area where the Applicant proposes to offer telecommunications services: Statewide.
- (3) That the Applicant is legally, financially, and technically qualified to provide the requested authorization to provide the indicated telecommunications services;
- (4) That the Applicant is ready, willing, able, and will comply with all applicable state and federal laws and regulations imposed upon providers of the indicated telecommunications services;
- (5) That the Applicant will comply with applicable assessment requirements.

  These assessments include but are not necessarily limited to:

- (a) Relay Missouri assessment requirements identified in 4 CSR 240-28.050(3);
- (b) Missouri universal service fund assessment requirements identified in 4 CSR 240-28.050(2);
- (c) Missouri Public Service Commission assessment requirements identified in 4 CSR 240-28.050(1);
  - (d) Local enhanced 911;
  - (e) Any applicable license tax:
- (6) That the Applicant will comply with applicable reporting requirements identified in 4 CSR 240-28.040 including maintaining an updated list of company contacts in the Missouri Commission's Electronic Filing and Information System;
- (7) That the Applicant has established a process for handling inquiries from customers concerning billing issues, service issues, and other consumer-related complaints;

and

(8) The Applicant's service meets the criteria as defined within §386.020 for the indicated services sought for certification.

This concludes my affidavit.

(Signature)

Printed Name

(Title)

State of Oklahoma

County of CRAig

Subscribed and sworn before me this <u>Z</u> day of January, 2018.

Notary Public

Notary Seal:

SHANE BURGESS
Notary Public
State of Oklahoma
Commission # 08003194
My Commission Expires Mar 18, 2020