

**BEFORE THE PUBLIC SERVICE COMMISSION
OF THE STATE OF MISSOURI**

IN THE MATTER OF THE)	
APPLICATION OF EASY TELEPHONE)	
SERVICE COMPANY D/B/A EASY)	Case No. TA-2011-0164
WIRELESS FOR DESIGNATION AS AN)	
ELIGIBLE TELECOMMUNICATIONS)	
CARRIER ON A WIRELESS BASIS)	
(LOW INCOME ONLY))	

APPLICANT'S FILING OF AFFIDAVIT OF JOSEPH FERNANDEZ

Comes now Applicant Easy Telephone Service Company ("Applicant" or "Easy"), by its undersigned counsel, and supplements the information provided in support of its Application.

1. Attached hereto is the affidavit of Joseph Fernandez, consisting of two pages and two exhibits. Easy requests that the affidavit be incorporated into the record.

Respectfully submitted,

/s/ Mark P. Johnson
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Attorneys for Easy
Telephone Service Company

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing was served electronically on this 5th day of May, 2011, on the following:

General Counsel
Missouri Public Service Commission
PO Box 200
Jefferson City, MO

Office of Public Counsel
PO Box 360
Jefferson City, MO

/s/ Mark Johnson

Mark Johnson, Esq.

STATE OF FLORIDA)
) ss.
COUNTY OF Mason)

AFFIDAVIT OF JOSEPH FERNANDEZ

Comes now Joseph Fernandez, being of lawful age and duly sworn, and who swears and affirms as follows:

1. My name is Joseph Fernandez. I hold the position of president of Easy Telephone Service Company d/b/a Easy Wireless ("Easy Wireless"), which has filed an application for designation as an Eligible Telecommunications Carrier with the Missouri Public Service Commission ("the Commission"). This affidavit is intended to assure the Commission that Easy Wireless will comply with all relevant rules of the Commission with respect to certifying that customers are eligible to receive Universal Service Fund benefits and protecting customer propriety information, and to provide certain information relating to an inquiry which the Commission's Staff has undertaken into certain issues raised in the context of Easy Wireless' application.

2. As part of the process Easy Wireless will follow in Missouri to verify that customers are eligible for benefits from the Federal Universal Service Fund, Easy Wireless will require that all potential customers produce documentation that they participate in at least one of the programs that qualify them for such benefits. A representative of Easy Wireless will examine the documentation to verify the customer's eligibility, and will either return the documentation to the customer or dispose of it. Verification of the customer's eligibility will be dependent on review of the documentation by the Easy Wireless representative.

3. Easy Wireless will comply will all provisions of 4 CSR 240-31.050, concerning customer eligibility for low-income USF benefits. Without limiting the foregoing, Easy Wireless will have customers complete a Missouri Universal Service Board-approved application, as

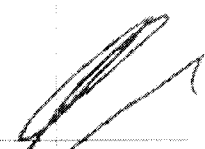
required by 4 CSR 240-31.050(3), will develop a process to record and then dispose of the documentation provided by the customer to demonstrate eligibility, as required by 4 CSR 31.050(3)(D)(2), and will develop a procedure to verify a customer's continued eligibility for Universal Service Fund benefits, as required by 4 CSR 31.050(3)(E).

4. Further, Easy Wireless will comply with the Commission's rule concerning Customer Proprietary Network Information, set forth at 4 CSR 240.33-160.

5. Attached to this affidavit are true and accurate copies of the customer certifications forms that Easy Wireless will use in Missouri and the form that was used in Louisiana at the events which gave rise to the whistle-blower allegation communicated to the Commission by a representative of the United State Administrative Company. The carrier involved in that situation was not Easy Wireless, and is not in any way related to or affiliated with Easy Wireless.

I have reviewed the foregoing and it is true and accurate to the best of my knowledge and belief.

Further affiant sayeth not.



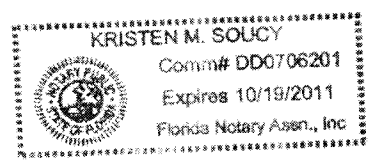
Joseph Fernandez

Sworn to and subscribed before me this 4th day of May, 2011.



Notary Public

My commission expires:
10/19/11





IT'S FREE. AND YOU SAVE MORE!
EASY TELEPHONE

For Office Use Only

Customer Account Number

Lifeline and Link-Up Certification Form

Please Print Clearly (Red Indicates Required Fields)

Date: _____
 Name: _____
 Address: _____ Apt# _____
 City: _____ State: _____ Zip Code: _____
 Last 4 Digits of SSN#: _____
 Current Home Number () _____
 Contact Phone Number () _____

I hereby certify that I participate in the following public assistance program(s):

- Medicaid (known as MO HealthNet)
- Food Stamps
- Supplemental Security Income (SSI)
- National School Lunch Program (free program only)
- Federal Public Housing (HUD/Section 8)
- Temporary Assistance to Needy Families (TANF)
- Low Income Home Energy Assistance Plan (LIHEAP)
- Veterans Administration Disability Benefits
- State Blind Pension
- State Aid to Blind Persons
- State Supplemental Disability Assistance Payments Administered by the Family Support Division
- Federal Social Security Disability
- Federal Supplemental Security Income

If you are not the recipient of any of the above public assistance programs, please state your relationship to the household member receiving assistance: _____

I certify that I am a current recipient of the above programs(s) and will notify my wireless telephone company when my household is no longer participating in any of the above-designated program(s). I give permission to the duly authorized official(s) administering the above programs to provide to my cellular carrier documentation of my participation status in any of the above program(s). I give this permission on the condition that the information on this form and any information about my participation in the above programs provided by officials be maintained by the company as confidential customer account information. I confirm that local service discounts under the low income or disabled programs are limited to one per household.

X _____
Applicant's Signature **Date**

I authorize Easy Telephone Services, Inc. to be my cellular carrier for the above listed telephone number and agree to terminate any pre-existing lifeline service in lieu of the Linkup/Lifeline discounts provided through Easy Wireless.

I certify that I have received the link-up discount at this residence from another carrier and I am not eligible for the discount at this time.

Easy Telephone Services, Inc.
 PO BOX 831717
 Ocala FL. 34483
 Customer Service: 866-476-0235 á Fax: 877-512-0042

I, _____, hereby attest that the supporting program documentation was presented and verified.

_____ Title _____ Date _____
Company Representative Signature



AFFORDABLE WIRELESS

For Office Use Only

Customer Account Number

Lifeline and Link-Up Self-Certification Form

Please Print Clearly (Red Indicates Required Fields)

Date: _____

Name: _____

Address: _____ Apt# _____

City: _____ State: _____ Zip Code: _____

Current Home Number () _____

Contact Phone Number () _____

New Service

Conversion

New Phone Number: _____ ESN: _____

I hereby certify that I participate in the following public assistance program(s):

- Medicaid
- Food Stamps
- Supplemental Security Income (SSI)
- National Free Lunch Program (free program only)
- Federal Public Housing (HUD/Section 8)
- Temporary Assistance to Needy Families (TANF)
- Low Income Home Energy Assistance Plan (LIHEAP)

If you are not the recipient of any of the above public assistance programs, please state your relationship to the household member receiving assistance: _____

AGENT/REFERRING ORGANIZATION: 01/07/11

I certify that I am a current recipient of the above programs(s) and will notify my wireless telephone company when I am no longer participating in any of the above-designated program(s). I give permission to the duly authorized official(s) administering the above programs to provide to my cellular carrier my participation status in any of the above program(s). I give this permission on the condition that the information on this form and any information about my participation in the above programs provided by officials be maintained by the company as confidential customer account information. I am aware that pursuant to Section 837.06, F.S., whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree.

X _____
Applicant's Signature Date

I authorize Affordable Wireless, Inc. to be my cellular carrier for the above listed telephone number and agree to terminate any pre-existing lifeline service in lieu of the Linkup/Lifeline discounts provided through Affordable Wireless.

I certify that I have received the link-up discount at this residence from another carrier and I am not eligible for the discount at this time.

Affordable Wireless, Inc.
PO Box 831372
Ocala FL 34483-9988
Customer Service: 888-463-8729 · Fax: (866) 497-1950