MAR 3 0 2016

Buehner-Fry, Inc. dba Direct Dial

Missouri Public Service Commission

Company Name

(Provide the full name of the company as certificated or registered with the Missouri Public Service Commission. Do not abbreviate; include any Commission approved d/b/a or fictitious name, if applicable.)

TELECOMMUNICATIONS COMPANY OR IVoIP PROVIDER ANNUAL REPORT TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of January 1 - December 31, 2015

Please select how the company is certificated or registered with the Commission under the Company Name as shown above (check all that apply):

Incumbent Local Telecommunications Company (not competitively classified ILEC)

Incumbent Local Exchange Telecommunications Company (competitively classified ILEC)

Competitive Local Exchange Telecommunications Company (CLEC)

Interexchange Telecommunications Company (IXC)

Local Non-switched Telecommunications Provider (classified in EFIS as IXC)

Interconnected Voice over Internet Protocol Service Provider (IVoIP)

If more than one certificate or registration is held by the company then keep in mind that you must file an annual report in the Commission's Electronic Filing and Information System (EFIS) based on each certificate or registration. In such situations, we anticipate the annual reports to be identical; however please verify the following:



1 :

The various annual reports filed in EFIS are identical.

The various annual reports filed in EFIS are different.



Not applicable (Company only has one certificate or registration; therefore only one annual report was filed in EFIS.)

Please choose one of the following filing options to indicate the security level of the filing:



Public submission (NOT Proprietary or Highly Confidential)

Non-Public submission (Highly Confidential or Proprietary) (See instructions for special requirements.)

Please review the instructions document on the previous page before proceeding.

Excel Issue Date: 12/16/2015

For use when filing under seal.

Annual Report of	Buehner-Fry	/, Inc. dba Direct Dial
	for the calendar year of Ja	anuary 1 - December 31, <u>2015</u>
State in full the company's in	nformation below:	
389 SW Scalehouse Court, S	uite 100, Bend, OR 97702	541-617-2933
Company Stre	· · · · ·	Telephone Number
389 SW Scalehouse	e Court, Suite 100	541-617-2941
Company Mailing Address (if d	ifferent from street address)	Fax Number
Bend	OR 97702	MBCoker@TheNavisWay.com
City	State Zip	E-Mail Address
This company is currently a (ch	eck appropriate box):	
Corporation Sole Pro	prietorship 🗌 LP	
Partnership LLC	🗌 Other - Explain	
· · · · · · · · · · · · · · · · · · ·		

3. Annual Report Contact Information:

List the contact information of the person completing the form, whether an employee or a third-party preparer. This may differ from the address in Item No. 1.

Mark Lammert, CPA, Tax Prepa	arer for Com	ipany	407-260-1011
Name			Telephone Number
242 Rangeline Road, Longwo	ood, FL 327	50	407-260-1033
Street Address			Fax Number
242 Rangeline Ro	ad		mark@csilongwood.com
Mailing Address	3		E-mail Address
Longwood	FL	32750	
City	State	Zip	

4. Identify the principal or general officers of the company at the end of the year. Please include an additional sheet, if enough space is not provided on this page, to completely provide the requested information.

Title of General Officer	Name of Person Holding Office
President and Secretary	Kyle S. Buehner

5. Please provide a list of all mergers, consolidations, and reorganizations involving the registered or certificated company and completed during the last year. Do not include internal company reorganizations or personnel issues.

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Buehner-Fry,	Inc. dba	Direct Dial

for the calendar year of January 1 - December 31, 2015

6. Please provide the following information concerning the company's revenues for this calendar year:

Row	Please provide the following information concerning the company Revenues	y's	MO Jurisdictional (Column A)		u	ar	year: Total Company ¹ (Column B)	
I. RE	TAIL			± ★				
	Local Service Revenues include tariffed revenues attributed to local telecommunications services, extended area service, secondary features such as call forwarding, caller ID, local operator services, directory-related services, etc. and for IVoIP service.							
	Interexchange Revenues include revenues attributed to interexchange telecommunications services such as toll services, 800 services, interexchange operator services and interexchange IVoIP services.		\$0.00				\$0.00	
	Non-Switched Telecommunications Service Revenues include revenues attributed to retail local and interexchange private line services (but not special access or private line services provided to other telecommunications carriers).				自然にないたのであるというです。			
	Bundled or Packaged Revenues include any revenues whereby the company is providing voice services in combination with multiple services whereby revenue can not be easily attributed to local, interexchange or non-switched categories. If such bundles includes Internet, video or some non-regulated service then the company's revenue shall be based on the company's rate offer for solely voice services. The excess revenue associated with the bundled service which is over the amount related to revenue associated with voice only service shall be recorded in the Total Company column. If voice service is only offered as part of a bundled service, the company shall identify all revenue associated with the bundle of services in the Missouri Jurisdictional column.							
	Retail Uncollectible Revenues from telecommunications revenues. (This amount is generally a negative number.)			537	NEWS OWN			
	RETAIL TOTAL (This amount should equal the total of Rows 1 - 5 above and should also match your Missouri Universal Service Fund Net Jurisdictional Revenue Report amount.)		\$0.00		教室が見たななの思想が見		\$0.00	
II. OT	HER	(Apr					8 8 12 12 12 19 19 19 19 19 19 19 19 19 19 19 19 19	
	Wholesale Revenues include intrastate switched, special access service revenues, carrier billing and collection revenues, and any other revenues derived from other telecommunications carriers.				がいませんなのない			
	Miscellaneous Revenues ² associated with non-retail services, such as, advertising revenues, rent revenues, corporate operations revenues, special billing arrangements, customer operations, plant operations, other incidental regulated revenues, and other revenue settlements. (NOTE FOR ILEC ONLY: refer to FCC account #s: 5230, 5240, 5250, 5261, 5262, 5263, 5264, 5269, and 5270.)		\$0.00				\$0.00	
. (Other Uncollectible Revenues from other revenues. This amount is generally a negative number.)						······	
!	High-Cost Federal USF Revenues include all revenues received as support from the Universal Service Fund for the High-Cost program.		N/A					
1	Other Federal USF Revenues include all revenues received as support from the Universal Service Fund for the following programs: Low Income, Schools and Libraries, and Rural Health.		N/A		「「海川語の法語学で			
	State USF Revenues include all revenues received as support from the Iniversal Service Fund.				STATES OF		-	
r	TOTAL REVENUES (This amount should equal the total of Rows 6 - 12 above.) Total MO Jurisdictional Revenue (Column A) should match Total Gross Intrastate Operating Revenue on the Statement of Revenue.		\$0.00				\$0.00	

"Telecommunications Service" as defined by Missouri Revised Statutes Section 386.020(54).

"Interconnected Voice over Internet Protocol service" as defined by Section 386.020(23) RSMo.

1 List total regulated revenue and IVoIP revenue provided by a registered company and, if applicable, non-regulated revenue for company name as listed at the top of this page.
 Do not include revenues for any company NOT listed at the top of the page.

 2 If you have miscellaneous revenue related to retail telecommunications services, then enter it in Row 1.

For use when filing under seal.

for the calendar year of January 1 - December 31, 2015

7.

Line Quantities for Local Voice Service & IVoIP Service¹

				tail				Wholesale to Non-Registered Nomadic IVoIP	
Exchange ²	**	Residential	**	**	Business	**	**	Providers ³	**
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Totals:		·							

¹ See instructions for additional clarification about filling out this page.

² Exchange refers to areas as listed in ILEC tariffs. (Exchanges are not always the same as rate centers, wire centers and central offices.)

³ Wholesale to Non-registered Nomadic IVoIP Providers refers to arrangements where your company is providing wholesale services for a nomadic IVoIP provider who is not registered with the Missouri PSC. (Do not use this column for retail line quantities or if your company sets the end user's rates.)

5

for the calendar year of January 1 - December 31, 2015

Relay Missouri Annual Billing, Collections and Retention

8. Any ILEC, CLEC or VoIP provider must submit information in the table below.¹ (The table should be completely filled-in. The only exception is if a company is reporting "0" line quantities on page 4 whereby insert \$0 in the total row for each of the three columns.)

Month	Relay Missouri Revenue Collected (collected or received, according to your record- keeping methods)	Relay Miss Retention Au (of the amount c	mount	Relay Missouri Revenue Remitted to Commission (of the amount collected)
	**	**	* *	**
January	\$0.00		\$0.00	\$0.00
February	\$0.00		\$0.00	\$0.00
March	\$0.00		\$0.00	\$0.00
April	\$0.00		\$0.00	\$0.00
May	\$0.00		\$0.00	\$0.00
June	\$0.00		\$0.00	\$0.00
July	\$0.00		\$0.00	\$0.00
August	\$0.00		\$0.00	\$0.00
September	\$0.00		\$0.00	\$0.00
October	\$0.00		\$0.00	\$0.00
November	\$0.00		\$0.00	\$0.00
December	\$0.00		\$0.00	\$0.00
Total	\$0.00		\$0.00	\$0.00

9. Please indicate the per line value of the Relay Missouri Surcharge applied to your customers in December.



10. If your firm did not impose the Relay Missouri Surcharge, please explain:

¹ Companies classified in the MoPSC's EFIS system solely as IXCs are not expected to complete this page.

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Annual Report of Buehner-Fry, Inc. dba Direct Dial for the calendar year of January 1 - December 31, 2015

Official Title of the Affiant (Company Official/Representative) of Buehner-Fry, Inc. dba Direct Dial Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at	Receiver of the co		ed may be taken b	pefore any pers	reasurer, General Manag son authorized to administ	
State Of Oregon } County Of Deschutes } Sis:			OATH			
County Of Deschutes \$5: Ben Coker makes oath and says that Name of Affiant (Company Official/Representative) makes oath and says that s/he is Tax Manager Official Title of the Affiant (Company Official/Representative) of Buehner-Fry, Inc. dba Direct Dial Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at 389 SW Scalehouse Court, Suite 100, Bend, OR 97702 Address and Telephone Number of the Affiant (Company Official/Representative) Address and Telephone Number of the Affiant (Company Official/Representative) that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct. from January 1 2015 , to and including December 31 2015 Signature of Affant (Company Official/Representative) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 21.24 day of March 2016 Month/Day Year April 14 2016 2016 2016 <td>State Of</td> <td>C</td> <td>regon</td> <td>}</td> <td></td> <td></td>	State Of	C	regon	}		
County Of Deschutes Ben Coker makes oath and says that Mame of Affiant (Company Official/Representative) makes oath and says that Name of Affiant (Company Official/Representative) s/he is <u>Tax Manager</u> Official Title of the Affiant (Company Official/Representative) of <u>Buehner-Fry, Inc. dba Direct Dial</u> Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at <u>389 SW Scalehouse Court, Suite 100, Bend, OR 97702</u> Address and Telephone Number of the Affiant (Company Official/Representative) that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct. from <u>January 1</u> , <u>2015</u> , to and including <u>December 31</u> , <u>2015</u> Month/Day <u>Year</u> <u>Month/Day</u> <u>Year</u> <u>Signature of Affiant (Company Official/Representative)</u> Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this <u>2154</u> day of <u>March</u> , <u>2016</u> <u>Morth Public, OREGON</u>				í		
Ben Coker makes oath and says that Name of Affiant (Company Official/Representative) s/he is Tax Manager Official Title of the Affiant (Company Official/Representative) of Buehner-Fry, Inc. dba Direct Dial of Buehner-Fry, Inc. dba Direct Dial Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at 389 SW Scalehouse Court, Suite 100, Bend, OR 97702 Address and Telephone Number of the Affiant (Company Official/Representative) that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct. from January 1 2015 , to and including December 31 2015 form January 1 2015 , to and including December 31 2015 Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, March 2016 this 2154 day of March 2016 NONAHAM MCCULLEY Apr/L 14 2018 <td>County Of</td> <td>Da</td> <td>achutaa</td> <td>{</td> <td>SS.</td> <td></td>	County Of	Da	achutaa	{	SS.	
Name of Affiant (Company Official/Representative) s/he is Tax Manager Official Title of the Affiant (Company Official/Representative) of Buehner-Fry, Inc. dba Direct Dial Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at 389 SW Scalehouse Court, Suite 100, Bend, OR 97702 Address and Telephone Number of the Affiant (Company Official/Representative) that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct. from January 1 , 2015 , to and including	County Of	De	schutes	{		
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and is located at		Official Til	le of the Affiant (Co	mpany Official/F	Representative)	
and is located at						
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Address and Telephone Number of the Affiant (Company Official/Representative) that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct. from January 1 , 2015 , to and including December 31 , 2015 Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 2154 this 2154 day of March , 2016 Month/Day Year April 14 , 2018		Exact Legal Title	or Name of the Res	pondent (Certific	cated Company Name)	
Address and Telephone Number of the Affiant (Company Official/Representative) that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct. from January 1 , 2015 , to and including December 31 , 2015 Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 2154 this 2154 day of March , 2016 Month/Day Year April 14 , 2018	and is leasted at	000 000		0.11. 400 D.		
that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct.	and is located at					
Month/Day Year Month/Day Year Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) Signature of Affiant (Company Official/Representative) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 2154 day of March 2016 Immission Fell Charles TAMP April 14 2018 DERK JONATHAN MCCULLEY April 14 2018	belief, all statement statement of the bu as applicable) the o	nts of fact contained in the usiness and affairs of the company's contact inforr	e said report are t above-named re nation in EFIS; to	true and the sa spondent, and	aid report is a correct I 2) examined (and updated	d
Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 215t day of March , 2016 March , 2016 March 14, 2018 March 14, 2018	from -			including [
Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this <u>215t</u> day of <u>March</u> , <u>2016</u> March <u>2016</u> March <u>19</u> , <u>2018</u> March <u>19</u> , <u>2018</u> March <u>19</u> , <u>2018</u>		Month/Day	rear		wonth/Day Year	
Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this <u>215t</u> day of <u>March</u> , <u>2016</u> March <u>2016</u> March <u>19</u> , <u>2018</u> March <u>19</u> , <u>2018</u> March <u>19</u> , <u>2018</u>			111	1/-	10	
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this 215t day of March , 2016 March , 2016 March , 2016 DERK JONATHAN MCCULLEY NOTARY PUBLIC-OREGON		-	Signature of A	ffiant (Company	Official/Representative)	
DERK JONATHAN MCCULLEY NOTARY PUBLIC-OREGON		_				
DERK JONATHAN MCCULLEY NOTARY PUBLIC-OREGON	Subscribed and sw	 orn to before me, a Nota				
DERK JONATHAN MCCULLEY NOTARY PUBLIC-OREGON		Forn to before me, a Note $215t$	ary Public, in and i	for the State a	nd County above named,	
		Forn to before me, a Nota	ary Public, in and i	for the State a	nd County above named,	
	this _	215+	ary Public, in and i	for the State a	nd County above named,	
MY COMMISSION EXPIRES APRIL 14, 2018	this	215t issighteringstamp erkjonathan Mccullen Notary Public-Oregon	ary Public, in and i	for the State a	nd County above named,	
Missouri Revised Statutes § 392.210 or §393.140	this	2157 IISSIGFECTALeSTAMP ERK JONATHAN MCCULLEN NOTARY PUBLIC-OREGON COMMISSION NO. 927101	ary Public, in and t day of	for the State a March	nd County above named, <u>2018</u> 	