

## AFFIDAVIT

I, Darin T. LaCoursiere, a natural person, do hereby swear or affirm that I am an officer or general partner of Clay County Rural Telephone Cooperative, Inc. dba Endeavor Communications ("Applicant"), and that the following information and statements are true and correct to the best of my knowledge and belief:

*(1) Applicant's Legal Name and Principal Place of Business:*

Clay County Rural Telephone Cooperative, Inc. dba Endeavor  
Communications  
2 S. West Street  
Cloverdale, Indiana (IN) 46120

*Applicant's Principal Executive Officers:*

Devin Salsman, Chairman of the Board  
Darin T. LaCoursiere, President and CEO  
Brad Henderson, Vice President  
Sara Morris, Vice President of Finance  
Pamela Kivett, Secretary  
James Ellett, Treasurer

*(2) Area where the Applicant proposes to offer telecommunications or VoIP services:* **Statewide.**

(3) The Applicant is legally, financially, and technically qualified to provide the indicated telecommunications and/or Interconnected Voice over Internet Protocol services.

(4) 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 and/or Interconnected Voice over Internet Protocol services.

(5) The Applicant will comply with applicable assessment requirements.

These assessments include, but are not necessarily limited, to:

- (a) Relay Missouri assessment requirements identified in 20 CSR 4240-28.012(2)(C);
- (b) Missouri universal service fund assessment requirements identified in 20 CSR 4240-28.012(2)(B);
- (c) Missouri Public Service Commission assessment requirements identified in 20 CSR-4240-28.012(2)(A);
- (d) Local enhanced 911;
- (e) Any applicable license tax.

(6) The Applicant will comply with all of the applicable reporting requirements identified in 20 CSR 4240-28.012, including maintaining an updated list of company contacts in the Missouri Commission's Electronic Filing and Information System (EFIS).

(7) The Applicant has established a process for handling inquiries from customers concerning billing issues, service issues and other consumer-related complaints.

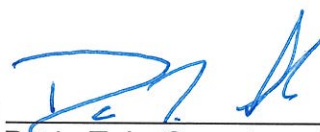
(8) The Applicant's service meets the criteria as defined within Section 386.020, RSMo, for the indicated services sought for certification and/or registration.

(9) The undersigned requests waiver of Rule 4.017 for good cause. By signing this form, I hereby certify that neither I, nor any other member of this filing party, has had communications with a Commissioner, Commission Advisor, Regulatory Law Judge, or any member of their support team in the one hundred

fifty (150) days prior to the filing date of this application regarding any substantive issue included in this filing.

Under penalty of perjury, I declare that the foregoing is true and correct to the best of my knowledge and belief. This concludes my affidavit.

(Signature)



Darin T. LaCoursiere, President and CEO

Dated: \_\_\_\_\_

4/29/2024