

January 29, 2024

Via E-Filing Only

Oregon Public Utility Commission  
Attn: Filing Center  
P.O. Box 1088  
Salem, OR 97308-1088  
[puc.filingcenter@state.or.us](mailto:puc.filingcenter@state.or.us)

**Re: Docket No.: RT 1  
2023 Lifeline Re-Certification Results Reported to the FCC and USAC**


To Whom It May Concern:

Pursuant to the Federal Communications Commission's *Report and Order*<sup>1</sup> requiring eligible telecommunications carriers to re-certify the eligibility of their Lifeline subscribers and to report the results to the Federal Communications Commission, Universal Service Administrative Company and to state commission and Tribal governments, United Telephone Company of the Northwest dba CenturyLink hereby submits its 2023 Lifeline re-certification results for the state of Oregon.

Please note that the results are provided separately for each FCC study area. In addition, the numbers being reported this year are mostly zero as we are no longer handling the verifications and recertifications. The Lifeline National Eligibility Verifier (National Verifier) has taken over these functions for all states except the Opt-out-states of Oregon and Texas. Per USAC's instructions, we are still completing and filing the Form 555 reports; only we are filling them in with zeros where the National Verifier has taken over.

Please do not hesitate to contact me at (816) 759-2895 or via email at [peter.gose@lumen.com](mailto:peter.gose@lumen.com) should you have any questions regarding this filing.

Sincerely,



Peter J. Gose  
Regulatory Affairs Director

Attachment(s)

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<sup>1</sup> In the Matter of Lifeline and Link Up Reform and Modernization, Lifeline and Link Up, Federal-State Joint Board on Universal Service, Advancing Broadband Availability Through Digital Literacy Training, Report and Order and Further Notice of Rulemaking, 27 FCC Rcd 6656, 6715-16 ¶132 (2012); 47 C.F.R. § 54.416. Also see Public Notice, 28 FCC Rcd 12947 (2013).

**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)**

532400 _____ Study Area Code (SAC)	143002588 _____ Service Provider Identification Number (SPIN)	
<i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for <b>each SAC</b> that provides Lifeline service).</i>		
2023 _____ Recertification Year	OR _____ State	CenturyLink United Telephone Co of the Northwest(FKA Embarq) _____ ETC Name  Lumen Technologies, Inc.
_____ DBA, Marketing, or Other Branding Name <i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i>	_____ Holding Company Name <i>(If same as ETC name, list "N/A" Do <u>not</u> leave blank)</i>	

**Does the reporting company have affiliated ETCs? Yes  No**

*Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.*

Affiliated ETC's SAC	Affiliated ETC's Name
535163	CenturyLink Qwest Corporation
532361	CenturyLink CenturyTel of Oregon, Inc.

**Initial Certification** *All ETCs must complete this section.*

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

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

Initial AG

**Annual Recertification Results**

Report the results of recertification efforts for the current calendar year.

*Do not leave blocks empty. If the National Verifier is responsible for conducting recertification, enter zero for blocks A - F. If the state Lifeline Administrator is responsible for conducting recertification, report the results for each block.*

A. Subscribers eligible for recertification within current calendar year	0
B. Subscribers de-enrolled prior to recertification attempts	0
C. Total number of subscribers required to be recertified (A-B)	0
D. Subscribers successfully recertified	0
E. Subscribers de-enrolled for failed recertification	0
F. Percentage de-enrolled for failed recertification (E/C)	0.00%

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from:  state Lifeline administrator  National Verifier

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

Initial AG

**No Subscribers Certification** *Complete this section if ETC claimed no Lifeline subscribers.*

I certify that my company did not claim federal low income support 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(s) listed on this form

Initial \_\_\_\_\_

## 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. 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  No

If yes, record the number of subscribers de-enrolled for non-usage by month in Block H below.

G	H
Month	Subscribers De-Enrolled for Non-Usage
<b>January</b>	0
<b>February</b>	0
<b>March</b>	0
<b>April</b>	0
<b>May</b>	0
<b>June</b>	0
<b>July</b>	0
<b>August</b>	0
<b>September</b>	0
<b>October</b>	0
<b>November</b>	0
<b>December</b>	0
<b>Total Subscribers</b>	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.

## Signature Block

By signing below, I certify that the information provided is true and accurate. I am an officer of the company named above. I am authorized to make this certification for this SAC.

Signed,

Andrea Genschaw

\_\_\_\_\_  
Signature of Officer

ANDREA.GENSCHAW@LUMEN.COM

\_\_\_\_\_  
Email Address of Officer

Heather Malone

\_\_\_\_\_  
Person Completing This Certification Form

Andrea Genschaw - SVP Controller

\_\_\_\_\_  
Printed Name and Title of Officer

01-25-2024

\_\_\_\_\_  
Date

3183306442

\_\_\_\_\_  
Contact Phone Number