

# Interstate Access Support (IAS) 

Date
58310207

To: Marlene H. Dortch
Office of Secretary
Federal Communications Commission
445-12th Street, SW
Washington, DC 20554
Karen Majcher
Vice President - High Cost and Low Income Division
Universal Service Administrative Company
2000 L Street, NW, Suite 200
Washington, DC 20036
Re: CC Docket No. 96-45
Interstate Access Support - IAS
Annual Certification Filing
This is to certify that Eagle Telephone System the, dol va Snake River PCS
will use its INTERSTATE ACCESS SUPPORT - IAS only for the provision, maintenance and upgrading of facilities and services for which the support is intended.

I am authorized to make this certification on behalf of the company named above. This certification is for the study areas) listed below. (Please enter your Company Name, State and Study Area Coda)

IAS

| Your Company Name | State | Your Study Area Code |
| :--- | :--- | :--- |
| Eagle Telephone System, Inc. dba | Oregon | 539007 |
| Snake River PCS |  |  |
|  |  |  |
|  |  |  |

(If necessary, attach a separate list of additional study areas and check this box.)
Signed,


Date: $\quad 5 / 31 / 2007$
[Signature of Authorized Representative]
Michael L. Latin
[Printed Name of Authorized Representative]
Assistant Manager
[Title of Authorized Representative]
Eagle Telephone Syiteminc. dibs.
Carrier's Name: Snake River PCS

# Interstate Common Line Support (ICLS) 

Date $\qquad$
To: Marene H. Dortch
Office of Secretary
Federal Communications Commission
445-12th Street, SW
Washington, DC 20554
Karen Majcher
Vice President - High Cost and Low Income Division
Unlversal Service Administrative Company
2000 L Street, NW, Sulte 200
Washington, DC 20036
Re: CC Docket No. 96-45

## Interstate Common Line Support - ICLS

Annual Certification Filing
This is to certify that Eagle Telephone System, Inc. aloa Snake Rvier PCS
will use its INTERSTATE COMMON LINE SUPPORT - ICLS only for the provision, maintenance and upgrading of facilities and services for which the support is intended.

I am authorized to make this certification on behalf of the company named above. This certification is for the study area(s) llsted below. (Please enter your Company Name, State and Study Area Code)

ICLS

| Your Company Name | State | Your Study Area Code |  |
| :--- | :--- | :--- | :---: |
| Eagle Telaphone System, Inc. dba | Oregon | 539007 |  |
| Snake River PCS |  |  |  |
| (If necessary, attach a separate list of additional study areas and check this box.) |  |  |  |

Signed,

[Signature of Authorized Representative]
Michael L. Lattin
[Printed Name of Authorized Representative]
Assistant Manager
[Title of Authorized Rapresentative]
Carrier's Name: Eagle Telephone System diba. Snake River

