Voice Telco Services

Company Name

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

TELECOMMUNICATIONS/IVoIP ANNUAL REPORT TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of January 1 - December 31, 2022

	•	·
This filing is	required pursuant to Commission Rule 20 CSR 42	40-28.012 and Section 392.210 RSMo.
Please sel	lect how the company is certificated and/or	registered with the Commission (check
	Incumbent Local Telecommunications Company (ILEC	C)
	Competitive Local Exchange Telecommunications Co	mpany (CLEC)
X	Interexchange or Local Non-Switched Telecommunica	ations Company (IXC)
	Interconnected Voice over Internet Protocol Service P	rovider (IVoIP)
If unsure of the	he company's authorization, see list of companies at:	https://psc.mo.gov/Forms/Telecommunications_Form
	y's annual report must be filed for each cert the annual reports will be identical; however please verify:	ificate or registration held by the company.
	The various annual reports filed in EFIS are identical.	
	The various annual reports filed in EFIS are different.	
X	Not applicable (Company only has one authorization)	
Please che	oose <u>one</u> of the following filing options to ir	ndicate the security level of the filing:
X	Public	
	Confidential (See instructions for how to file an annual repo	ort under seal)

For use when filing under seal.

Excel Issue Date: 02-14-23

Annual Report of	Vo	ice Telco S	Servi	ces
for the c	calendar year of January 1 - I	December :	31, <u>2</u>	2022
Provide the following co	omnany information:			
_				650-352-4216
100 Mathilda Pla Company Street	<u>ce, sie 000</u>			Telephone Number
100 Mathilda Plac	se Suite 600			https://www.intermedia.com
Company Mailing Address	e, Julie 000	Com	pany	Website Address (if no website inser
(if different from street addre	ess)			
Sunnyvale, C	A 94086			
City Stat	te Zip			
The company's contact inf	ormation in EFIS has been re	eviewed an	ıd up	dated as applicable.
✓ Yes	No			
Provide the following infor	mation for the person comp	letina this	annıı	al report
Name:	Mark Lammert	oung uno		et Address:
	regulatory@csilongwood.com			242 Rangeline Road
	407-260-1011	_		Longwood, FL 32750
· —		_		Longwood, 1 E 02700
I am (check as appropriate):	An employee of the company	✓ A thire	d-party	preparer preparer
am listed in EFIS as the compa	any's annual report contact:	✓ Yes		No
identity the company's top Title	three principal officers at th	e ena of th	e yea	ar. Name
CEO				Michael Gold
CFO				Jason Vedhuis
II ECe CI ECe and IVoID cou	mnanies are required to provide	the followi	na Pa	elay Missouri assessment information
<u> </u>	unt remitted to the Relay Misso			<u> </u>
Revenue Collected From Re			**	*
Amount Retained for Billing a	and Collecting the Surcharge		**	k
Relay Missouri Revenue Rer	mitted to Relay Missouri Fund		**	k
Per line value of Relay Misso	ouri Surcharge applied in Dece	mber 2022	: _	\$0.10
II FCs. CI FCs and IVoIP com	panies are required to provide t	the following	g Mis	souri USF assessment information:
,,,,,,,,,,				\$0.00
	ouri USF fund for 2022 calendar	year ²		
	ouri USF fund for 2022 calendar	year ²		40.00
Amount remitted to the Misso The amounts for Item Nos. 5 and	6 should reflect the time period ass	ociated with		yment and not dependent on when a
Amount remitted to the Misso The amounts for Item Nos. 5 and		ociated with		yment and not dependent on when a
Amount remitted to the Misso The amounts for Item Nos. 5 and	6 should reflect the time period ass	ociated with		yment and not dependent on when a
Amount remitted to the Misso The amounts for Item Nos. 5 and	6 should reflect the time period ass	ociated with		yment and not dependent on when a
Amount remitted to the Misso The amounts for Item Nos. 5 and	6 should reflect the time period ass	ociated with		yment and not dependent on when a
Amount remitted to the Misso The amounts for Item Nos. 5 and	6 should reflect the time period ass	ociated with		yment and not dependent on when a
Amount remitted to the Misso The amounts for Item Nos. 5 and	6 should reflect the time period ass	ociated with		yment and not dependent on when a

¹For information about the Relay Missouri assessment see https://psc.mo.gov/Telecommunications/Assessments and Filing Requirements

² For information about the Missouri USF assessment see <u>www.missouriusf.com.</u>

Annual Report of	Voice Telco Services				
	for the calendar year of January 1 - December 31, 2022				

7. Please provide the following revenue information:

If no revenue was collected for any box insert \$0.

	if no revenue was collected for any box insert \$0.									
Row	RETAIL END USER REVENUES	**	Missouri Intrastate (Column A)	**	**	Missouri Interstate & International (Column B)	**	**	Missouri Total Company ³ (Column C)	**
1.	Voice Local Service (Basic local telecommunications service, IVoIP service ⁴ including revenue with other features associated with these services. Includes any bundled service whereby these services are bundled with other non-regulated services. ⁵)	**		**	**		**	**		**
	Interexchange Service (Message toll services, 800 services, interexchange operator services).	**		**	**		**	**		**
3.	Non-Switched Services ⁶ (Dedicated non-switched private line services typically used by business customers. Do not include special access or private line services provided to other telecommunications or IVoIP service providers which are reported in Row 6).	**		**	**		**	**		**
4.	Retail Uncollectibles. (Amount is typically a negative number.)	**		**	**		**	**		**
5.	RETAIL END-USER TOTAL (Row 1+2+3+4) Revenue in Column A will be provided to Missouri USF Administrator for assessment purposes.)	**		**	**		**	**		**
	WHOLESALE AND UNIVERSAL SERVICE FUND REVENUES									
6.	Wholesale Revenue ⁷	**		**	**		**	**		**
7.	Wholesale Uncollectibles. (Amount is typically a negative number.)	**		**	**		**	**		**
	Federal USF Revenue (This revenue will be usually listed in Column B; however, list in column A any Connect America Fund Intercarrier Compensation funding used to replace revenue caused by mandatory intrastate switched access rate reductions.)	**		**	**		**	**		**
9.	State USF Revenue	**		**	**		**	**		**
10.	TOTAL REVENUES (Row 5+6+7+8+9) The Total Revenue in Column A should match the Total Gross Intrastate Operating Revenue reported on the Missouri PSC's Statement of Revenue form.	**		**	**		**	**		**

l			
ı			

For use when filing under seal.

³ Total Company Revenue (Column C) = Column A revenue + Column B revenue.

⁴ IVoIP Revenue: If unable to distinguish Missouri Jurisdictional revenue in Column A then a safe harbor percentage can be applied to total revenue that corresponds to the FCC's safe harbor percentage of 35.1% intrastate and 64.9% interstate or as otherwise adjusted by the FCC.

⁵ **Bundled Service Revenue**: If telecommunications or IVoIP service is bundled with non-regulated services then a company may apply either of two methods in reporting bundled revenue in Column A. Method 1: Report bundled revenue in Column A based on the unbundled rate for telecommunications or IVoIP service; or Method 2: Report all bundled revenue in Column A.

⁶ Retail Non-Switched Private Line Service Revenue: If 10% of more of the customer's private line network traffic is considered interstate traffic then 100% of the customer's non-switched private line service revenue can be classified as interstate traffic.

⁷ Wholesale Revenue: Revenue from telecommunications or IVoIP services sold to other service providers including revenue associated with switched access service, special access service, billing and collection and any remaining carrier's carrier revenue provided in FCC Form 499-A, Block 3. NECA settlements should be reported in Column B.

for the calendar year of January 1 - December 31, 2022

8. Line Quantities for Basic Local Telecommunications &/or IVoIP Services

	Line Quantities (as of December 31, 2022)*					
Exchange	**	Residential	**	**	Business	**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
	**		**	**		**
Totals:						

^{*} Line quantities can be provided for a date other than December 31, 2022 if the date is within the month of December.

Clarifications about reporting line quantities:

- 1. Report line quantities for basic local telecommunications service and/or IVoIP service as those terms are defined in Section 386.020(4) and (23), RSMo.
- 2. Lines include analog and digital. For DS-1 or higher band-width facilities a voice grade equivalency must be used. For channelized service report the number of channels subscribed to by the customer. For non-channelized facilities, filers are instructed to use a good-faith estimate of the number of voice grade equivalent lines used for voice service.
- 3. Exchange refers to areas as listed in ILEC tariffs.
- 4. IVoIP line quantities must be filed on a confidential basis per Section 392.550(7)(c) RSMo. See instructions for how to file on a confidential basis.

For use when filing under seal.

VERIFICATION

Note: Prefer Affiant to be President, Treasurer, General Manager or Receiver of Company *

Company Name:	Voice Telco Services	
Annual Report	for calendar year 2022	
	Affiant Information	
Name	Michael Gold	
Title	CEO/President	
City, State	Sunnyvale, CA	
	f perjury, I declare the information contained in this annual report is test of my knowledge and belief.	rue and
	he President, Treasurer, General Manager or Receiver of the company the verify the accuracy of the information presented:	n explain
	Apr /s/ Michael Gold ate Signature of Affiant (If electronic signatures are used, you must use "/s/" before the	e name.)

Missouri Revised Statutes §392.210, §393.140 and §509.030