301618					
COMPE	TITIVE TELEC	OMMUN	NICATION	NS	
	SERVICE PR	OVIDEF	RS		
	For the provision of (ch	eck all that appl	y):		
Y INTEREXCHANGE CARRIER			N COMPETITIVE ACCESS		
N ALTERNATIVE OPERATOR SERVICE PROVIDER		VIDER	N COMPETITIVE LOCAL EXCHANGE CARRIERS		
N OTHER (Describe):				
		L REPO	ORT		
	Consolidated Communication	ons Public Servic	es, Inc.		
	(Exact legal name	of respondent)		-	
	If name was changed duri previous name and		so the		
	consolidat			Ν	
	Website	URL			
350 S. Loop 336 W. Conroe, Address	19275-55	Country	Chata	Zin Cada	
Address	City (936)788	County -7417	State	Zip Code	
,	Phone: (Area Co				
350 S. Loop 336 West Conro	22				
	(Address of principal busine		of year)	-	
	TO T				
PUB	LIC UTILITIES CON	MMISSION	OF OHIO		
	STREES C	OTHER OTHER			
	FOR T YEAR ENDED DEC		0		
Name, title, address, e-mail a concerning this report.	ddress and telephone numb	er (including are	ea code) of the pers	son to be contacted	
	nalyst, 350 S. Loop 336 West,	Conroe, TX, 773	04		
Email: chris.banket@consoli	dated.com, Phone: (936)788-7	7417, Fax:(936)7	88-1229	.4	

IDENTITY OF RESPONDENT

1. Identify respondent's form of business organization: sole proprietorship, partnership, corporation, or other (explain).

Corporation

2. If a consolidated, merged, or reorganized company, briefly provide particulars of such transactions, the date of the transactions, and PUCO authority. If a reorganized company, give name of original company.

N/A

3. Identify any other names (other than shown on title page) under which respondent conducted any part of its business during the year.

N/A

- 4. If incorporated specify:
 - a. Date of filing articles of incorporation: January 05, 1989
 - b. State in which incorporated: Delaware
- 5. Identify PUCO Case Number (and date issued) granting operating authority and identify certificate number(s) issued.

04-518-TP-ACE, 05/19/2004 Certifcate 90-6183

6. State whether respondent is operational in Ohio (actually providing service and the date operations began), or available (but not currently providing service).

Operational, 06/19/2004 Currently only available(stopped operating in Septemeber 2004)

Instructions:

Schedule 1 is used for PUCO annual assessment purposes pursuant to Section 4905.10, RC. The reporting company shall maintain supporting and/or subsidiary records to separately record revenues derived from total operations and from its Ohio intrastate operations. Information presented herein is subject to audit by the PUCO.

The jurisdictional separation of revenues reported in this schedule should conform, to the extent applicable, to the procedures and instructions of CFR 47 Parts 32 and 36.

For interexchange carriers, intrastate refers to messages originating and terminating in Ohio.

For cellular, competitive access, and paging providers, intrastate refers to amounts billed to an Ohio account.

SCHEDULE: 1

STATEMENT OF INTRASTATE GROSS EARNINGS (REVENUE)

1	Operating and Miscellaneous Revenue - Wholesale Cellular Communications, Radio Common Carrier, Directory Revenue, Rent Revenue, Special Billings (revenue from work performed for others, rent revenue-nonoperating return on regulated investment used to provide nonregulated products and services, etc.)	\$0
2	Other Revenue, Dividend and Interest Income, Gains From Disposition of Property Operating and Nonoperating, Other Operating or Nonoperating Gains (foreign currency exchange or transfer, extinguishment of debt, company's share of earnings of affiliated company accounted for on equity method, income from sinking and other funds, etc.)	\$0
3	SUBTOTAL (1) + (2)	\$0
4	Earnings or receipts from sales to other public utilities for resale	\$0
5	TOTAL (3) - (4)	\$0

IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE/INVOICES IS/ARE DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING.

Name, Title, E-mail, Address, and Phone Number of the Company's Contact Persons

Chris Banket Name

chris.banket@consolidated.com E-mail

350 S. Loop 336 W, Conroe, TX, 77304 Address

(936)788-7417 Phone Number (Including Area Code)

Name, Title, E-mail, Address, and Phone Number of Person to whom Invoice

should be Directed

Scott Kitchen Name Sr. Manager, Regulatory Compliance Title

scott.kitchen@consolidated.com E-mail

350 S. Loop 336 W, Conroe, TX, 77304 Address

(936)788-7417 Phone Number (Including Area Code)

Name and Address of the President

Robert J. Currey, President Name

121 S. 17th Street Mattoon, IL 61938-3915 Address Regulatory Analyst Title

VERIFICATION

The foregoing report must be verified by the President or Chief Officer of the company.

OATH

State of IL County of Coles

Robert J Correy makes oath and says that

s/he is President

of Consolidated Communications Public Services, Inc.

that s/he has examined the foregoing report; that to the best of her/his 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 in respect to each and every matter set forth therein during the period from and including January 1, 2010 to and including December 31, 2010.

ignature of affin

Sworn and subscribed before me this 27 day of April . 2011 Month/Year

Signature of noth

July 9, 2014 My commission expires on s

