

BAILEY CAVALIERI LLC

ATTORNEYS AT LAW

One Columbus 10 West Broad Street, Suite 2100 Columbus, Ohio 43215-3422
 telephone 614.221.3155 facsimile 614.221.0479
 www.baileycavalieri.com

RECEIVED-DOCKETING DIV

2015 JUL -1 PM 4:38

direct dial: 614.229.3278
 email: William.Adams@BaileyCavalieri.com

PUCO

July 1, 2015

Barcy F. McNeal, Secretary
 Docketing Division
 Public Utilities Commission of Ohio
 180 East Broad Street, 11th Floor
 Columbus, OH 43215-3793

Re: *In the Matter of the Annual Filing Requirements For 2015 Pertaining to
 the Provisioning of High Cost Universal Service*
 Case No. 15-1115-TP-COI

*In the Matter of the Annual Filing Requirements For 2015 Pertaining to
 the Provisioning of Lifeline Universal Service*
 Case No. 15-1116-TP-COI

Dear Ms. McNeal:

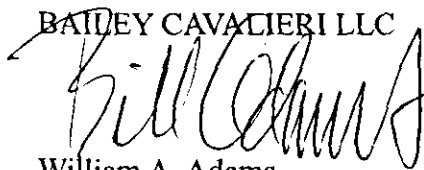
Enclosed are the original and one (1) copy of the **redacted** Rate Floor Data for filing on the public record in the above matters on behalf of Wabash Mutual Telephone Company. Please time stamp the extra copies and return them to our courier.

Also enclosed are four (4) **unredacted** copies of the confidential information to be filed under seal pursuant to the Motion for Protective Order filed in these matters on June 30, 2015. Please time stamp the extra copies of the confidential information being filed under seal, and return them to our courier.

Thank you for your attention to this matter. Please contact me if you have any questions.

Very truly yours,

BAILEY CAVALIERI LLC


 William A. Adams

WAA/sg
 Enclosure

This is to certify that the images appearing are an
 accurate and complete reproduction of a case file
 document delivered in the regular course of business.
 Technician Anna Date Processed 7/1/15

FILE

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - Contact Information

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	300664
2	Carrier Study Area Name	alpha characters	WABASH MUTUAL TEL. CO.
3	Service Provider Identification Number	9 numeric digits	143001683
4	Residential Local Service Charge Effective Date	mm/dd/yy	07/01/15
5	Contact Name	alpha characters	Marchal, Julie D
6	Contact Telephone Number (include area code)	9 numeric digits	419-942-1111
7	Sheet Number	numeric digit(s)	
8	Total Number of Sheets	numeric digit(s)	

Block 2- Residential Local Service Rates, Fees, and Line Counts

Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	Column 6 Exchange Name/ Zone Name	Column 7 Class Of Service
17.70	0.00	0.00	0.00		Wabash	Residential Access Line
9						

**REDACTED - FOR PUBLIC
INSPECTION****Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data**

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier <u>Wabash Mutual Telephone</u>			
Signature of authorized officer <u>Julie Marchal</u>		Date <u>6-10-15</u>	
Printed name of authorized officer <u>Julie Marchal</u>			
Title or position of authorized officer <u>Secretary</u>			
Telephone number of authorized officer: <u>(419)942-1111 ext. 9405</u>			
Study Area Code of Reporting Carrier	<u>30-0664</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2015</u>