Certification of Officer as to the Accuracy of the CAF ICC Data Reported

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

Name of Reporting Carrier Emery Tel	ephone dba Em	ery Telcom			
Signature of Authorized Officer	Authorized Officer				
Printed name of Authorized Officer Darre	en I. Woolsey				
Title or position of Authorized Officer Chi		icer /			
	(435) 748-222				
Study Area Code of Reporting Carrier	502278	Filing Due Date for this form (mm/dd/yyyy)	06/16/2020		

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier on this form certifies that it has complied with Eligible Recovery §51.917(d) and Access Recovery Charge §51.917(e) and is eligible to receive the CAF ICC support requested pursuant to §51.917(f).

Name of Reporting Carrier Emery To	elephone dba Eme	ry Telcom	1,60	TENERAL INC.
Signature of authorized officer	Um P	Verleus	Date	06/12/2020
Printed name of authorized officer Dar	ren L. Woolsey			
and the control of th	nief Financial Office	er		
Telephone number of authorized officer:	(435) 748-2223			
Study Area Code of Reporting Carrier	502278	Filing Due Date for this form (mm/dd/yyyy)	06/16/2020	

CERTIFICATION

I am the Chief Finanical Officer	of Emery Telephone, dba Emery Telcom
I hereby certify that I have reviewed th	e preparation of all data supporting
Emery Telephone, dba Emery Telcom	June 16, 2020 Interstate Access Tariff
Filing, and that I am authorized to exec	ute this certification. Based upon
information provided to me by employ	ees responsible for the preparation of, or
for supervision of the preparation of, the	ne data submitted in support of the rates
contained in the proposed tariff, I here	by certify that the data have been
examined and reviewed and are true, o	correct and complete.
Date: June 14, 2020	(Signature)
	Darren L. Woolsey
	Printed Name Chief Finanical Officer
	(Title)

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Not Seeking Duplicative Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, this reporting carrier is not seeking duplicative recovery in the state jurisdiction for any Eligible Recovery subject to the recovery mechanism as per 51.917(d)(vii).

Name of Reporting Carrier Emery Te	lephone dba Eme	ry Telcom		
Signature of authorized officer	W/m C/	Durlsen	Date	06/12/2020
Printed name of authorized officer Darr	en L. Woolsey			
Title or position of authorized officer Ch	nief Financial Office	эг		
Telephone number of authorized officer:	(478) 748-2223			18301940
Study Area Code of Reporting Carrier	502278	Filing Due Date for this form	06/16/2020	