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: BEAR LAKE COMM

Signature of authorized officer:Mike Plows

Digitally signed by Mike Plows DN:cn=Mike Plows DN:cn=Mike Plows,email=mplows@centracom.com,0=bear lake comm,l=, Date: 5/28/2025

Printed name of authorized officer: Mike Plows

Title or position of authorized officer: Chief Financial Officer

Telephone number of authorized officer: 702-396-0151

Study Area Code of Reporting Carrier:

503032

Filing Due Date for this form (mm/dd/yyyy)

6/16/2025

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.

Certification of Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier

I certify that (Name of Agent) National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data provided to the Authorized Agent; and, to the best of my knwoledge, the actual data provided to the Authorized Agent is accurate. Name of Authorized Agent: National Exchange Carrier Association, Inc. Name of Reporting Carrier: BEAR LAKE COMM Digitally signed by Mike Plows DN:cn=Mike Signature of authorized officer: Mike Plows Date: 5/28/2025 Plows,email=mplows@centracom.com,O=bear lake comm,l= Date:5/28/2025 Printed name of authorized officer: Mike Plows Title or position of authorized officer: Chief Financial Officer Telephone number of authorized officer: 702-396-0151 Filing Due Date for this Study Area Code of 503032 6/16/2025 form (mm/dd/yyyy) Reporting Carrier: 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.

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: BEAR LAKE COMM									
Signature of authorized officer or employee:Mike Plows			Digitally signed by Mike Plows DN:cn=Mike Plows,email=mplows@centracom.com,O=bear lake comm,l=, Date:5/28/2025		Date: 5/28/2025				
Printed name of authorized officer or employee: Mike Plows									
Title or position of authorized officer or employee: Chief Financial Officer									
Telephone number of authorized officer or employee: 702-396-0151									
Study Area Code of Reporting Carrier:	503032		Filing Due Date for this form (mm/dd/yyyy)	6/16/2025					
Persons willfully making	false statements on this form	can be punished by fine or fo	orfeiture under the Communica	ations 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.

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, the 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: BEAR LAKE COMM									
Signature of authorized officer or employee:Mike Plows			Digitally signed by Mike Plo Plows,email=mplows@cen Date:5/28/2025	Date: 5/28/2025					
Printed name of authorized officer or employee: Mike Plows									
Title or position of authorized officer or employee: Chief Financial Officer									
Telephone number of authorized officer or employee: 702-396-0151									
Study Area Code of Reporting Carrier:	503032		Filing Due Date for this form (mm/dd/yyyy)	6/16/2025					
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.