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January 31, 2023

VIA ELECTRONIC FILING

Ms. Sallie Tanner
Executive Secretary
Georgia Public Service Commission
244 Washington Street, SW
Atlanta, Georgia 30334-9052

Re: Docket No. 36946 - FCC Form 555 - Administration of Lifeline Assistance Program for Low-Income Consumers; Charter Fiberlink-Georgia LLC

Dear Ms. Tanner:

Pursuant to 47 C.F.R. § 54.416, attached please find a copy of FCC Form 555, "Annual Lifeline Eligible Telecommunications Carrier Certification Form", for Charter Fiberlink-Georgia LLC for the 2022 reporting period. The FCC has instructed Lifeline providers to provide a copy to the relevant state commissions as appropriate.

Thank you for your assistance and please let us know if you have any questions.

Very truly yours,

FRIEND, HUDAK & HARRIS, LLP

Susan J. Berlin

Attch.

cc: Charter Fiberlink-Georgia LLC

Annual Lifeline Eligible Telecommunications Carrier Certification Form All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

229037
Study Area Code (SAC)

143027345
Service Provider Identification Number (SPIN)

(*An Eligible Telecommunications Carrier (ETC) must provide a certification form for **each SAC** through which it provides Lifeline service*).

2022
Recertification Year

GA
State

Charter Fiberlink-Georgia LLC
ETC Name

N/A
DBA, Marketing, or Other Branding Name
(If same as ETC name, list "N/A" Do not leave blank)

CC Fiberlink LLC
Holding Company Name
(If same as ETC name, list "N/A" Do not leave blank)

Does the reporting company have affiliated ETCs? Yes ☉ No ○

Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

Affiliated ETC's SAC	Affiliated ETC's Name

ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes ☐ No ☉

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or

B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial MRM

Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

Report the number of Lifeline subscribers due for recertification by month (January-December)

A. Subscribers eligible for recertification by anniversary month
B. Subscribers de-enrolled prior to recertification attempts
C. Total number of subscribers ETC is responsible for recertifying (A-B)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
A.	0	0	0	0	0	0	0	0	0	0	0	0	0
B.	0	0	0	0	0	0	0	0	0	0	0	0	0
C.	0	0	0	0	0	0	0	0	0	0	0	0	0

Recertification Methods

State of federal database

D. Subscribers recertified through ETC access to state or federal database by anniversary month

Report the number of eligible subscribers verified through access to a state or federal database.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
D.	0	0	0	0	0	0	0	0	0	0	0	0	0

E. Name of the data source(s) used to verify consumer eligibility:

_____

ETC Direct Contact

F. Subscribers contacted by ETC directly to recertify (You may also use this section to report subscriber initiated recertifications).

Report the number of Lifeline subscribers the ETC contacted directly to obtain recertification of eligibility

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
F.	0	0	0	0	0	0	0	0	0	0	0	0	0

G. Subscribers who failed to recertify through ETC direct outreach attempt

Report the number of Lifeline subscribers de-enrolled due to ineligibility or non-response to the ETC's outreach attempt.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
G.	0	0	0	0	0	0	0	0	0	0	0	0	0

H. Subscribers who recertified through ETC direct outreach attempt

Report the number of Lifeline subscribers that successfully recertified through ETC's outreach attempt.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
H.	0	0	0	0	0	0	0	0	0	0	0	0	0

Third Party

I. Subscribers whose eligibility was reviewed by state administrator, third party administrator, or USAC

Report the number of Lifeline subscribers contacted by a state administrator, third party administrator, or USAC for the purpose of recertification.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
I.	0	0	0	0	0	0	0	0	0	0	0	0	0

J. Name of third party administrator used to verify subscriber eligibility:

_____

K. Subscribers de-enrolled as a result of a third party recertification attempt

Report the number of subscribers as a result of ineligibility or non-response to outreach from a state administrator, third party administrator, or USAC.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
K.	0	0	0	0	0	0	0	0	0	0	0	0	0

L. Subscribers who recertified through a state administrator, third party administrator, or USAC's recertification effort

Report the number of subscribers that recertified through a request from a state administrator, third party administrator, or USAC

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
L.	0	0	0	0	0	0	0	0	0	0	0	0	0

Certification:

Recertification Method: Database

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on a database. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial _____

Recertification Method: ETC
I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial _____

Recertification Method: Third Party
I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on an administrator. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial _____

No Subscribers
I certify that my company did not claim federal low income support for any Lifeline subscribers for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial MRM

M = (G+K)	N = (D+F+I)	O = M/N*100
Total number of subscribers de-enrolled as a result of recertification	**Total number of subscribers ETC is responsible for recertifying**	**Percent of subscribers due for recertification who were de-enrolled**
0	0	0.0%

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Michael R. Moore
Signature of Officer

Michael R. Moore
Printed Name and Title of Officer

michael.moore@charter.com
Email Address of Officer

Jan 30, 2023
Date

Tommy Johnson
Person Completing This Certification Form

314-394-9855
Contact Phone Number

Affiliated ETCs

SAC	Name
259052	Charter Fiberlink - Alabama LLC
549038	Time Warner Cable Information Services (California) LLC
549027	Time Warner Cable Information Services (California) LLC
349047	Charter Fiberlink - Illinois LLC
329035	Time Warner Cable Information Services (Indiana) LLC
269060	Time Warner Cable Information Services (Kentucky) LLC
279056	Charter Fiberlink LA-CCO LLC
119011	Time Warner Cable Information Services (Massachusetts), LLC
319053	Charter Fiberlink - Michigan LLC
429051	Charter Fiberlink - Missouri LLC
129011	Time Warner Cable Information Services (New Hampshire) LLC
499028	Time Warner Cable Information Services (New Mexico) LLC
239039	Time Warner Cable Information Services (North Carolina) LLC
539021	Charter Fiberlink OR-CCVII LLC
179037	Time Warner Cable Information Services (Pennsylvania) LLC
249037	Time Warner Cable Information Services (South Carolina) LLC
299039	Charter Fiberlink-Tennessee LLC
449097	Time Warner Cable Information Services (Texas) LLC
149014	Charter Fiberlink VT-CCO LLC
199029	Charter Fiberlink VA-CCO LLC
529031	Charter Fiberlink WA-CCVII LLC
339064	Charter Fiberlink CCO LLC
219026	Bright House Networks Information Services (Florida) LLC
159027	Time Warner Cable Information Services (New York) LLC
309026	Time Warner Cable Information Services (Ohio) LLC