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

I certify that (Name of Agent) John Staurulakis, Inc. (JSI) is authorized to submit 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 knowledge, the actual data provided to the Authorized Agent are accurate.

Name of Authorized Agent	John Staurulakis, Inc. (JSI)		
Name of Reporting Carrier	**Chickamauga Telephone Corporation**		
Signature of Authorized Officer	Stephanie Hand	Date	5/24/2023
Printed name of Authorized Officer	Stephanie Hand		
Title or position of Authorized Officer	CFO		
Telephone number or Authorized Officer.	(601) 764 3463 ext. 8088		
Study Area Code of Reporting Carrier	**220354**	Filing Due Date for this form (mm/dd/yyyy)	06/16/2023

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.