TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING DATA ON THE CARRIER'S BEHALF:

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

I certify that (Name of Agent) National Exchange Carriers Association, Inc. **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 Carriers Association, Inc.
Name of Reporting Carrier:	CITIZENS TEL. CO., INC.-GA
Signature of Authorized Officer:	**Jessica Molina** Digitally signed by Jessica Molina DN:cn=Jessica Molina,email=jessicamolina@citizensdsl.com,O=citizens tel. co., inc.-ga,l=Leslie GA 31764, Date:5/29/2024
Date:	5/29/2024
Printed name of Authorized Officer:	Jessica Molina
Title or position of Authorized Officer:	Co- President
Telephone number of authorized officer:	229-874-4145

Study Area Code of Reporting Carrier	220355		Filing Due Date for this form (mm/dd/yyyy)	6/17/2024	

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.