Legal Department
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June 30, 2025

VIA ELECTRONIC FILING

Executive Secretary
Georgia Public Service Commission
244 Washington Street, S.W.
Atlanta, GA 30334

Re: TracFone Wireless Inc. - FCC Form 481

Dear Sir/Madam,

In accordance with the Federal Communication Commission's Lifeline Reform Order and 47 CFR 54.422(b), please find enclosed a copy of the FCC Form 481 of TracFone Wireless Inc. ("TracFone").

If you have any questions, please feel free to contact me at (786) 513-7065, or stephen.athanson@verizon.com.

Sincerely,

/swa/

Stephen Athanson
Regulatory Attorney

Enc.

Filing Type and Contact Info

Filing Type

This information has been preselected based on High Cost and Lifeline program support paid out in the previous calendar year. If you think the filing type is incorrect, please contact USAC.

☐ High Cost (Section 54.313)

☑ Lifeline (Section 54.422)

Contact Information

Include contact information for the person best able to answer questions about this form.

Contact Name(030)

Janet Morejon

Phone #(035)

(954)654-2832

Contact Email Address (039)

janet.morejon@verizon.com

Lifeline Terms and Conditions (1200)

Upload Document or Link Website

Upload a descriptive document(s) AND/OR reference a specific link to your company's website.

Terms & Conditions of Voice Telephony Lifeline Plans (1210)

PDF only

AND/OR

Link to Public Website(1220)

www.safelink.com

Confirm Information

Check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to Section 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

☑ Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers (1221)

☑ Details on the number of minutes provided as part of the plan (1222)

☑ Additional charges for toll calls, and rates for each such plan (1223)

Certifications

Supply Chain Certifications

Section 54.9: Prohibition on the Use of Funds

I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designations.

If **No** is selected, a waiver is required for each SAC which is not certified.

○ Yes ○ No

Section 54.10: Prohibition on the Use of Certain Federal Subsidies

I certify that no federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, otherwise obtained, as required by 47 C.F.R. Section 54.10.

If **No** is selected, a waiver is required for each SAC which is not certified.

Yes No

Section 54.11: Requirements to Remove and Replace

Prior to answering, review section 54.11 of the Commission's rules (47 CFR Section 54.11). Answer Yes if either (1) you comply with section 54.11(a), meaning you do not use covered communications equipment or services, or (2) section 54.11(d) applies to you, meaning you are not yet subject to section 54.11(a) because you are a Reimbursement Program recipient with an unexpired removal, replacement, and disposal term per section 1.50004 (h) of the Commission's rules (47 CFR Section 1.50004(h)). Answer No if you do not comply with section 54.11(a), meaning you do use covered communications equipment or services.

Yes No

Accuracy Certifications

Certify

☑ I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

☑ I understand that making willful false statements in any part of this report and/or in these certifications is punishable by fine or imprisonment pursuant to 47 U.S.C. Sections 416(c), 503(b)(1)(B), and 18 U.S.C. Section 1001.

Signature

Officer Name

Armando Artigas

Title

Director Operations Support

Received Date

2025-06-24

☑ I understand this is a digital signature, and is the same as if I signed my name with a pen.