

### Commonwealth of Kentucky Public Service Commission

#### INFORMATION FORM FOR TELEPHONE UTILITIES OPERATING PURSUANT TO KRS 278.541 through 278.544

Complete Name  
of Telephone Utility:

PSAKNET, LLC.

Physical Address  
of Principal Office:

Street: 591 Lytton Avenue

City: Palo Alto State: CA Zip: 94301

Primary Contact:

Name: Richard Saffir Title: Vice President

Phone: 650-470-7526 Fax: N/A

E-Mail: RSAFFIR@PSAKNET.COM

Person Responsible for Answering Consumer Complaints:	Name: <u>Richard Saffir</u> Title: <u>Vice President</u>
	Address (if different from above) Street: <u>[Same as Above]</u>
	City: _____ State: _____ Zip: _____
	Phone: _____ Fax: _____

In accordance with KRS 278.542 (2), which requires telephone utilities operating pursuant to 2006 KRS 278.541 through KRS 278.544 to file with the Commission certain information, I, RICHARD SAFFIR, on behalf of PSAKNET, LLC do hereby certify that the foregoing information is true and correct to the best of my knowledge, as of this 29<sup>th</sup> day of JANUARY, 2019.

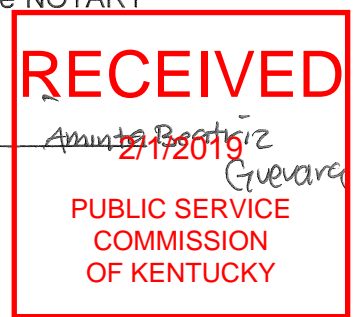
UTILITY: [Signature]  
BY: Richard Saffir  
Vice President

STATE OF CALIFORNIA  
COUNTY OF SAN FRANCISCO

The foregoing was signed, sworn to and acknowledged before me, the NOTARY PUBLIC, on this the 29 day of JANUARY, 2019.



[Signature]  
NOTARY PUBLIC



1819  
PO BOX 51  
SAN FRANCISCO CA 94109