

(REFERENCE COPY - Not for submission)

### Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: **0000102939** Submit Date: **2020-01-30** FRN: **0003459989** 

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/30/2020

Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0003459989	Mountain Lake Public Telecommunications Council

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
One Sesame Street	Plattsburgh	NY	12901	+1 (518) 563- 9770	bmccolgan@mlpbs.

# 2. Contact Representative

Name	Organization
Margaret L. Miller	Gray Miller Persh LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
2233 Wisconsin Ave. NW Suite 226	Washington	DC	20007	+1 (202) 776- 2914	mmiller@graymillerpersh.

# 3. Application Filing Fee

Not Applicable

# 4. Control of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits Licensee		
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No

(b) Provide the following information about this report:		
Purpose Biennial		
"As of" date	10/01/2019	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.	

# 5. Licensee(s) and Station(s)

#### Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
Mountain Lake Public Telecommunications Council	0003459989

Fac. ID No.	Call Sign	City	State	Service
46755	WCFE-TV	PLATTSBURGH	NY	DTV

#### **Section II – Biennial Ownership Information**

#### 1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	CORPORATE BY-LAWS	
Parties to contract or instrument	N/A	
Date of execution	06/1980	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: BY-LAWS	

Document Information		
Description of contract or instrument	NYS DEPT. OF EDUCATION CHARTER	
Parties to contract or instrument	N/A	
Date of execution	06/1982	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: CHARTER	

Document Information		
Description of contract or instrument	PBS MEMBER AGREEMENT	
Parties to contract or instrument	PUBLIC BROADCASTING SERVICE	
Date of execution	06/2019	
Date of expiration	06/2020	
Agreement type (check all that apply)	Other  Agreement Type: PBS Membership Agreement	

Document Information		
Description of contract or instrument	MHZ AGREEMENT	
Parties to contract or instrument	MHZ	
Date of execution	01/2018	

Date of expiration	12/2020
Agreement type (check all that apply)	Network Affiliation Agreement

### 2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

FRN	0003459989	
Entity Name	Mountain Lake Public Teleco	mmunications Council
Address	PO Box	
	Street 1	One Sesame Street
	Street 2	
	City	Plattsburgh
	State ("NA" if non-U.S. NY address)	
	Zip/Postal Code	12901
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
Positional Interests (check all that apply)	Respondent	
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity	
Interest Percentages	Voting 0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%

Ownership Information		
FRN	9990126815	
Name	Miriam Bower Goulding	
Address	РО Вох	
	Street 1	31 Cumberland Ave.
	Street 2	
	City	Plattsburgh
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12901
	Country (if non-U.S. United States address)	
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - SecretaryMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Retired Attorney	
By Whom Appointed or Elected	Board of Trustees	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Female
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.7%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have a that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990126817	9990126817	
Name	Thomas L. Hoy		
Address	РО Вох	РО Вох	
	Street 1	25 Pershing Rd.	
	Street 2		
	City	Queensbury	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12804	

	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Consultant, retired banker	Consultant, retired banker	
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one oreport?	r more broadcast stations No	

FRN 9990126820  Name Antonietta Ciarlone  Address PO Box  Street 1 11625 Gilles Trottier  Street 2  City Montreal  Province/Region Quebec  Zip/Postal Code H1E 6W7  Country (if non-U.S. address)  Canada  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Citizenship, Gender,  Citizenship Gender,  Citizenship Gender,  Citizenship Gender,  Citizenship CA	Ownership Information			
Address  PO Box  Street 1 11625 Gilles Trottier  Street 2  City Montreal  Province/Region Quebec  Zip/Postal Code H1E 6W7  Country (if non-U.S. address)  Canada  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Citizenship CA	FRN	9990126820		
Street 1 11625 Gilles Trottier  Street 2  City Montreal  Province/Region Quebec  Zip/Postal Code H1E 6W7  Country (if non-U.S. address)  Canada  Citizenship, Gender, Citizenship CA	Name	Antonietta Ciarlone		
Street 2  City Montreal  Province/Region Quebec  Zip/Postal Code H1E 6W7  Country (if non-U.S. Canada address)  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender, Citizenship CA	Address	РО Вох		
City Montreal  Province/Region Quebec  Zip/Postal Code H1E 6W7  Country (if non-U.S. address)  Canada  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender, Citizenship CA		Street 1	11625 Gilles Trottier	
Province/Region Quebec  Zip/Postal Code H1E 6W7  Country (if non-U.S. address)  Canada  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Citizenship CA		Street 2		
Zip/Postal Code Country (if non-U.S. address)  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender, Citizenship  Canada  Canada  Canada  Member of Governing Board (or other governing entity)  Paralegal  Canada  Canada		City	Montreal	
Country (if non-U.S. address)  Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Canada  Canada  Canada  Canada  Canada  Country (if non-U.S. Canada  Canada  Country (if non-U.S. Canada  Canada  Country (if non-U.S. Canada  Canada  Canada  Canada  Canada  Country (if non-U.S. Canada  Canada  Country (if non-U.S. Canada  Canada  Canada  Canada  Canada  Country (if non-U.S. Canada  Canada  Canada  Canada  Canada  Country (if non-U.S. Canada  Canada  Country (if non-U.S. Canada		Province/Region Quebec		
Listing Type Other Interest Holder  Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Citizenship  Other Interest Holder  Member of Governing Board (or other governing entity)  Paralegal  Paralegal  CA		Zip/Postal Code	H1E 6W7	
Positional Interests (check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Member of Governing Board (or other governing entity)  Paralegal  Paralegal  Citizenship  CA			Canada	
(check all that apply)  Principal Profession or Occupation  By Whom Appointed or Elected  Citizenship, Gender,  Citizenship  CA	Listing Type	Other Interest Holder		
Occupation  By Whom Appointed or Elected  Citizenship, Gender, Citizenship CA		Member of Governing Board (or other governing entity)		
Elected  Citizenship, Gender,  Citizenship  CA		Paralegal		
		Board of Trustees		
		Citizenship	CA	
Information (Natural Gender Female	•	Gender	Female	
Persons Only)  Ethnicity Not Hispanic or Latino	Persons Only)	Ethnicity	Not Hispanic or Latino	

	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	7.7%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No

Ownership Information		
FRN	9990126821	
Name	Peter Ensel	
Address	PO Box	
	Street 1	25 Tom Miller Road
	Street 2	
	City	Plattsburgh
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12901
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - Board ChairMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Professor of Communication	
By Whom Appointed or Elected	Board of Trustees	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural Gender Male		Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.7%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have a	an attributable interest in one or report?	r more broadcast stations No

Ownership Information	
FRN	9990126822
Name	James Charles Atkins

Address	РО Вох	
	Street 1	2 Daisy Lane
	Street 2	PO Box 247
	City	AuSable Forks
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12912
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Other - 2nd Vice ChairMember of Governing Board (or other governing entity)	
Principal Profession or Occupation	Journeyman Lineman, President CEO Northline Utilities LLC	
By Whom Appointed or Elected	Board of Trustees	
Citizenship, Gender,	Citizenship	us
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.7%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have a	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990126824	9990126824	
Name	Deborah Cleary		
Address	PO Box	PO Box	
	Street 1	8 Lakeview Dr.	
	Street 2		
	City	Plattsburgh	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12901	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	President, CEO, Staffing Professional	
By Whom Appointed or Elected	Board of Trustees	
Citizenship, Gender,	Citizenship US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	7.7%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990126833		
Name	Aaron Woolf		
Address	РО Вох	36	
	Street 1		
	Street 2		
	City	Elizabethtown	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12932	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Producer		
By Whom Appointed or Elected	Board of Trustees	Board of Trustees	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting 7.7%		
(enter percentage values			

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on the	re an attributable interest in one o	r more broadcast stations	No

Ownership Information				
FRN	9990126840			
Name	Mark C. Davey	Mark C. Davey		
Address	PO Box			
	Street 1	24 W. Court Street		
	Street 2			
	City	Plattsburgh		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	12901		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	BOCES District Superintendent			
By Whom Appointed or Elected	Board of Trustees	Board of Trustees		
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	7.7%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations No		

Ownership Information			
FRN	9990126843		
Name	Richard Knight, Jr.	Richard Knight, Jr.	
Address	РО Вох	РО Вох	
	Street 1 45 Winding Brook Road		

	Street 2		
	City	Peru	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12972	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - 1st Vice Chair	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Owner of Car Dealership, Knight Automotive		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt		

Ownership Information			
FRN	9990126847		
Name	Christopher Kreig		
Address	PO Box		
	Street 1	10 Brandell Drive	
	Street 2		
	City Plattsburgh  State ("NA" if non-U.S. NY address)		
	Zip/Postal Code	12901	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - TreasurerMember of Governing Board (or other governing entity)		

Principal Profession or Occupation	Airport Director, Plattsburgh International Airport		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information			
FRN	9990127430		
Name	William McColgan		
Address	PO Box		
	Street 1	8 Washington St.	
	Street 2		
	City	Peru	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12972	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Other - President and CEO		
Principal Profession or Occupation	Media Executive, President ar	Media Executive, President and CEO of Mountain Lake PBS	
By Whom Appointed or Elected	Board of Trustees	Board of Trustees	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity 0.0%		

	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this r	n attributable interest in one or eport?	more broadcast stations	No

Ownership Information			
FRN	9990141492		
Name	Reginald Carter		
Address	РО Вох		
	Street 1	40 Cumberland Ave	
	Street 2		
	City	Plattsburgh	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	12901	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Business Executive		
By Whom Appointed or Elected	Board of Trustees		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	7.7%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information			
FRN	9990141493		
Name	Christopher Kirkey		
Address	PO Box		
	Street 1	35 Sandra Ave	
	Street 2		

	City	Plattsburgh		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	12901		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board	(or other governing entity)		
Principal Profession or Occupation	Dir, Ctr for Study of Canada,	Dir, Ctr for Study of Canada, SUNY Plattsburgh		
By Whom Appointed or Elected	Board of Trustees	Board of Trustees		
Citizenship, Gender,	Citizenship	CA		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	7.7%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have that do not appear on this	an attributable interest in one or	or more broadcast stations	No	

Ownership Information		
FRN	9990141494	
Name	Cheryl Maggy	
Address	РО Вох	
	Street 1	37 Lighthouse Rd
	Street 2	
	City	Plattsburgh
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	12901
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (d	or other governing entity)
Principal Profession or Occupation	School Nurse	

Citizenship	US		
Gender	Female		
Ethnicity	Not Hispanic or Latino		
Race	White		
Voting 7.7%			
Equity	0.0%		
Total assets (Equity Debt Plus)			
an attributable interest in one o	r more broadcast stations	No	
nis filing are non-attributable.	ty, financial, or voting	Yes	
	Gender  Ethnicity  Race  Voting  Equity  Total assets (Equity Debt Plus)  an attributable interest in one or report?	Gender Female  Ethnicity Not Hispanic or Latino  Race White  Voting 7.7%  Equity 0.0%  Total assets (Equity Debt Plus)  an attributable interest in one or more broadcast stations report?  at any interests, including equity, financial, or voting his filing are non-attributable.	

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.	

# 3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

Respondent is direct licensee of Stations. There is no parent entity.

#### **Section III - Certification**

#### Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND	
	/OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	

Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: President and CEO Exact Legal Title or Name of Respondent: Mountain Lake Public Telecommunications Council Name: William McColgan Phone: 5183240126
		01/30/2020