REDACTED FOR PUBLIC INSPECTION

Your business
is our business.

7852 Walker Drive, Suite 200
Greenbelt, Maryland 20770
phone: 301-459-7590, fax: 301-577-5575
internet: www.jsitel.com, e-mail: jsi@jsitel.com

June 19, 2017

Via Hand Delivery

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

Re: WC Docket No. 14-58
2017 ETC Annual Report of Hamilton County Tel
Study Area Code 341024

Dear Ms. Dortch:

On behalf of Hamilton County Tel ("Hamilton"), JSI files the attached confidential version of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.[1] Company seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.[2] The redacted version is being filed this date via the FCC's Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

[1] 47 C.F.R. §§ 54.313, 54.422.
[2] *Connect America Fund et al.*, WC Docket Nos. 10-90 and 14-58, Protective Order, DA 16-296 rel. March 22, 2016 (Protective Order). 47 C.F.R. § 54.313(f)(2).

FCC Form 481 - Carrier Annual Reporting Data Collection Form

REDACTED FOR PUBLIC INSPECTION

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Kevin Pyle
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	kevinp@hamiltoncom.net
	Form Type	54.313 and 54.422

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<210> For the prior calendar year, were there any reportable voice service outages? No

<220>

<a> NORS Reference Number	<b1> Outage Start Date	<b2> Outage Start Time	<b3> Outage End Date	<b4> Outage End Time	<c1> Number of Customers Affected	<c2> Total Number of Customers	<d> 911 Facilities Affected (Yes / No)	<e> Service Outage Description (Check all that apply)	<f> Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution	<h> Preventative Procedures

(300) Unfulfilled Service Request
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<300> Unfulfilled service request (voice) 0

<310> Detail on attempts (voice)

Name of Attached Document

<320> Unfulfilled service request (broadband) 0

<330> Detail on attempts (broadband)

Name of Attached Document

(400) Number of Complaints per 1,000 customers
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed voice	0.0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed broadband
<440>	Complaints per 1000 customers for fixed broadband	0.0
<450>	Complaints per 1000 customers for mobile broadband	

(500) Compliance With Service Quality Standards and Consumer Protection Rules Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	341024il510.pdf
<515>	Certify compliance with applicable minimum service standards	

(600) Functionality in Emergency Situations Data Collection Form

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FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	341024il610.pdf

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<701>	Residential Local Service Charge Effective Date	1/1/2017
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	**Exchange (ILEC)**	**SAC (CETC)**	**Rate Type**	**Residential Local Service Rate**	**State Subscriber Line Charge**	**State Universal Service Fee**	**Mandatory Extended Area Service Charge**	**Total per line Rates and Fees**

-- See attached worksheet --

(710) Broadbrand Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<020>	Program Year	2018
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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<711>

<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
State	**Exchange (ILEC)**	**Residential Rate**	**State Regulated Fees**	**Total Rate and Fees**	**Broadband Service - Download Speed (Mbps)**	**Broadband Service - Upload Speed (Mbps)**	**Usage Allowance (GB)**	**Usage Allowance Action Taken When Limit Reached {*select*}**

-- See attached worksheet --

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<810>	Reporting Carrier	Hamilton County Telephone Co-Op
<811>	Holding Company	Not Applicable
<812>	Operating Company	Hamilton County Telephone Co-Op

<813>	<a1>	<a2>	<a3>
	Affiliates	**SAC**	**Doing Business As Company or Brand Designation**

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(900) Tribal Lands Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986 /OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<900> Does the filing entity offer tribal land services? (Y/N) No

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

		Select Yes or No or Not Applicable
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

(1000) Voice and Broadband Service Rate Comparability Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<1000>	Voice services rate comparability certification	Yes
<1010>	Attach detailed description for voice services rate comparability compliance	Name of Attached Document
<1020>	Broadband comparability certification	Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	Name of Attached Document

(1100) No Terrestrial Backhaul Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).	

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

341024il1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP

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

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ✔

<1222> Details on the number of minutes provided as part of the plan, ✔

<1223> Additional charges for toll calls, and rates for each such plan. ✔

(2005) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011> 3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.

<2022> Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.

<2023> The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.

<2024A> Round 2 Recipient of Incremental Support?

<2024B> Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.

Name of Attached Document Listing Required Information

<2025A> Round 2 Recipient of Incremental Support?

<2025B> Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).

Name of Attached Document Listing Required Information

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

(2005) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification support used to build broadband

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)

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(3005) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
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<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

(3009) Carrier certifies to 54.313(f)(1)(iii) — Yes - Attach Certification

(3010A) Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}

(3010B) Please Provide Attachment — Name of Attached Document Listing Required Information: 341024il3010.pdf

(3012A) Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)} — No - No New Community Anchors

(3012B) Please Provide Attachment — Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)} (Yes/No) — ◉ ○

(3014) If yes, does your company file the RUS annual report (Yes/No) — ○ ◉

Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) — ☐

(3016) Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows — ☐

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation — Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, is your company audited? (Yes/No) — ◉ ○

If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers — ✔

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows — ✔

(3021) Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. — ✔

If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers — ☐

(3023) Underlying information subjected to a review by an independent certified public accountant — ☐

(3024) Underlying information subjected to an officer certification. — ☐

(3025) Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows — ☐

(3026) Attach the worksheet listing required information — Name of Attached Document Listing Required Information: 341024il3026.pdf

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(3005) Rate Of Return Carrier Additional Documentation (Continued)

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

Financial Data Summary

(3027) Revenue	[redacted]
(3028) Operating Expenses	[redacted]
(3029) Net Income	[redacted]
(3030) Telephone Plant In Service(TPIS)	[redacted]
(3031) Total Assets	[redacted]
(3032) Total Debt	[redacted]
(3033) Total Equity	[redacted]
(3034) Dividends	[redacted]

Name of Attached Document Listing Required Information

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
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<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
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4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)
Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year. Name of Attached Document Listing Required Information _____

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481. Name of Attached Document Listing Required Information _____

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area. Name of Attached Document Listing Required Information _____

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	341024
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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

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.

Name of Reporting Carrier:

Signature of Authorized Officer: Date

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

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.

Certification - Agent / Carrier
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent) John Staurulakis, 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 annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.**

Name of Authorized Agent: John Staurulakis, Inc.

Name of Reporting Carrier: HAMILTON COUNTY TEL

Signature of Authorized Officer: CERTIFIED ONLINE Date: 06/06/2017

Printed name of Authorized Officer: Kevin Pyle

Title or position of Authorized Officer: GM/EVP

Telephone number of Authorized Officer: 6187362211 ext.

Study Area Code of Reporting Carrier: 341024 Filing Due Date for this form: 07/03/2017

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.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier: HAMILTON COUNTY TEL

Name of Authorized Agent Firm: John Staurulakis, Inc.

Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE Date: 06/06/2017

Name of Authorized Agent Employee: Alice Lewis

Title or position of Authorized Agent or Employee of Agent Manager - Regulatory Affairs

Telephone number of Authorized Agent or Employee of Agent: 2174986863 ext.

Study Area Code of Reporting Carrier: 341024 Filing Due Date for this form: 07/03/2017

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.

Attachments

REDACTED FOR PUBLIC INSPECTION

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<701>	Residential Local Service Charge Effective Date	1/1/2017
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	**Exchange (ILEC)**	**SAC (CETC)**	**Rate Type**	**Residential Local Service Rate**	**State Subscriber Line Charge**	**State Universal Service Fee**	**Mandatory Extended Area Service Charge**	**Total per line Rates and Fees**
IL	ALL		FR	10.1	12.45	0.0	0.0	22.55

REDACTED FOR PUBLIC INSPECTION

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	341024
<015>	Study Area Name	HAMILTON COUNTY TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Pyle
<035>	Contact Telephone Number - Number of person identified in data line <030>	6187362211 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kevinp@hamiltoncom.net

<711>

<a1> State	<a2> Exchange (ILEC)	<b1> Residential Rate	<b2> State Regulated Fees	<c> Total Rates and Fees	<d1> Broadband Service - Download Speed (Mbps)	<d2> Broadband Service -Upload Speed (Mbps)	<d3> Usage Allowance (GB)	<d4> Usage Allowance Action Taken When Limit Reached {select}
IL	ALL	49.99	0.0	49.99	6.0	0.768	999999	Other, no limit on usage
IL	ALL	54.99	0.0	54.99	10.0	1.0	999999	Other, no limit on usage
IL	Belle Prairie	59.99	0.0	59.99	20.0	1.0	999999	Other, no limit on usage
IL	Belle Rive	59.99	0.0	59.99	20.0	1.0	999999	Other, no limit on usage
IL	Blairsville	59.99	0.0	59.99	20.0	1.0	999999	Other, no limit on usage
IL	Broughton	59.99	0.0	59.99	20.0	1.0	999999	Other, no limit on usage
IL	Dahlgren	59.99	0.0	59.99	20.0	1.0	999999	Other, no limit on usage
IL	Macedonia	59.99	0.0	59.99	20.0	1.0	999999	Other, no limit on usage
IL	Belle Prairie	59.99	0.0	59.99	25.0	3.0	999999	Other, no limit on usage
IL	Belle Rive	59.99	0.0	59.99	25.0	3.0	999999	Other, no limit on usage
IL	Blairsville	59.99	0.0	59.99	25.0	3.0	999999	Other, no limit on usage
IL	Broughton	59.99	0.0	59.99	25.0	3.0	999999	Other, no limit on usage
IL	Dahlgren	59.99	0.0	59.99	25.0	3.0	999999	Other, no limit on usage
IL	Macedonia	59.99	0.0	59.99	25.0	3.0	999999	Other, no limit on usage
IL	Macedonia	79.99	0.0	79.99	100.0	10.0	999999	Other, no limit on usage

Hamilton County Telephone Co-Operative's demonstration of complying with applicable service quality standards and consumer protection rules for voice and broadband services:

In establishing this certification in its *2005 ETC Order*,[1] the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers."[2] The Commission found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement" and that the sufficiency of other commitments would be considered on a case-by-case basis.[3] In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."[4]

Hamilton County Telephone Co-Operative ("Company") hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company is subject to consumer protection obligations under the Illinois Administrative Code (IAC), Title 83: Public Utilities, Chapter I: Illinois Commerce Commission, Subchapter f: Telephone Utilities. These obligations include, but are not limited to, the following: adherence to Illinois state consumer protection requirements governing telephone providers which include Quality of Service rules as identified in IAC Part 730

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[1] *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("*2005 ETC Order*").
[2] *Id.* at para. 28.
[3] *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." *Id.* at n. 71.
[4] *Id.* at n. 72.

and 732, and Compliance with Anti-Slamming and Anti-Cramming Procedures as adopted in Illinois Public Act 90-610 and 97-0822, (3) truth-in-billing requirements pursuant to federal rule and IAC 735.70; and (4) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

The Company is subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in F.C.C. 47 C.F.R. Part 8 §8.3. The Company furthermore will comply with all requirements set forth in the *2015 Open Internet Order* when it becomes effective.

Hamilton County Telephone Co-Operative's demonstration of ability to function in emergency situations for voice and broadband services:

Hamilton County Telephone Co-Operative ("Company") hereby certifies that it is able to function in emergency situations as set forth in §54.202(a)(2).[1] The Company's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. The Company has battery backup at all office locations and in its electronic equipment sites. Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment. Generators are installed at all Central Office locations. They will continue to run as long as the Company has access to fuel.

[1] Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

The Company's standby generators and battery back-up support both voice and broadband network equipment should an emergency situation occur.

The Company complies with the FCC's backup power requirements, effective October 16, 2015.

Lifeline Assistance

General

Hamilton County Telephone Co-Operative's qualified Lifeline customers may now choose to apply the federal Lifeline discount of $9.25 per month to either voice service or broadband service. An eligible customer receives a credit towards the residential local exchange access line rate or the monthly broadband service plan which meets the minimum service standards with a speed of 10/1 Mbps or higher and a usage allowance of at least 150 GB per month for fixed broadband.

Regulations

1. Lifeline Assistance is available to all residential customers for fixed or wireless voice services or fixed or wireless broadband services who meet the following eligibility requirements:
    a. Customers, their dependent, or their household must be participants in one of the following programs: Medicaid; SNAP; Supplemental Security Income (SSI); federal public housing assistance (Section 8) or the Veteran's or Survivor's Pension Benefit.
    b. In addition, a consumer may be eligible if his or her household income is at or below 135% of the Federal Poverty Guidelines.
2. A subscriber may elect at the time of subscription to Lifeline Assistance to receive toll limitation as part of Lifeline Assistance. "Toll limitation" is a service that allows a subscriber to elect not to allow the completion of outgoing toll calls from the subscriber's residence.
3. The Lifeline discount is effective upon completion of the certification form including proof of eligibility.
4. Only one Lifeline discount is available per household. Lifeline is not transferable.
5. Eligible households may apply the monthly Lifeline discount to either broadband internet service (home or wireless) or phone service (home or wireless) but not both.

6. Lifeline customers must annually recertify their continued eligibility by the anniversary of their service initiation date. Customers must certify that they continue to be eligible for Lifeline and that no one in their household is receiving the Lifeline discount from another company.

   Failure to demonstrate continued eligibility will result in the loss the Lifeline discount.

Lifeline Discount

1. Eligible subscribers will receive a monthly discount of $9.25 for their monthly local exchange access service or broadband service but not both.

Hamilton County Telephone Co-Operative (SAC 341024)

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Hamilton County Telephone Co-Operative hereby certifies that throughout 2016, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time. If a request for broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream is unreasonable, the Company offers broadband service at the highest available speed.

REDACTED – FOR PUBLIC INSPECTION

ATTACHMENT - LINE 3026

ATTACHMENT REDACTED IN ENTIRETY