(060) Coverage and Performance Report

FCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010>	Study Area Code	238032
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performacne data is uploaded (yes/no)
NC	Rutherford	0000	0	0	0	0.0	0.0	0.0	Yes

Percentage of Total Population Reached by Service: 0

Percentage of Total Road Miles covered by Service: 0

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, LLC did not complete any drive tests with respect to the SAC associated with this filing during the reportable period.

Carolina West Wireless, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules,[1] Carolina West Wireless, Inc. ("CWW") submits that, during the reportable period, except for set forth below, there were no material updates to its project description, network design, construction, deployment and maintenance associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its Auction 901 winning bids.

During the reportable period, CWW continued progress toward constructing and deploying its network in the eligible areas associated with this SAC. However, it has encountered issues relating to site acquisition that likely will prevent them from completing construction within the required time frame set forth in the Commission's rules. Therefore, CWW may request additional time to meet the construction requirements for its network in the eligible areas within this SAC.

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[1] Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

Mobility Fund
Phase 1 - §54.1009 Annual Reporting
Data Collection Form

FCC Form
Approved by OMB
OMB 3060-1185
Avg. Burden Estimate per Respondent: 18 Hours

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com

Accepted / Filed
JUN 23 2016
Federal Communications Commission
Office of the Secretary

<040> **Has the information required pursuant to §54.1009 been provided with a Form 481 filing (Y/N)** <040> ○ ◉

<041> Attach a description of the documents filed with the Form 481 reporting <041>

<042> Cite the Study Area Code (SAC) for the Form 481 reporting <042>

<080> **Tribal Lands Reporting (y/n?)** *(Does this study area cover tribal lands? Yes or No)* ○ ◉

Notice to Individuals Required by the Paperwork Reduction Act of 1995
OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)
Notice to Individuals Required by the Paperwork Reduction Act of 1995
Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.
THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

Reporting Carrier / Mobility Fund Phase 1 Winning Bidder

<110>	FCC Registration Number	1940022
<111>	Filing Carrier Name	Carolina West Wireless, Inc.
<112>	Winning Bidder Carrier Name	Carolina West Wireless, Inc.
<113>	Street Address (or PO Box)	1307 Curtis Bridge Road
<114>	City	Wilkesboro
<115>	State	NC
<116>	Zip-Code	28697
<117>	Telephone Number	3369735000 ext.
<118>	Fax Number	3368387550
<119>	Email Address	slaytons@carolinawest.com

Contact Information

if same as above, indicate in this box ☐

<120>	Name (First, MI, Last, Suffix)	Slayton S. Stewart
<121>	Filing Carrier Name	Carolina West Wireless, Inc.
<122>	Street Address (or PO Box)	1307 Curtis Bridge Road
<123>	City	Wilkesboro
<124>	State	NC
<125>	Zip-Code	28697
<126>	Telephone Number	3369735000 ext.
<127>	Fax Number	3368387550
<128>	Email Address	slaytons@carolinawest.com

Authorized Agent Information

if no agent, indicate in this box ☐

<130>	Name (First, MI, Last, Suffix)	Todd Slamowitz
<131>	Company	Lukas, Nace, Gutierrez & Sachs, LLP
<132>	Street Address (or PO Box)	8300 Greensbor Drive, Suite 1200
<133>	City	McLean
<134>	State	VA
<135>	Zip-Code	22102
<136>	Telephone Number	7035848678 ext.
<137>	Fax Number	7035848696
<138>	Email Address	tslamowitz@fcclaw.com

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<140> Coverage and Performance Report Year 01/2015 - 12/2015

Coverage and Performace attachments

060_Coverage and Performance Report (Constructed).zip,
238033_Filing Docs.zip

<141>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performance data is uploaded (Yes/no)
			-- See attached worksheet						
			--						

Percentage of Total Population Reached by Service: 0

Percentage of Total Road Miles covered by Service: 100

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

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

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/23/2016

Printed name of Authorized Officer: Thad Southers

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 3369735090 ext.

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.

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

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported 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: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Carolina West Wireless, Inc.

Signature of Authorized Officer or Employee: Date:

Printed name of Authorized Officer or Employee:

Title or position of Authorized Officer or Employee:

Telephone number of Authorized Officer or Employee:

Study Area Code of Reporting Carrier: 238033 Filing Due Date for this form: 07/01/2016

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 Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the certification 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: Carolina West Wireless, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/13/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.

Study Area Code of Reporting Carrier: 238033 Filing Due Date for this form: 07/01/2016

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.

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<142> State

<143> County

<144> Tribal Land(s) on which ETC Serves

<145> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
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<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210>	Actual Completion Date	05/01/2016
<211>	Project Status Description (attached)	Project Status Description - Line 211 (constructed SACs).pdf *{Name of PDF attached}*

Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.

<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	✓
<214>	Status of Network Deployment - Deployment	✓
<215>	Status of Network Deployment - Maintenance	✓
<216>	Project Budget Status	✓
<217>	Project Plan Status	✓

<218> Network will Support 3G/4G Mobile Service ? ○ 3G ◉ 4G

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

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

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund 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: CERTIFIED ONLINE Date 06/23/2016

Printed name of Authorized Officer: Thad Southers

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 3369735090 ext.

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.

<010>	Study Area Code	238033
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<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

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

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP 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 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: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Carolina West Wireless, Inc.

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: 238033 Filing Due Date for this form: 07/01/2016

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 for Mobility Fund Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund 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: Carolina West Wireless, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/13/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.

Study Area Code of Reporting Carrier: 238033 Filing Due Date for this form: 07/01/2016

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

(060) Coverage and Performance Report

FCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010>	Study Area Code	238033
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performacne data is uploaded (yes/no)
NC	Surry	371719301012000	0	0	0	0.07	0.07	0.07	Yes
NC	Surry	371719301011002	0	0	0	0.06	0.06	0.06	Yes
NC	Surry	37171930101029	0	0	0	0.22	0.22	0.22	Yes

Percentage of Total Population Reached by Service	0	Percentage of Total Road Miles covered by Service	100

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Carolina West Wireless, LLC did not complete the coverage/performance testing for this SAC during the reporting period. Nonetheless, the drive test data and associated coverage files provided herein were provided in its Payment Request 3 submitted after the reporting period for this SAC. Further, the covered eligible road miles per census block set forth in Line 141 herein is the same covered eligible road miles per census block reported in its Payment Request 3 submitted for this SAC.

Carolina West Wireless, LLC

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules,[1] Carolina West Wireless, LLC ("CWW") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code ("SAC") that was provided by CWW in its long-form application (the "FCC Form 680") filed in conjunction with its FCC Auction 901 winning bids.

To date, CWW has completed construction, and deployed its network in at least 75% of the eligible road miles associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

---

[1] Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

Mobility Fund Phase 1 - §54.1009 **Annual Reporting** Data Collection Form	FCC Form Approved by OMB OMB 3060-1185 Avg. Burden Estimate per Respondent: 18 Hours

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com

Accepted / Filed

JUN 23 2016

Federal Communications Commission
Office of the Secretary

<040> **Has the information required pursuant to §54.1009 been provided with a Form 481 filing (Y/N)** <040> ○ ◉

<041> Attach a description of the documents filed with the Form 481 reporting <041>

<042> Cite the Study Area Code (SAC) for the Form 481 reporting <042>

<080> **Tribal Lands Reporting (y/n?)** *(Does this study area cover tribal lands? Yes or No)* ○ ◉

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

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<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
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<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

Reporting Carrier / Mobility Fund Phase 1 Winning Bidder

<110>	FCC Registration Number	1940022
<111>	Filing Carrier Name	Carolina West Wireless, Inc.
<112>	Winning Bidder Carrier Name	Carolina West Wireless, Inc.
<113>	Street Address (or PO Box)	1307 Curtis Bridge Road
<114>	City	Wilkesboro
<115>	State	NC
<116>	Zip-Code	28697
<117>	Telephone Number	3369735000 ext.
<118>	Fax Number	3368387550
<119>	Email Address	slaytons@carolinawest.com

Contact Information

if same as above, indicate in this box ☐

<120>	Name (First, MI, Last, Suffix)	Slayton S. Stewart
<121>	Filing Carrier Name	Carolina West Wireless, Inc.
<122>	Street Address (or PO Box)	1307 Curtis Bridge Road
<123>	City	Wilkesboro
<124>	State	NC
<125>	Zip-Code	28697
<126>	Telephone Number	3369735000 ext.
<127>	Fax Number	3368387550
<128>	Email Address	slaytons@carolinawest.com

Authorized Agent Information

if no agent, indicate in this box ☐

<130>	Name (First, MI, Last, Suffix)	Todd Slamowitz
<131>	Company	Lukas, Nace, Gutierrez & Sachs, LLP
<132>	Street Address (or PO Box)	8300 Greensboro Drive, Suite 1200
<133>	City	McLean
<134>	State	VA
<135>	Zip-Code	22102
<136>	Telephone Number	7035848678 ext.
<137>	Fax Number	7035848696
<138>	Email Address	tslamowitz@fcclaw.com

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<140> Coverage and Performance Report Year 01/2015 - 12/2015

Coverage and Performace attachments

060_Coverage and Performance Report (Constructed).zip,
238034_Filing Docs.zip

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performance data is uploaded (Yes/no)
			-- See attached worksheet						
			--						

Percentage of Total Population Reached by Service: 0

Percentage of Total Road Miles covered by Service: 100

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

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

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/23/2016

Printed name of Authorized Officer: Thad Southers

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 3369735090 ext.

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.

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

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported 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: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Carolina West Wireless, Inc.

Signature of Authorized Officer or Employee: Date:

Printed name of Authorized Officer or Employee:

Title or position of Authorized Officer or Employee:

Telephone number of Authorized Officer or Employee:

Study Area Code of Reporting Carrier: 238034 Filing Due Date for this form: 07/01/2016

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 Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the certification 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: Carolina West Wireless, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/13/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035858678 ext.

Study Area Code of Reporting Carrier: 238034 Filing Due Date for this form: 07/01/2016

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<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<142> State

<143> County

<144> Tribal Land(s) on which ETC Serves

<145> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	07/19/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210>	Actual Completion Date	05/01/2016
<211>	Project Status Description (attached)	Project Status Description - Line 211 (constructed SACs).pdf *{Name of PDF attached}*

Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.

<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	✓
<214>	Status of Network Deployment - Deployment	✓
<215>	Status of Network Deployment - Maintenance	✓
<216>	Project Budget Status	✓
<217>	Project Plan Status	✓

<218> Network will Support 3G/4G Mobile Service ? ○ 3G ◉ 4G

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

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

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund 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: CERTIFIED ONLINE Date 06/23/2016

Printed name of Authorized Officer: Thad Southers

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 3369735090 ext.

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.

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

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

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **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 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: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Carolina West Wireless, Inc.

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: 238034 Filing Due Date for this form: 07/01/2016

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 for Mobility Fund Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund 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: Carolina West Wireless, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/13/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.

Study Area Code of Reporting Carrier: 238034 Filing Due Date for this form: 07/01/2016

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.

(060) Coverage and Performance Report

FCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010>	Study Area Code	238034
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<141>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Coverage and Performacne data is uploaded (yes/no)
NC	Surry	371719301021001	0	0	0	0.02	0.02	0.02	Yes

Percentage of Total Population Reached by Service: 0

Percentage of Total Road Miles covered by Service: 100