

<010> Study Area Code	378014
<015> Study Area Name	NE Colorado Cellular, Inc.
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035> Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

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

<b>Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)</b>	
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:	NE Colorado Cellular, Inc.
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/30/2017
Printed name of Authorized Officer:	Michael Felicissimo
Title or position of Authorized Officer:	Executive Vice President
Telephone number of Authorized Officer:	9705423605 ext.
Study Area Code of Reporting Carrier:	378014 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 REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier</b>	
I certify that (Name of Agent) _____ 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:	
Name of Reporting Carrier:	
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:	Filing Due Date for this form:
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**TO BE COMPLETED BY THE AUTHORIZED AGENT:**

<b>Certification of Agent Authorized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier</b>	
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:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
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<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:

- <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.

Select (Yes, No, Not Applicable)

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<200> Date Authorized to Receive Support  
 <201> Targeted Completion Date  
 <202> Total Mobility Fund Support Awarded  
 <203> Total Mobility Fund Support Disbursed

07/29/2013

07/30/2016

396461.45

385439.82

&lt;210&gt; Actual Completion Date

04/22/2015

&lt;211&gt; Project Status Description (attached)

Nebraska Sites complete.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

✓
✓
✓
✓

&lt;218&gt; Network will Support 3G/4G Mobile Service ?

☐

3G

☒

4G

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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: NE Colorado Cellular, Inc.

Signature of Authorized Officer: CERTIFIED ONLINE

Date 06/30/2017

Printed name of Authorized Officer: Michael Felicissimo

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 9705423605 ext.

Study Area Code of Reporting Carrier: 378014

Filing Due Date for this form: 07/03/2017

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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	
<p>I certify that (Name of Agent) _____ 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.</p>	
<p>Name of Authorized Agent: _____</p>	
<p>Name of Reporting Carrier: _____</p>	
<p>Signature of Authorized Officer: _____</p>	<p>Date: _____</p>
<p>Printed name of Authorized Officer: _____</p>	
<p>Title or position of Authorized Officer: _____</p>	
<p>Telephone number of Authorized Officer: _____</p>	
<p>Study Area Code of Reporting Carrier: _____</p>	<p>Filing Due Date for this form: _____</p>
<p><small>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.</small></p>	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier	
<p>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.</p>	
<p>Name of Reporting Carrier: _____</p>	
<p>Name of Authorized Agent Firm: _____</p>	
<p>Signature of Authorized Agent or Employee of Agent: _____</p>	<p>Date: _____</p>
<p>Name of Authorized Agent Employee: _____</p>	
<p>Title or position of Authorized Agent or Employee of Agent: _____</p>	
<p>Telephone number of Authorized Agent or Employee of Agent: _____</p>	
<p>Study Area Code of Reporting Carrier: _____</p>	<p>Filing Due Date for this form: _____</p>
<p><small>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.</small></p>	

## Attachments

## (060) Coverage and Performance Report

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

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 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Dundy	310579623001072	2	2	2	0.72	0.52	0.52	Yes
NE	Dundy	310579623002008	0	0	0	4.27	3.94	3.94	Yes
NE	Dundy	310579623002009	0	0	0	1.91	1.91	1.91	Yes
NE	Dundy	310579623002010	2	2	2	2.12	2.12	2.12	Yes
NE	Dundy	310579623002023	0	0	0	1.45	1.45	1.45	Yes
NE	Dundy	310579623002025	0	0	0	1.11	1.11	1.11	Yes
NE	Dundy	310579623002033	0	0	0	1.96	1.96	1.96	Yes
NE	Dundy	310579623002034	0	0	0	0.09	0.09	0.09	Yes
NE	Dundy	310579623002035	0	0	0	0.64	0.63	0.63	Yes
NE	Dundy	310579623002038	4	4	4	2.01	2.01	2.01	Yes
NE	Dundy	310579623002041	0	0	0	0.88	0.88	0.88	Yes
NE	Dundy	310579623002043	1	1	1	2.39	1.98	1.98	Yes
NE	Dundy	310579623002045	0	0	0	7.37	7.05	7.05	Yes
NE	Dundy	310579623002046	0	0	0	0.12	0.12	0.12	Yes
NE	Dundy	310579623002048	0	0	0	0.16	0.16	0.16	Yes
NE	Dundy	310579623002050	0	0	0	0.04	0.04	0.04	Yes
NE	Dundy	310579623002051	0	0	0	0.53	0.53	0.53	Yes
NE	Dundy	310579623002053	0	0	0	0.36	0.36	0.36	Yes
NE	Dundy	310579623002054	0	0	0	3.2	3.2	3.2	Yes
NE	Dundy	310579623002055	0	0	0	1.94	1.94	1.94	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99

## (060) Coverage and Performance Report

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 <140> Coverage and Performance Report Year 07/2016 - 06/2017

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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)
NE	Dundy	310579623002056	0	0	0	4.41	4.41	4.41	Yes
NE	Dundy	310579623002059	2	2	2	0.13	0.13	0.13	Yes
NE	Dundy	310579623002060	0	0	0	0.54	0.54	0.54	Yes
NE	Dundy	310579623002068	0	0	0	0.05	0.05	0.05	Yes
NE	Dundy	310579623002070	0	0	0	0.11	0.11	0.11	Yes
NE	Dundy	310579623002071	0	0	0	1.06	1.06	1.06	Yes
NE	Dundy	310579623002072	0	0	0	1.18	1.18	1.18	Yes
NE	Dundy	310579623002073	0	0	0	0.1	0.1	0.1	Yes
NE	Dundy	310579623002075	0	0	0	1.95	1.95	1.95	Yes
NE	Dundy	310579623002076	0	0	0	6.5	6.5	6.5	Yes
NE	Dundy	310579623002077	0	0	0	0.49	0.49	0.49	Yes
NE	Dundy	310579623002078	2	2	2	0.1	0.1	0.1	Yes
NE	Dundy	310579623002079	0	0	0	1.36	1.36	1.36	Yes
NE	Dundy	310579623002081	5	5	5	3.69	3.69	3.69	Yes
NE	Dundy	310579623002082	0	0	0	1.62	1.62	1.62	Yes
NE	Dundy	310579623002083	0	0	0	0.04	0.04	0.04	Yes
NE	Dundy	310579623002084	0	0	0	1.53	1.53	1.53	Yes
NE	Dundy	310579623002088	0	0	0	0.07	0.06	0.06	Yes
NE	Dundy	310579623002089	0	0	0	6.05	6.05	6.05	Yes
NE	Dundy	310579623002090	0	0	0	1.89	1.89	1.89	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99



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NE	Dundy	310579623002091	0	0	0	3.39	3.39	3.39	Yes
NE	Dundy	310579623002092	6	6	6	3.68	3.68	3.68	Yes
NE	Dundy	310579623002094	0	0	0	0.08	0.08	0.08	Yes
NE	Dundy	310579623002096	2	2	2	3.93	3.93	3.93	Yes
NE	Dundy	310579623002097	0	0	0	1.62	1.62	1.62	Yes
NE	Dundy	310579623002098	0	0	0	0.05	0.05	0.05	Yes
NE	Dundy	310579623002101	0	0	0	0.35	0.35	0.35	Yes
NE	Dundy	310579623002104	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002106	0	0	0	0.19	0.19	0.19	Yes
NE	Dundy	310579623002107	0	0	0	0.04	0.04	0.04	Yes
NE	Dundy	310579623002108	0	0	0	1.46	1.46	1.46	Yes
NE	Dundy	310579623002111	0	0	0	0.98	0.98	0.98	Yes
NE	Dundy	310579623002115	0	0	0	0.13	0.07	0.07	Yes
NE	Dundy	310579623002130	4	4	4	2.95	2.95	2.95	Yes
NE	Dundy	310579623002270	0	0	0	0.19	0.19	0.19	Yes
NE	Dundy	310579623002272	0	0	0	0.31	0.31	0.31	Yes
NE	Dundy	310579623002282	2	2	2	0.06	0.06	0.06	Yes
NE	Dundy	310579623002283	2	2	2	0.08	0.08	0.08	Yes
NE	Dundy	310579623002284	3	3	3	0.07	0.07	0.07	Yes
NE	Dundy	310579623002286	0	0	0	0.07	0.07	0.07	Yes

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100

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NE	Dundy	310579623002287	0	0	0	0.09	0.09	0.09	Yes
NE	Dundy	310579623002288	0	0	0	0.04	0.04	0.04	Yes
NE	Dundy	310579623002292	1	1	1	0.34	0.34	0.34	Yes
NE	Dundy	310579623002297	0	0	0	0.03	0.03	0.03	Yes
NE	Dundy	310579623002302	8	8	8	11.29	11.29	11.29	Yes
NE	Dundy	310579623002304	0	0	0	0.27	0.27	0.27	Yes
NE	Dundy	310579623002305	0	0	0	0.59	0.59	0.59	Yes
NE	Dundy	310579623002310	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002313	0	0	0	0.45	0.45	0.45	Yes
NE	Dundy	310579623002316	0	0	0	0.18	0.18	0.18	Yes
NE	Dundy	310579623002321	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002323	0	0	0	0.76	0.76	0.76	Yes
NE	Dundy	310579623002325	0	0	0	0.26	0.26	0.26	Yes
NE	Dundy	310579623002336	3	3	3	1.92	1.92	1.92	Yes
NE	Dundy	310579623002337	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002338	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002339	0	0	0	0.29	0.29	0.29	Yes
NE	Dundy	310579623002343	0	0	0	0.35	0.35	0.35	Yes
NE	Dundy	310579623002344	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002345	0	0	0	0.13	0.13	0.13	Yes

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NE	Dundy	310579623002347	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002351	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002352	4	4	4	0.97	0.97	0.97	Yes
NE	Dundy	310579623002357	0	0	0	0.12	0.12	0.12	Yes
NE	Dundy	310579623002358	0	0	0	0.09	0.09	0.09	Yes
NE	Dundy	310579623002359	0	0	0	0.92	0.92	0.92	Yes
NE	Dundy	310579623002360	0	0	0	1.59	1.59	1.59	Yes
NE	Dundy	310579623002361	0	0	0	0.93	0.93	0.93	Yes
NE	Dundy	310579623002362	0	0	0	0.17	0.17	0.17	Yes
NE	Dundy	310579623002363	0	0	0	0.86	0.86	0.86	Yes
NE	Dundy	310579623002367	0	0	0	0.01	0.0	0.0	Yes
NE	Dundy	310579623002369	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002370	0	0	0	0.65	0.65	0.65	Yes
NE	Dundy	310579623002371	0	0	0	0.28	0.28	0.28	Yes
NE	Dundy	310579623002372	0	0	0	0.17	0.17	0.17	Yes
NE	Dundy	310579623002373	0	0	0	2.67	2.67	2.67	Yes
NE	Dundy	310579623002374	0	0	0	0.3	0.3	0.3	Yes
NE	Dundy	310579623002375	2	2	2	0.07	0.07	0.07	Yes
NE	Dundy	310579623002376	1	1	1	1.74	1.74	1.74	Yes
NE	Dundy	310579623002377	0	0	0	0.35	0.35	0.35	Yes

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Service

100

Percentage of Total  
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by Service

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OMB Control No. 3060-1185

<010> Study Area Code 378014  
 <015> Study Area Name NE Colorado Cellular, Inc.  
 <020> Program Year 2017  
 <030> Contact Name - Person USAC should contact regarding this data Michael Felicissimo  
 <035> Contact Telephone Number - Number of person identified in data line <030> 9705423605 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com  
 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Dundy	310579623002379	0	0	0	0.68	0.68	0.68	Yes
NE	Dundy	310579623002380	0	0	0	1.14	1.14	1.14	Yes
NE	Dundy	310579623002381	0	0	0	1.64	1.64	1.64	Yes
NE	Dundy	310579623002382	0	0	0	0.02	0.02	0.02	Yes
NE	Dundy	310579623002383	2	2	2	2.38	2.38	2.38	Yes
NE	Dundy	310579623002384	3	3	3	4.56	4.56	4.56	Yes
NE	Dundy	310579623002385	2	2	2	0.08	0.08	0.08	Yes
NE	Dundy	310579623002386	0	0	0	0.55	0.55	0.55	Yes
NE	Dundy	310579623002387	6	6	6	2.51	2.51	2.51	Yes
NE	Dundy	310579623002388	2	2	2	0.21	0.21	0.21	Yes
NE	Dundy	310579623002389	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002390	1	1	1	0.1	0.1	0.1	Yes
NE	Dundy	310579623002396	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002398	0	0	0	0.13	0.13	0.13	Yes
NE	Dundy	310579623002399	0	0	0	0.98	0.98	0.98	Yes
NE	Dundy	310579623002400	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002401	3	3	3	0.12	0.12	0.12	Yes
NE	Dundy	310579623002402	2	2	2	0.15	0.15	0.15	Yes
NE	Dundy	310579623002403	0	0	0	0.12	0.12	0.12	Yes
NE	Dundy	310579623002404	1	1	1	0.1	0.1	0.1	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99

## (060) Coverage and Performance Report

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

<010> Study Area Code 378014  
 <015> Study Area Name NE Colorado Cellular, Inc.  
 <020> Program Year 2017  
 <030> Contact Name - Person USAC should contact regarding this data Michael Felicissimo  
 <035> Contact Telephone Number - Number of person identified in data line <030> 9705423605 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com  
 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Dundy	310579623002405	2	2	2	0.1	0.1	0.1	Yes
NE	Dundy	310579623002407	0	0	0	0.47	0.47	0.47	Yes
NE	Dundy	310579623002408	0	0	0	0.17	0.17	0.17	Yes
NE	Dundy	310579623002409	2	2	2	0.1	0.1	0.1	Yes
NE	Dundy	310579623002410	0	0	0	0.04	0.04	0.04	Yes
NE	Dundy	310579623002411	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002412	0	0	0	0.58	0.58	0.58	Yes
NE	Dundy	310579623002413	0	0	0	0.02	0.02	0.02	Yes
NE	Dundy	310579623002414	0	0	0	0.02	0.02	0.02	Yes
NE	Dundy	310579623002423	3	3	3	0.09	0.09	0.09	Yes
NE	Dundy	310579623002424	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002425	2	2	2	0.09	0.09	0.09	Yes
NE	Dundy	310579623002426	7	7	7	0.16	0.16	0.16	Yes
NE	Dundy	310579623002427	0	0	0	0.98	0.98	0.98	Yes
NE	Dundy	310579623002429	1	1	1	0.07	0.07	0.07	Yes
NE	Dundy	310579623002430	0	0	0	0.28	0.28	0.28	Yes
NE	Dundy	310579623002431	0	0	0	0.21	0.21	0.21	Yes
NE	Dundy	310579623002432	9	9	9	0.14	0.14	0.14	Yes
NE	Dundy	310579623002433	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002434	3	3	3	0.14	0.14	0.14	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99

## (060) Coverage and Performance Report

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

<010> Study Area Code 378014  
 <015> Study Area Name NE Colorado Cellular, Inc.  
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 <039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com  
 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Dundy	310579623002435	2	2	2	0.1	0.1	0.1	Yes
NE	Dundy	310579623002436	1	1	1	0.11	0.11	0.11	Yes
NE	Dundy	310579623002437	1	1	1	0.13	0.13	0.13	Yes
NE	Dundy	310579623002438	3	3	3	0.07	0.07	0.07	Yes
NE	Dundy	310579623002439	5	5	5	0.07	0.07	0.07	Yes
NE	Dundy	310579623002440	4	4	4	0.1	0.1	0.1	Yes
NE	Dundy	310579623002441	5	5	5	0.11	0.11	0.11	Yes
NE	Dundy	310579623002442	2	2	2	0.07	0.07	0.07	Yes
NE	Dundy	310579623002443	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002444	0	0	0	0.15	0.15	0.15	Yes
NE	Dundy	310579623002445	6	6	6	0.14	0.14	0.14	Yes
NE	Dundy	310579623002446	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002447	11	11	11	0.07	0.07	0.07	Yes
NE	Dundy	310579623002448	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002449	1	1	1	0.11	0.11	0.11	Yes
NE	Dundy	310579623002450	3	3	3	0.11	0.11	0.11	Yes
NE	Dundy	310579623002451	8	8	8	0.1	0.1	0.1	Yes
NE	Dundy	310579623002452	2	2	2	0.1	0.1	0.1	Yes
NE	Dundy	310579623002453	1	1	1	0.1	0.1	0.1	Yes
NE	Dundy	310579623002454	0	0	0	0.07	0.07	0.07	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99

## (060) Coverage and Performance Report

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

<010> Study Area Code 378014  
 <015> Study Area Name NE Colorado Cellular, Inc.  
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 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Dundy	310579623002455	5	5	5	0.07	0.07	0.07	Yes
NE	Dundy	310579623002456	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002457	5	5	5	0.07	0.07	0.07	Yes
NE	Dundy	310579623002458	3	3	3	0.07	0.07	0.07	Yes
NE	Dundy	310579623002459	4	4	4	0.1	0.1	0.1	Yes
NE	Dundy	310579623002460	0	0	0	0.13	0.13	0.13	Yes
NE	Dundy	310579623002461	0	0	0	0.1	0.1	0.1	Yes
NE	Dundy	310579623002462	2	2	2	0.1	0.1	0.1	Yes
NE	Dundy	310579623002463	1	1	1	0.08	0.08	0.08	Yes
NE	Dundy	310579623002464	2	2	2	0.05	0.05	0.05	Yes
NE	Dundy	310579623002465	2	2	2	0.11	0.11	0.11	Yes
NE	Dundy	310579623002470	5	5	5	0.07	0.07	0.07	Yes
NE	Dundy	310579623002471	3	3	3	0.07	0.07	0.07	Yes
NE	Dundy	310579623002472	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002473	4	4	4	0.07	0.07	0.07	Yes
NE	Dundy	310579623002474	0	0	0	0.06	0.06	0.06	Yes
NE	Dundy	310579623002475	4	4	4	0.02	0.02	0.02	Yes
NE	Dundy	310579623002480	2	2	2	0.07	0.07	0.07	Yes
NE	Dundy	310579623002481	4	4	4	0.07	0.07	0.07	Yes
NE	Dundy	310579623002482	1	1	1	0.14	0.14	0.14	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99

## (060) Coverage and Performance Report

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

<010> Study Area Code 378014

<015> Study Area Name NE Colorado Cellular, Inc.

<020> Program Year 2017

<030> Contact Name - Person USAC should contact regarding this data Michael Felicissimo

<035> Contact Telephone Number - Number of person identified in data line <030> 9705423605 ext.

<039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com

<140> Coverage and Performance Report Year 07/2016 - 06/2017

<1>	<2>	<3>	<4>	<5>	<6>	<7>	<8>	<9>	<10>
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)
NE	Dundy	310579623002483	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002485	0	0	0	1.59	1.59	1.59	Yes
NE	Dundy	310579623002486	0	0	0	0.13	0.13	0.13	Yes
NE	Dundy	310579623002487	0	0	0	0.01	0.01	0.01	Yes
NE	Dundy	310579623002488	4	4	4	0.17	0.17	0.17	Yes
NE	Dundy	310579623002489	0	0	0	0.07	0.07	0.07	Yes
NE	Dundy	310579623002491	5	5	5	0.1	0.1	0.1	Yes
NE	Dundy	310579623002492	1	1	1	0.1	0.1	0.1	Yes
NE	Dundy	310579623002498	0	0	0	5.35	5.35	5.35	Yes
NE	Dundy	310579623002499	0	0	0	1.32	1.32	1.32	Yes
NE	Dundy	310579623002500	0	0	0	0.15	0.15	0.15	Yes
NE	Dundy	310579623002501	4	4	4	0.13	0.13	0.13	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99



**NE Colorado Cellular, Inc.**

**Project Status Description**

Pursuant to Section 54.1009(a)(6) of the Commission's rules,<sup>1</sup> NE Colorado Cellular, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 690 filed in conjunction with its Auction 901 winning bids.

In the FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the PCS spectrum, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural Nebraska citizens with comparable to those available in urban areas.

As of this date Filer is in the process of testing the 4G services. Filer has completed design, construction and turn up of 4G services.

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<sup>1</sup> 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	378015	
<015> Study Area Name	NE Colorado Cellular, Inc.	<b>ACCEPTED/FILED</b>
<020> Program Year	2017	
<030> Contact Name: Person USAC should contact with questions about this data	Michael Felicissimo	<b>JUL - 3 2017</b>
<035> Contact Telephone Number: Number of the person identified in data line <030>	9705423605 ext.	<b>Federal Communications Commission Office of the Secretary</b>
<039> Contact Email: Email of the person identified in data line <030>	mike.felicissimo@viaero.com	

<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	378015
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

**Reporting Carrier / Mobility Fund Phase 1 Winning Bidder**

<110>	FCC Registration Number	8314569
<111>	Filing Carrier Name	NE Colorado Cellular, Inc.
<112>	Winning Bidder Carrier Name	NE Colorado Cellular, Inc.
<113>	Street Address (or PO Box)	1224 W Platte Avenue
<114>	City	Fort Morgan
<115>	State	CO
<116>	Zip-Code	80701
<117>	Telephone Number	9705423605 ext.
<118>	Fax Number	9708673589
<119>	Email Address	mike.felicissimo@viaero.com

**Contact Information**

if same as above, indicate in this box



<120>	Name (First, MI, Last, Suffix)	Mike Felicissimo
<121>	Filing Carrier Name	NE Colorado Cellular, Inc.
<122>	Street Address (or PO Box)	1224 W Platte Avenue
<123>	City	Fort Morgan
<124>	State	CO
<125>	Zip-Code	80701
<126>	Telephone Number	9705423605 ext.
<127>	Fax Number	9708673589
<128>	Email Address	mike.felicissimo@viaero.com

**Authorized Agent Information**

if no agent, indicate in this box



<130>	Name (First, MI, Last, Suffix)	
<131>	Company	
<132>	Street Address (or PO Box)	
<133>	City	
<134>	State	
<135>	Zip-Code	
<136>	Telephone Number	
<137>	Fax Number	
<138>	Email Address	

<p>(060) Coverage and Performance Report</p>	<p>FCC Form 690          Approved by OMB          OMB Control No. 3060-1185          Page 3 of 8</p>
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Page 3 of 8

<140>	Coverage and Performance Report Year	07/2016 - 06/2017
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SAC\_378015\_Frontier\_NE\_Voice\_Shapefile.zip,  
SAC\_378015\_Frontier\_NE\_Broadband\_Shapefile.zip

[illegible]

100	
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95

<010>	Study Area Code	378015
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

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

<b>Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)</b>	
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:	NE Colorado Cellular, Inc.
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/30/2017
Printed name of Authorized Officer:	Michael Felicissimo
Title or position of Authorized Officer:	Executive Vice President
Telephone number of Authorized Officer:	9705423605 ext.
Study Area Code of Reporting Carrier:	378015 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 REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier</b>	
I certify that (Name of Agent) _____ 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:	
Name of Reporting Carrier:	
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:	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 AUTHORIZED AGENT:**

<b>Certification of Agent Authorized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier</b>	
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:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
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	378015
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<035> Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

&lt;142&gt; State

&lt;143&gt; County

&lt;144&gt; Tribal Land(s) on which ETC Serves

&lt;145&gt; 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:

- <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.

Select (Yes, No, Not Applicable)

<010>	Study Area Code	378015
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

&lt;200&gt; Date Authorized to Receive Support

07/29/2013

&lt;201&gt; Targeted Completion Date

07/30/2016

&lt;202&gt; Total Mobility Fund Support Awarded

85674.05

&lt;203&gt; Total Mobility Fund Support Disbursed

80850.60

&lt;210&gt; Actual Completion Date

04/22/2015

&lt;211&gt; Project Status Description (attached)

Nebraska Sites complete.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.

&lt;212&gt; Status of Network Deployment - Network Design

✓

&lt;213&gt; Status of Network Deployment - Construction

✓

&lt;214&gt; Status of Network Deployment - Deployment

✓

&lt;215&gt; Status of Network Deployment - Maintenance

&lt;216&gt; Project Budget Status

&lt;217&gt; Project Plan Status

✓

&lt;218&gt; Network will Support 3G/4G Mobile Service ?

☐ 3G☒ 4G

<010>	Study Area Code	378015
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.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: NE Colorado Cellular, Inc.

Signature of Authorized Officer: CERTIFIED ONLINE

Date 06/30/2017

Printed name of Authorized Officer: Michael Felicissimo

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 9705423605 ext.

Study Area Code of Reporting Carrier: 378015

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.



<010>	Study Area Code	378015
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.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) \_\_\_\_\_ 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: \_\_\_\_\_

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: \_\_\_\_\_

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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: \_\_\_\_\_

Name of Authorized Agent Firm: \_\_\_\_\_

Signature of Authorized Agent or Employee of Agent: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Authorized Agent Employee: \_\_\_\_\_

Title or position of Authorized Agent or Employee of Agent: \_\_\_\_\_

Telephone number of Authorized Agent or Employee of Agent: \_\_\_\_\_

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.

## Attachments

## (060) Coverage and Performance Report

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

<010> Study Area Code 378015  
 <015> Study Area Name NE Colorado Cellular, Inc.  
 <020> Program Year 2017  
 <030> Contact Name - Person USAC should contact regarding this data Michael Felicissimo  
 <035> Contact Telephone Number - Number of person identified in data line <030> 9705423605 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com  
 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Frontier	310639611001225	6	6	6	6.68	6.18	6.18	Yes
NE	Frontier	310639611001241	8	8	8	1.64	1.64	1.64	Yes
NE	Frontier	310639611001270	0	0	0	0.03	0.03	0.03	Yes
NE	Frontier	310639611001271	3	3	3	1.85	1.85	1.85	Yes
NE	Frontier	310639611001362	0	0	0	3.69	3.69	3.69	Yes
NE	Frontier	310639611001378	0	0	0	0.06	0.06	0.06	Yes
NE	Frontier	310639611001398	0	0	0	1.78	1.78	1.78	Yes
NE	Frontier	310639611001406	5	5	5	1.43	1.43	1.43	Yes
NE	Frontier	310639611001462	0	0	0	0.46	0.46	0.46	Yes
NE	Frontier	310639611001463	0	0	0	0.36	0.36	0.36	Yes
NE	Frontier	310639611001465	0	0	0	0.23	0.23	0.23	Yes
NE	Frontier	310639611001466	0	0	0	0.02	0.02	0.02	Yes
NE	Frontier	310639611001469	0	0	0	2.2	2.2	2.2	Yes
NE	Frontier	310639611001471	0	0	0	0.16	0.16	0.16	Yes
NE	Frontier	310639611001479	0	0	0	0.98	0.98	0.98	Yes
NE	Frontier	310639611001480	0	0	0	0.03	0.03	0.03	Yes
NE	Frontier	310639611001487	0	0	0	0.24	0.24	0.24	Yes
NE	Frontier	310639611001488	0	0	0	0.5	0.5	0.5	Yes
NE	Frontier	310639611001489	0	0	0	0.44	0.44	0.44	Yes
NE	Frontier	310639611001490	0	0	0	0.28	0.28	0.28	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

95

## (060) Coverage and Performance Report

FCC Form 690

Approved by OMB

OMB Control No. 3060-1185

<010> Study Area Code 378015  
 <015> Study Area Name NE Colorado Cellular, Inc.  
 <020> Program Year 2017  
 <030> Contact Name - Person USAC should contact regarding this data Michael Felicissimo  
 <035> Contact Telephone Number - Number of person identified in data line <030> 9705423605 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com  
 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Frontier	310639611001525	0	0	0	0.04	0.04	0.04	Yes
NE	Frontier	310639611001526	0	0	0	0.21	0.21	0.21	Yes
NE	Frontier	310639611002397	0	0	0	0.11	0.11	0.11	Yes
NE	Frontier	310639611002406	0	0	0	0.56	0.56	0.56	Yes
NE	Frontier	310639611002412	0	0	0	2.46	2.46	2.46	Yes
NE	Frontier	310639611002414	0	0	0	0.05	0.05	0.05	Yes
NE	Frontier	310639611002421	0	0	0	0.69	0.69	0.69	Yes
NE	Frontier	310639611002457	0	0	0	0.25	0.25	0.25	Yes
NE	Frontier	310639611002489	0	0	0	0.82	0.43	0.43	Yes
NE	Frontier	310639611002491	0	0	0	0.31	0.08	0.08	Yes
NE	Frontier	310639611002493	0	0	0	0.05	0.04	0.04	Yes
NE	Frontier	310639611002494	0	0	0	0.25	0.21	0.21	Yes
NE	Frontier	310639611002496	0	0	0	0.21	0.21	0.21	Yes
NE	Frontier	310639611002538	0	0	0	0.11	0.02	0.02	Yes
NE	Frontier	310639611002639	0	0	0	0.03	0.0	0.0	Yes
NE	Frontier	310639611002641	0	0	0	0.16	0.11	0.11	Yes
NE	Frontier	310639611002642	0	0	0	0.28	0.21	0.21	Yes
NE	Frontier	310639611002644	0	0	0	0.27	0.25	0.25	Yes
NE	Frontier	310639611002655	0	0	0	1.2	1.04	1.04	Yes
NE	Frontier	310639611002692	0	0	0	0.67	0.67	0.67	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

95

**NE Colorado Cellular, Inc.**

**Project Status Description**

Pursuant to Section 54.1009(a)(6) of the Commission's rules,<sup>1</sup> NE Colorado Cellular, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 690 filed in conjunction with its Auction 901 winning bids.

In the FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the PCS spectrum, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural Nebraska citizens with comparable to those available in urban areas.

As of this date Filer is in the process of testing the 4G services. Filer has completed design, construction and turn up of 4G services.

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<sup>1</sup> 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	378017	<b>ACCEPTED/FILED</b>  JUL - 3 2017
<015> Study Area Name	NE Colorado Cellular, Inc.	
<020> Program Year	2017	
<030> Contact Name: Person USAC should contact with questions about this data	Michael Felicissimo	<b>Federal Communications Commission</b> <b>Office of the Secretary</b>
<035> Contact Telephone Number: Number of the person identified in data line <030>	9705423605 ext.	
<039> Contact Email: Email of the person identified in data line <030>	mike.felicissimo@viaero.com	

<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	378017
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

**Reporting Carrier / Mobility Fund Phase 1 Winning Bidder**

<110>	FCC Registration Number	8314569
<111>	Filing Carrier Name	NE Colorado Cellular, Inc.
<112>	Winning Bidder Carrier Name	NE Colorado Cellular, Inc.
<113>	Street Address (or PO Box)	1224 W Platte Avenue
<114>	City	Fort Morgan
<115>	State	CO
<116>	Zip-Code	80701
<117>	Telephone Number	9705423605 ext.
<118>	Fax Number	9708673589
<119>	Email Address	mike.felicissimo@viaero.com

**Contact Information**

if same as above, indicate in this box



<120>	Name (First, MI, Last, Suffix)	Mike Felicissimo
<121>	Filing Carrier Name	NE Colorado Cellular, Inc.
<122>	Street Address (or PO Box)	1224 W Platte Avenue
<123>	City	Fort Morgan
<124>	State	CO
<125>	Zip-Code	80701
<126>	Telephone Number	9705423605 ext.
<127>	Fax Number	9708673589
<128>	Email Address	mike.felicissimo@viaero.com

**Authorized Agent Information**

if no agent, indicate in this box



<130>	Name (First, MI, Last, Suffix)	
<131>	Company	
<132>	Street Address (or PO Box)	
<133>	City	
<134>	State	
<135>	Zip-Code	
<136>	Telephone Number	
<137>	Fax Number	
<138>	Email Address	

FCC Form 690  
Approved by OMB  
OMB Control No. 3060-1185  
Page 3 of 8

<010>	Study Area Code	378017
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com
<140>	Coverage and Performance Report Year	07/2016 - 06/2017

SAC\_378017\_Garfield\_NE\_Voice\_Shapefile.zip,  
SAC\_378017\_Garfield\_NE\_Broadband\_Shapefile.zip

[illegible]

100

99



<010> Study Area Code	378017
<015> Study Area Name	NE Colorado Cellular, Inc.
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035> Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.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: NE Colorado Cellular, Inc.

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/30/2017

Printed name of Authorized Officer: Michael Felicissimo

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 9705423605 ext.

Study Area Code of Reporting Carrier: 378017 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 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) \_\_\_\_\_ 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:

Name of Reporting Carrier:

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: 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 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:

Name of Authorized Agent Firm:

Signature of Authorized Agent or Employee of Agent: Date:

Name of Authorized Agent Employee:

Title or position of Authorized Agent or Employee of Agent:

Telephone number of Authorized Agent or Employee of Agent:

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

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<010>	Study Area Code	378017
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
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<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

&lt;142&gt; State

&lt;143&gt; County

&lt;144&gt; Tribal Land(s) on which ETC Serves

&lt;145&gt; 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:

- <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.

Select (Yes, No, Not Applicable)

<010>	Study Area Code	378017
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

<200> Date Authorized to Receive Support

<201> Targeted Completion Date

<202> Total Mobility Fund Support Awarded

<203> Total Mobility Fund Support Disbursed

07/29/2013

07/30/2016

31468.98

30965.48

<210> Actual Completion Date

03/24/2105

<211> Project Status Description (attached)

Nebraska Sites complete.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	378017
<015>	Study Area Name	NE Colorado Cellular, Inc.
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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: NE Colorado Cellular, Inc.

Signature of Authorized Officer: CERTIFIED ONLINE

Date 06/30/2017

Printed name of Authorized Officer: Michael Felicissimo

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 9705423605 ext.

Study Area Code of Reporting Carrier: 378017

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I certify that (Name of Agent) \_\_\_\_\_ 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:

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.

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:

Name of Authorized Agent Firm:

Signature of Authorized Agent or Employee of Agent:

Date:

Name of Authorized Agent Employee:

Title or position of Authorized Agent or Employee of Agent

Telephone number of Authorized Agent or Employee of Agent:

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.

## Attachments

## (060) Coverage and Performance Report

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

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 <039> Contact Email Address - Email Address of person identified in data line <030> mike.felicissimo@viaero.com  
 <140> Coverage and Performance Report Year 07/2016 - 06/2017

&lt;141&gt;

<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)
NE	Garfield	310719732001004	0	0	0	0.03	0.03	0.03	Yes
NE	Garfield	310719732001007	1	1	1	0.09	0.09	0.09	Yes
NE	Garfield	310719732001009	18	18	18	6.02	6.02	6.02	Yes
NE	Garfield	310719732001010	2	2	2	1.85	1.85	1.85	Yes
NE	Garfield	310719732001013	0	0	0	0.35	0.35	0.35	Yes
NE	Garfield	310719732001014	0	0	0	2.91	2.65	2.65	Yes
NE	Garfield	310719732001016	0	0	0	0.08	0.08	0.08	Yes
NE	Garfield	310719732001017	0	0	0	0.96	0.96	0.96	Yes
NE	Garfield	310719732001018	0	0	0	0.08	0.08	0.08	Yes
NE	Garfield	310719732001020	0	0	0	0.25	0.25	0.25	Yes
NE	Garfield	310719732001021	0	0	0	0.32	0.32	0.32	Yes
NE	Garfield	310719732001022	0	0	0	0.07	0.07	0.07	Yes
NE	Garfield	310719732001023	1	1	1	5.22	5.22	5.22	Yes
NE	Garfield	310719732001024	0	0	0	0.31	0.31	0.31	Yes
NE	Garfield	310719732001025	0	0	0	0.57	0.57	0.57	Yes
NE	Garfield	310719732001026	0	0	0	0.26	0.26	0.26	Yes
NE	Garfield	310719732001027	0	0	0	0.59	0.59	0.59	Yes
NE	Garfield	310719732001029	0	0	0	0.03	0.03	0.03	Yes
NE	Garfield	310719732001035	0	0	0	0.14	0.14	0.14	Yes
NE	Garfield	310719732001036	3	3	3	2.19	2.19	2.19	Yes

Percentage of  
Total Population  
Reached by  
Service

100

Percentage of Total  
Road Miles covered  
by Service

99

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

[illegible]

100

99



**NE Colorado Cellular, Inc.**

**Project Status Description**

Pursuant to Section 54.1009(a)(6) of the Commission's rules,<sup>1</sup> NE Colorado Cellular, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 690 filed in conjunction with its Auction 901 winning bids.

In the FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the PCS spectrum, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural Nebraska citizens with comparable to those available in urban areas.

As of this date Filer is in the process of testing the 4G services. Filer has completed design, construction and turn up of 4G services.

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<sup>1</sup> 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 378018  
<015> Study Area Name NE Colorado Cellular, Inc.  
<020> Program Year 2017  
<030> Contact Name: Person USAC should contact  
with questions about this data Michael Felicissimo  
<035> Contact Telephone Number:  
Number of the person identified in data line <030> 9705423605 ext.  
<039> Contact Email:  
Email of the person identified in data line <030> mike.felicissimo@viaero.com

**ACCEPTED/FILED**

**JUL - 3 2017**

**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-PER, 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	378018
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

**Reporting Carrier / Mobility Fund Phase 1 Winning Bidder**

<110>	FCC Registration Number	8314569
<111>	Filing Carrier Name	NE Colorado Cellular, Inc.
<112>	Winning Bidder Carrier Name	NE Colorado Cellular, Inc.
<113>	Street Address (or PO Box)	1224 W Platte Avenue
<114>	City	Fort Morgan
<115>	State	CO
<116>	Zip-Code	80701
<117>	Telephone Number	9705423605 ext.
<118>	Fax Number	9708673589
<119>	Email Address	mike.felicissimo@viaero.com

**Contact Information**

if same as above, indicate in this box



<120>	Name (First, MI, Last, Suffix)	Mike Felicissimo
<121>	Filing Carrier Name	NE Colorado Cellular, Inc.
<122>	Street Address (or PO Box)	1224 W Platte Avenue
<123>	City	Fort Morgan
<124>	State	CO
<125>	Zip-Code	80701
<126>	Telephone Number	9705423605 ext.
<127>	Fax Number	9708673589
<128>	Email Address	mike.felicissimo@viaero.com

**Authorized Agent Information**

if no agent, indicate in this box



<130>	Name (First, MI, Last, Suffix)	
<131>	Company	
<132>	Street Address (or PO Box)	
<133>	City	
<134>	State	
<135>	Zip-Code	
<136>	Telephone Number	
<137>	Fax Number	
<138>	Email Address	

FCC Form 690  
Approved by OMB  
OMB Control No. 3060-1185  
Page 3 of 8

<010>	Study Area Code	378018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com
<140>	Coverage and Performance Report Year	07/2016 - 06/2017

SAC\_378018\_Grant\_NE\_Voice\_Shapefile.zip,  
SAC\_378018\_Grant\_NE\_Broadband\_Shapefile.zip

[illegible]

100

87

**(070) Urban Rate Comparability Certification Compliance**FCC Form 690  
Approved by OMB  
OMB Control No. 3060-1185  
Page 4 of 8

<010> Study Area Code	378018
<015> Study Area Name	NE Colorado Cellular, Inc.
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035> Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.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:	NE Colorado Cellular, Inc.	
Signature of Authorized Officer:	CERTIFIED ONLINE	Date 06/30/2017
Printed name of Authorized Officer:	Michael Felicissimo	
Title or position of Authorized Officer:	Executive Vice President	
Telephone number of Authorized Officer:	9705423605 ext.	
Study Area Code of Reporting Carrier:	378018	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 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) \_\_\_\_\_ 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:	
Name of Reporting Carrier:	
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:	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 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:	
Name of Authorized Agent Firm:	
Signature of Authorized Agent or Employee of Agent:	Date:
Name of Authorized Agent Employee:	
Title or position of Authorized Agent or Employee of Agent	
Telephone number of Authorized Agent or Employee of Agent:	
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.

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<015>	Study Area Name	NE Colorado Cellular, Inc.
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<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

&lt;142&gt; State

&lt;143&gt; County

&lt;144&gt; Tribal Land(s) on which ETC Serves

&lt;145&gt; 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:

- <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.

Select (Yes, No, Not Applicable)

<010>	Study Area Code	378018
<015>	Study Area Name	NE Colorado Cellular, Inc.
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Michael Felicissimo
<035>	Contact Telephone Number - Number of person identified in data line <030>	9705423605 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.com

<200>	Date Authorized to Receive Support	07/29/2013
<201>	Targeted Completion Date	07/30/2016
<202>	Total Mobility Fund Support Awarded	412815.69
<203>	Total Mobility Fund Support Disbursed	350108.99

<210>	Actual Completion Date	01/19/2016
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<211>	Project Status Description (attached)	Nebraska Sites complete.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	<input checked="" type="checkbox"/>
<213>	Status of Network Deployment - Construction	<input checked="" type="checkbox"/>
<214>	Status of Network Deployment - Deployment	<input checked="" type="checkbox"/>
<215>	Status of Network Deployment - Maintenance	<input type="checkbox"/>
<216>	Project Budget Status	<input type="checkbox"/>
<217>	Project Plan Status	<input checked="" type="checkbox"/>

<218> Network will Support 3G/4G Mobile Service ? ☐ 3G ☒ 4G

<010>	Study Area Code	378018
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.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: NE Colorado Cellular, Inc.

Signature of Authorized Officer: CERTIFIED ONLINE

Date 06/30/2017

Printed name of Authorized Officer: Michael Felicissimo

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 9705423605 ext.

Study Area Code of Reporting Carrier: 378018

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.



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<039>	Contact Email Address - Email Address of person identified in data line <030>	mike.felicissimo@viaero.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) \_\_\_\_\_ 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:

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.

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:

Name of Authorized Agent Firm:

Signature of Authorized Agent or Employee of Agent:

Date:

Name of Authorized Agent Employee:

Title or position of Authorized Agent or Employee of Agent

Telephone number of Authorized Agent or Employee of Agent:

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.

## Attachments