REDACTED FOR PUBLIC INSPECTION

(3006) Rate Of Return Carrier Additional Documentation

Data Collection Form

FCC Form 481

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

July 2013

<010>	Study Area Code	341183
<015>	Study Area Name	CITIZENS-FRONTIER-IL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cassandra.guinness@ftr.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) **Progress Report on 5 Year Plan**
Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

Name of Attached Document Listing Required Information

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

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

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

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

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

Name of Attached Document Listing Required Information

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

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

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

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

(3021) Management letter issued by the independent certified public accountant that performed the company's financial audit.

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

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

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

(3024) Underlying information subjected to an officer certification.

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

REDACTED FOR PUBLIC INSPECTION

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

<010>	Study Area Code	341183
<015>	Study Area Name	CITIZENS-FRONTIER-IL
<020>	Program Year	2015
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<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cassandra.guinness@ftr.com

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

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

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: CITIZENS-FRONTIER-IL

Signature of Authorized Officer: CERTIFIED ONLINE Date

Printed name of Authorized Officer: Ken Mason

Title or position of Authorized Officer: VP Business Operations

Telephone number of Authorized Officer: 5857775645 ext.

Study Area Code of Reporting Carrier: 341183 Filing Due Date for this form: 07/01/2014

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.

REDACTED FOR PUBLIC INSPECTION

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

<010>	Study Area Code	341183
<015>	Study Area Name	CITIZENS-FRONTIER-IL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Cassandra Guinness
<035>	Contact Telephone Number - Number of person identified in data line <030>	5857774557 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	cassandra.guinness@ftr.com

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

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

I certify that (Name of Agent)_____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.

Name of Authorized Agent:

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: 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 AUTHORIZED AGENT:

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

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

Name of Reporting Carrier:

Name of Authorized Agent or Employee of Agent:

Signature of Authorized Agent or Employee of Agent: Date:

Printed name of Authorized Agent or Employee of Agent:

Title or position of Authorized Agent or Employee of Agent

Telephone number of Authorized Agent or Employee of Agent: 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.

Attachments

FCC Form 481

Line 100 – Service Quality Improvement Reporting
[47 CFR 54.313(a)(1)]

In the FCC's Public Notice DA 14-951, released May 1, 2014, the FCC waived the requirement for price cap ETCs to file a five-year plan.[1]

[1] The Public Notice stated, in relevant part:

We now grant a waiver of this requirement for price cap ETCs for an additional year. Because the Bureau just finalized the Connect America Cost Model, and price cap carriers have not yet had the opportunity to make a state-level commitment for Connect America Phase II, we find that it is not in the public interest to require price cap ETCs to file new five-year plans in 2014 for the same reason as last year: they do not yet know which areas they will be serving in the future.

FCC Form 481
Line 330 - Unfulfilled Broadband Service Requests Resolution

State:	Illinois	Year:	2013
Study Area Code:	341183		
Study Area Name:	Citizens Telecommunications Company Of Illinois		

(A)	(B)	(C)	(D)	(E)
Date of Potential Customer's Request (mm/dd/yyyy)	Date When the Request was Considered Unfulfilled (mm/dd/yyyy)	Name of Exchange/ Wire Center	Description of Service Request	How Service Fulfillment was Attempted/Reason for Unfulfillment (If fulfilled in 2013, include date of fulfillment.)
[redacted]				

FCC Form 481
Line 330 - Unfulfilled Broadband Service Requests Resolution

State:	Illinois	Year:	2013
Study Area Code:	341183		
Study Area Name:	Citizens Telecommunications Company Of Illinois		

(A)	(B)	(C)	(D)	(E)
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[redacted]				

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Line 330 - Unfulfilled Broadband Service Requests Resolution

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Study Area Code: 341183
Study Area Name: Citizens Telecommunications Company Of Illinois

Year: 2013

(A)	(B)	(C)	(D)	(E)
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Line 510 – Description of Compliance with Service Quality Standards and Consumer Protection:

The Frontier ILEC companies certify that they comply with applicable state and FCC service quality standards. Service quality metrics are monitored and reported on a monthly basis. Frontier has implemented numerous Consumer Protection measures to protect customer information from improper use and disclosure as well as to protect against fraud. For example, Frontier has implemented Customer Proprietary Network Information (policies and procedures) that are consistent with the FCC's regulations. Frontier regularly trains employees who have access to CPNI on the rules and our procedures for securing accounts and authenticating callers. Frontier also has a comprehensive Identity Theft Protection Program (or Red Flag program) which is consistent with the FTC's guidance on measures to detect and prevent identity theft. All employees are trained on Frontier's Code of Business Conduct and Ethics, which requires employees to protect sensitive customer information from improper use and disclosure. Frontier also has a Data Privacy and Security policy which applies to all employees. Further, Frontier also has implemented a strict third-party qualification protocol to prevent unauthorized charges ("Cramming") from appearing on customer's bills. Frontier also follows a "First Call" resolution policy, which aims to resolve customer complaints about unauthorized charges in one call, without referral to any third party. In addition to the foregoing, Frontier, has implemented customary IT security measures to protect our network and customer information.

Frontier certifies compliance with Illinois state consumer protection rules; Illinois Admin. Code, Title 83, Part 735 – PROCEDURES GOVERNING THE ESTABLISHMENT OF CREDIT, BILLING, DEPOSITS, TERMINATION OF SERVICE AND ISSUANCE OF TELEPHONE DIRECTORIES FOR LOCAL EXCHANGE TELECOMMUNICATIONS CARRIERS IN THE STATE OF ILLINOIS, Illinois Admin. Code, Title 83, Part 737 -- STANDARDS OF SERVICE AND CUSTOMER CREDITS FOR ELECTING PROVIDERS and Illinois Admin. Code, Title 83, Part 773 – Presubscription.

The Illinois state consumer protection rules are available at:

http://www.ilga.gov/commission/jcar/admincode/083/08300735sections.html

http://www.ilga.gov/commission/jcar/admincode/083/08300737sections.html

http://www.ilga.gov/commission/jcar/admincode/083/08300773sections.html

Row 610 - Description of Functionality in Emergency Situations

In December 2013, the FCC adopted new rules to promote 911 resiliency. Frontier is currently reviewing its back-up power, circuit auditing and network monitoring practices to ensure compliance with the FCC's direction. Frontier's procedures are described below; to the extent that there is any conflict between the FCC's new 911 resiliency rules and Frontier's existing procedures, the existing procedures will be updated to conform to FCC standards within the timeframe specified by the FCC.

The Frontier ILEC companies certify that they follow best practices that are designed to allow them to remain functional in an emergency situation through the use of back-up power to ensure functionality in the event of a limited commercial power failure. Frontier's policy is that at sites where there is a generator, it will also have batteries capable of providing three-to-four hours of backup power. Sites that are provisioned to allow portable generators typically have up to eight hours of battery backup power available. Frontier adheres to formal maintenance and testing schedules of batteries and generators based on the GTE practices, the Bell standard and manufacturer standards. Batteries are load tested routinely. On site generators are tested monthly with an annual "blackout" test also incorporated. Routine maintenance occurs regularly throughout the year. Portable generators are load tested once a year along with performing the manufacturer recommended maintenance.

The companies' network is engineered to provide maximum capacity in order to handle excess traffic in the event of traffic spikes resulting from emergency situations. Carrier audits its circuits in order to provide redundancy in its network where feasible for use in re-rerouting traffic when facilities are damaged.

REDACTED FOR PUBLIC INSPECTION

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

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

<010>	Study Area Code	341183
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<039>	Contact Email Address - Email Address of person identified in data line <030>	cassandra.guinness@ftr.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1> State	<a2> Exchange (ILEC)	<a3> SAC (CETC)	<b1> Rate Type	<b2> Residential Local Service Rate	<b3> State Subscriber Line Charge	<b4> State Universal Service Fee	<b5> Mandatory Extended Area Service Charge	<c> Total per line Rates and Fees
IL	FULTON, IL		FR	16.68	0.0	0.18	2.5	19.36
IL	LYNDON, IL		FR	16.68	0.0	0.19	3.25	20.12
IL	MORRISON, IL		FR	16.68	0.0	0.17	1.7	18.55
IL	ABINGDON. IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ADDIEVILLE, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ALBANY, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ALEDO, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ALEXIS, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ALPHA, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ALTAMOUNT, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ANDOVER, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	ASHLEY, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BARTELSO, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BASCO, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BATCHTOWN, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BATH, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BEECHER CITY, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BENLD, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BIGGSVILLE, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BOWEN, IL		FR	22.9	0.0	0.21	0.0	23.11
IL	BROWNSTOWN (OOUS), IL		FR	22.9	0.0	0.21	0.0	23.11