

LAW OFFICES
BLOOSTON, MORDKOFKY, DICKENS, DUFFY & PRENDERGAST, LLP
2120 L STREET, NW
WASHINGTON, DC 20037

HAROLD MORDKOFKY
BENJAMIN H. DICKENS, JR.
JOHN A. PRENDERGAST
GERARD J. DUFFY
RICHARD D. RUBINO
MARY J. SISAK
D. CARY MITCHELL
SALVATORE TAILLEFER

(202) 659-0830
FACSIMILE: (202) 828-5568

AFFILIATED SOUTH AMERICAN OFFICES
ESTUDIO JAUREGUI & ASSOCIATES
BUENOS AIRES, ARGENTINA

EUGENE MALISZEWSKY, J.
ENGINEERING CONSULTANT

June 29, 2015

ARTHUR BLOOSTON
1914 – 1999

WRITER'S CONTACT INFORMATION
gjd@bloostonlaw.com
202-828-5528

REDACTED – FOR PUBLIC INSPECTION

VIA HAND DELIVERY AND ECFS

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

**RE: Form 481 – Carrier Annual Reporting Data Collection Form
WC Docket No. 14-58
Glasford Telephone Company (SAC 341017)**

Dear Ms. Dortch:

Pursuant to sections 54.313(i) and 54.422(c) of the Commission's Rules and the Commission's *Protective Order*¹ in this proceeding, Glasford Telephone Company ("the Company") hereby submits two copies of its "FCC Form 481 – Carrier Annual Reporting Data Collection Form," which will be timely filed with the Universal Service Administrative Company and the appropriate state commission on or before July 1, 2014, and which includes a Redacted Confidential Document containing proprietary and confidential financial and 5-year service quality improvement plan progress report information that has been obscured.

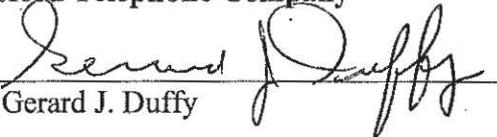
¹ *In the Matter of Connect America Fund, et al.*, PROTECTIVE ORDER, WC Docket No. 10-90, et al., DA 15-712, released June 17, 2015.

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The Company seeks confidential treatment under the *Protective Order* for the financial information included in its report pursuant to §54.313(f)(2). Confidential treatment of this information is appropriate on the grounds that it is commercially sensitive information that is not normally released to the public. The Company is also submitting a copy of its FCC Form 481 (including the Redacted Confidential Document) via the Electronic Comment Filing System.

The Company has submitted a separate letter requesting confidential treatment pursuant to Section 0.459 of the Commission's Rules for proprietary and confidential information contained in its progress report regarding its five-year service quality improvement plan.

Respectfully submitted,
Glasford Telephone Company

By: 
Gerard J. Duffy

Its Attorney

LAW OFFICES
BLOOSTON, MORDKOFKY, DICKENS, DUFFY & PRENDERGAST, LLP
2120 L STREET, NW, SUITE 300
WASHINGTON, DC 20037

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June 29, 2015

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(202) 828-5528
gjd@bloostonlaw.com

REDACTED – FOR PUBLIC INSPECTION

Marlene H. Dortch, Secretary
Federal Communications Commission
445 12th Street, SW, Room TW-A325
Washington, DC 20554

**RE: Rule Section 0.459 Request for Confidential Treatment
Glasford Telephone Company (SAC 341017)
WC Docket No. 14-58
FCC Form 481 – Carrier Annual Reporting Data Collection Form**

Dear Ms. Dortch:

Glasford Telephone Company (“the Company”), by its attorney, hereby requests, pursuant to Section 0.459 of the Commission’s Rules, that the redacted portions of the Company’s “Progress Report for Plan Year 2015” be withheld from public inspection.

In accordance with Section 0.459(b) of the Commission’s Rules, the Company states:

1. The specific information for which confidentiality is sought is comprised of a report stating the capital investments and related maintenance and service provision expenditures that the Company has already made during Plan Year 2015 and that it project that it will make during the remainder of Plan Year 2015.
2. This information is submitted in compliance with the requirement in Section 54.313(a)(1) of the Commission’s Rules that recipients of high-cost support submit a progress report on their five-year service quality improvement plans.

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3. This information regarding the nature and timing of the Company's construction and network improvement plans, and its capital expenditures and related operating expenses, is proprietary and confidential commercial and financial information that is routinely withheld from public inspection.

4. The voice and broadband services for which the 5-year service improvement plans have been prepared are subject to potential competition from competitive local exchange carriers, cable television system operators, electric power utilities, fixed and mobile wireless service providers, and/or satellite carriers. Even where such competition is not active at present, the nature and scheduling of the Company's network upgrades and the size and timing of its related capital and operating expenditures constitute very valuable competitive intelligence for any entity that may be contemplating or planning entry into one or more portions of the Company's service area.

5. Again, whether or not the Company has an active competitor at the present time, there are numerous potential competitors and the nature and scheduling of the Company's network upgrades and the size and timing of its related capital and operating expenditures constitute very valuable competitive intelligence that can greatly assist the planning of any entity that may be contemplating entry into one or more portions of the Company's service area.

6. The Company limits internal access to its 5-year service improvement plan and progress reports to its key employees and consultants who need the information for planning, reporting and management purposes. The plan and progress reports are not posted on any Company website, or included in any Company press releases, reports or other documents that are available to the general public or to unrestricted portions thereof.

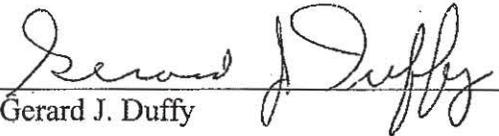
7. The Company does not make its 5-year service improvement plan or progress reports available to the public, and has not previously disclosed its plan or reports to third parties.

8. The Company requests that the individual annual charts included in the plan and the annual progress reports not be available for public disclosure until at least the end of the next full calendar year following the calendar year to which they apply. Competitors and potential competitors should not be able to see the Company's network deployment plans and actual expenditures for a particular year prior to the year, during the year, or during the year following the year (particularly because weather and other factors can cause construction delays). After that period, projects are generally completed, and competitors are able to observe directly or read published reports of what the Company actually did to improve its network and services.

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The Company notes that it is also redacting and claiming confidential treatment, pursuant to the Bureau's *Protective Order*, DA 15-712, released June 17, 2015, for the financial information submitted in compliance with the requirements of Section 54.313(f)(2) of the Commission's Rules.

Respectfully submitted,
Glasford Telephone Company

By: 
Gerard J. Duffy

Its Attorney

| | | |
|--------------------|--|------------------------|
| <010> | Study Area Code | 341017 |
| <015> | Study Area Name | GLASFORD TEL CO |
| <020> | Program Year | 2016 |
| <030> | Contact Name: Person USAC should contact with questions about this data | Mike Petrouske |
| <035> | Contact Telephone Number: Number of the person identified in data line <030> | 8156215212 ext. |
| <039> | Contact Email Address: Email of the person identified in data line <030> | mpetrouske@hometel.com |

| | | |
|--|--------------------------------------|--------------------------------------|
| ANNUAL REPORTING FOR ALL CARRIERS | 54.313 Completion Required | 54.422 Completion Required |
|--|--------------------------------------|--------------------------------------|

| | | (check box when complete) | |
|--|-----------------------------------|-------------------------------------|-------------------------------------|
| <100> Service Quality Improvement Reporting (complete attached worksheet) | | <input checked="" type="checkbox"/> | |
| <200> Outage Reporting (voice) (complete attached worksheet) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <210> <input checked="" type="checkbox"/> ← check box if no outages to report | | <input checked="" type="checkbox"/> | |
| <300> Unfulfilled Service Requests (voice) <input type="text" value="0"/> | | <input checked="" type="checkbox"/> | |
| <310> Detail on Attempts (voice) <div style="border: 1px solid black; height: 40px; width: 100%;"></div> (attach descriptive document) | | <input type="checkbox"/> | |
| <320> Unfulfilled Service Requests (broadband) <input type="text" value="0"/> | | <input checked="" type="checkbox"/> | |
| <330> Detail on Attempts (broadband) <div style="border: 1px solid black; height: 40px; width: 100%;"></div> (attach descriptive document) | | <input type="checkbox"/> | |
| <400> Number of Complaints per 1,000 customers (voice) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <410> Fixed <input type="text" value="0.0"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <420> Mobile <input type="text" value="0.0"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <430> Number of Complaints per 1,000 customers (broadband) | | <input checked="" type="checkbox"/> | |
| <440> Fixed <input type="text" value="0.0"/> | | <input checked="" type="checkbox"/> | |
| <450> Mobile <input type="text" value="0.0"/> | | <input checked="" type="checkbox"/> | |
| <500> Service Quality Standards & Consumer Protection Rules Compliance (check to indicate certification) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <510> <input type="text" value="34101711510.pdf"/> (attached descriptive document) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <600> Functionality in Emergency Situations (check to indicate certification) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <610> <input type="text" value="34101711610.pdf"/> (attached descriptive document) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <700> Company Price Offerings (voice) (complete attached worksheet) | | <input checked="" type="checkbox"/> | |
| <710> Company Price Offerings (broadband) (complete attached worksheet) | | <input checked="" type="checkbox"/> | |
| <800> Operating Companies and Affiliates (complete attached worksheet) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/> | | <input type="checkbox"/> | |
| <1000> Voice Services Rate Comparability Certification (if yes, complete attached worksheet) | Yes <input type="text" value=""/> | <input checked="" type="checkbox"/> | |
| <1010> <input type="text" value="341017111010.pdf"/> (attach descriptive document) | | <input checked="" type="checkbox"/> | |
| <1100> Certify whether terrestrial backhaul options exist (Yes or No) <input checked="" type="radio"/> <input type="radio"/> (if not, check to indicate certification) | | <input type="checkbox"/> | |
| <1110> (complete attached worksheet) | | <input type="checkbox"/> | |
| <1200> Terms and Condition for Lifeline Customers (complete attached worksheet) | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

| | | | |
|---------------------|--|--------------------------|--|
| <2000> | (check to indicate certification) | | |
| <2005> | (complete attached worksheet) | <input type="checkbox"/> | |

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

| | | | |
|---------------------|--|-------------------------------------|--|
| <3000> | (check to indicate certification) | | |
| <3005> | (complete attached worksheet) | <input checked="" type="checkbox"/> | |

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| | |
|---|--|
| (100) Service Quality Improvement Reporting Data Collection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|---|--|

| | |
|---|-----------------------|
| <010> Study Area Code | 341017 |
| <015> Study Area Name | GLASPORD TEL CO |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Mika Petruske |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 0186215212 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | mpetruske@hometel.com |

| | |
|---|---|
| <110> Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing § 54.202(a) "5 year plan" filed with the FCC? | (yes / no) <input type="radio"/> <input checked="" type="radio"/> |
| <111> year plan" filed with the FCC? | (yes / no) <input type="radio"/> <input type="radio"/> |

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

34301711112.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

| | |
|--|-----|
| <113> Maps detailing progress towards meeting plan targets | Yes |
| <114> Report how much universal service (USF) support was received | Yes |
| <115> How much (USF) was used to improve service quality and how support was used to improve service quality | Yes |
| <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage | Yes |
| <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity | Yes |
| <118> Provide an explanation of network improvement targets not met in the prior calendar year. | Yes |

(900) Tribal Lands Reporting Data Collection Form FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 341017
 <015> Study Area Name * GLASFORD TEL CO
 <020> Program Year 2016
 <030> Contact Name - Person USAC should contact regarding this data Mike Petrouke
 <035> Contact Telephone Number - Number of person identified in data line <030> 8156215212 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> mpetrouke@home1.com

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

<920> Tribal Government Engagement Obligation

Name of Attached Document

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

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

| Select Yes or No or Not Applicable |
|--|
| █ |
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(1100) No Terrestrial Backhaul Reporting
Data Collection Form

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

| | | |
|-------|---|-----------------------|
| <010> | Study Area Code | 341017 |
| <015> | Study Area Name | GLASFORD TEL CO |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | MIKE PETROUAK |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 8156215212 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | mpetrouak@hometel.com |

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).

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

[1200] Terms and Condition for Lifeline Customers
Lifeline Data Collection Form

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

| | | |
|-------|---|------------------------|
| <010> | Study Area Code | 341017 |
| <015> | Study Area Name | GLASPORD TEL CO |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Mike Petrouske |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 8156216212 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | mpetrousk@shometel.com |

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

341017111210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP

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

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,
- <1222> Details on the number of minutes provided as part of the plan,
- <1223> Additional charges for toll calls, and rates for each such plan.

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(2000) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 451
 OMB Control No. 3060-0386/OMB Control No. 3060-0819
 July 2013

| | | |
|-------|---|------------------------------|
| <010> | Study Area Code | 391017 |
| <015> | Study Area Name | GLASTONBURY TEL CO |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | MIKE PATROURK |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 8136213212 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | mpatrourk@glastonburytel.com |

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

Incremental Connect America Phase I reporting

<2010> 2nd Year Certification (47 CFR § 54.313(b)(1))

<2011a> 3rd Year Certification (47 CFR § 54.313(b)(1))

<2011b> Attachment (47 CFR § 54.313(b)(1)(i))

Name of Attached Document(s) Listing Required Information

Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))

<2012> 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))

<2013> 2014 Frozen Support Calculation (47 CFR § 54.313(c)(2))

<2014> 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))

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

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

<2016> Certification Support Used to Build Broadband

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

<2017> 3rd year Broadband Service Certification

<2018> 5th year Broadband Service Certification

<2019> Interim Progress Certification

<2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

<2021> Interim Progress Community Anchor Institutions

Name of Attached Document(s) Listing Required Information

| | |
|---|---|
| (3000) Rate Of Return Carrier Additional Documentation Data Collection Form | FCC Form 481 |
| | OMB Control No. 3060-0096/OMB Control No. 3060-0810 |
| | July 2013 |
| | |

| | |
|---|--------------------------|
| <010> Study Area Code | 341037 |
| <015> Study Area Name | GLASFORD TEL CO |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAF should contact regarding this data | Mike Petrouk |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 8156215212 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | mpetrouk@glasfordtel.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). If 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))

341037113010 .pdf

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)(iii))

341037113012 .pdf

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) 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) 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 and audit opinion issued by the independent certified public accountant that performed the company's financial audit

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

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

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

(3024) Underlying information subjected to an officer certification.

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

(3026) Attach the worksheet listing required information

341037113026 .pdf

Name of Attached Document Listing Required Information

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(800) Prev of Person Contact Additional Documentation (Continued)
Data Collection Item: 341017
ECL Form: 431
OMB Control No.: 7060-0987/OMB Control No.: 7062-0419
Rev: 01/13

<010> Study Area Code 341017
<015> Study Area Name CHARWOOD TRL, OH
<020> Program Year 2016
<025> Contact Name - Person USAC Should Contact Regarding the data MIKE PERCOURKE
<030> Contact Telephone Number - Number of Person Identified in data file -030 8158315212 ext.
<035> Contact Email Address - Email Address of Person Identified in data file -035 MIKE.PERCOURKE@honorcd1.com

None of Attached Document Listing Requested Information
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| | |
|--|--|
| Certification - Reporting Carrier | FCC Form 481 |
| Data Collection Form | OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |

| | |
|---|------------------------|
| <010> Study Area Code | 341017 |
| <015> Study Area Name | GLASFORD TEL CO |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Mike Petrouske |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 8156215212 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | mpetrouske@hometel.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: | |
| Signature of Authorized Officer: | Date |
| Printed name of Authorized Officer: | |
| Title or position of Authorized Officer: | |
| Telephone number of Authorized Officer: | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | |

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

| | |
|---|-----------------------|
| <010> Study Area Code | 341017 |
| <015> Study Area Name | GLASFORD TEL CO |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Mike Petruske |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 8156215212 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | mpetruske@homotel.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) <u>Mike Petruske</u> 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: | Mike Petruske |
| Name of Reporting Carrier: | GLASFORD TEL CO |
| Signature of Authorized Officer: | CERTIFIED ONLINE Date: 06/18/2015 |
| Printed name of Authorized Officer: | Duane Goetze |
| Title or position of Authorized Officer: | president |
| Telephone number of Authorized Officer: | 3093892111 ext. |
| Study Area Code of Reporting Carrier: | 341017 Filing Due Date for this form: 07/01/2015 |
| 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: | GLASFORD TEL CO |
| Name of Authorized Agent or Employee of Agent: | Mike Petruske |
| Signature of Authorized Agent or Employee of Agent: | CERTIFIED ONLINE Date: 06/18/2015 |
| Printed name of Authorized Agent or Employee of Agent: | Mike Petruske |
| Title or position of Authorized Agent or Employee of Agent: | Consultant |
| Telephone number of Authorized Agent or Employee of Agent: | 8156215212 ext. |
| Study Area Code of Reporting Carrier: | 341017 Filing Due Date for this form: 07/01/2015 |
| 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
Plan Year 2016 Filing
5-Year Service Quality Improvement Plan
Progress Report for Plan Year 2016

Glasford Telephone Company
SAC 341017

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341017il510.pdf

Glasford Telephone Company (SAC 341017)

FCC Form 481 – Line 510

Program Year – 2016

Service Quality Standards and Consumer Protection Compliance Explanation Document:

The company is in compliance with all Federal and State service quality standards and consumer protection rules.

The Illinois Commerce Commission has defined standards for service quality in its administrative rule parts 730 and 735 for incumbent local exchange carriers. The company is in compliance with these rules. The company has systems in place for customers with regard to service trouble reporting, billing issues questions and complaints, service offerings information, after hours service problem reporting and other customer issues resolution.

The company also complies with all applicable consumer protection rules including the implementation of customer data protection under the Federal Communications Commission's rules for Customer Proprietary Network Information.

Glasford Telephone Company (SAC 341017)

FCC Form 481 – Line 610

Program Year – 2016

Emergency Functionality Explanation Document:

The company maintains emergency backup power for the local distribution plant and central office and transmission facilities that keep the company functional in an emergency which deprives the company equipment of commercial electrical power.

The central office facility is powered with commercial electric power and battery banks that continue power to the office and transmission equipment for a period of 8 hours in the event of a power source outage. The central office is equipped with a Natural Gas powered generator to continue supplying power in the event of a power outage. The company can remain operational in the situation.

The company's customer distribution network transmission equipment, field cabinets & customer pedestal electronics have power backup that will provide 2 hours of service in the event of a commercial power outage.

The company also supplies emergency answering points (call boxes) for emergency personnel in the event of an isolation or emergency situation.

Glasford Tel. Co. (SAC 341017)
FCC Form 481 – Line 1010
Program Year – 2016

Voice Services Rate Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) Glasford Telephone Co. certifies that it is in compliance with the requirement that voice service rates are no more than two standard deviations above the national average urban rate for voice service of \$47.48 as specified in Public Notice DA 15-470 issued on April 16, 2015.

Glasford Telephone Co. current total local end-user rate¹ of \$16.09 (which includes a local fee of \$16.09) is not above the standard deviation as specified in the USF/ICC Transformation Order.²

¹ Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

² USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) "The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average."

Glasford Telephone Co. (SAC 341017)
FCC Form 481 – Line 1210
Program Year – 2016

Terms & Conditions of Voice Telephony Lifeline Program

The Lifeline Program is a federally funded program established to provide monthly assistance to low income households. Eligible subscribers may receive a discount of \$9.25 for the monthly Federal subscriber line charge and voice telephony service, or a bundled service that includes voice telephony service.

To qualify for the program, the Lifeline applicant must participate in any of the following assistance programs. The Illinois Department of Human Services may certify the applicant's participation in assistance programs listed below for purposes of determining eligibility.

- Medicaid
- Supplemental Nutrition Assistance Program
- Supplemental Security Income (SSI)
- Federal Housing Assistance (Section 8)
- Low Income Home Energy Assistance (LIHEAP)
- National School Lunch Program's free lunch program
- Temporary Assistance to Needy Families (TANF)
- Head Start
- Customer household income is at or below 135% of the National Poverty Guidelines, for a household of that size

The Telephone Company's verification of income eligibility will be through the Department of Human Services or, in lieu of electronic verification, applicants will sign a form certifying that the applicant qualifies under the program criteria, and provide program participation or income documentation to the Company for review and verification of eligibility.

The Lifeline program credit shall be limited to one credit per low income household or economic unit.

Lifeline service shall not be disconnected for non-payment of toll charges.

Qualifying low-income subscribers who voluntarily elect toll blocking, where available, will not be required to pay a service deposit in order to initiate Lifeline Service. This service will only be provided at the customer's request.

Qualifying Lifeline customers will not be charged a monthly number-portability charge.

Basic Residential Local Exchange service is available to all Lifeline qualified customers.

Basic Residential Local Exchange Service offers the customer unlimited local calling, emergency service calling (at no additional charge), access to directory assistance service (additional charge per call), equal access to interexchange toll carrier service (additional charges based on carrier toll plans) and access to operator services.

Glasford Telephone Co.

P.O. BOX 169

GLASFORD, ILLINOIS 61533

PHONE 309/389-2111

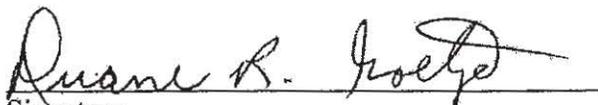
June 15, 2015

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

Ms. Karen Majcher
Vice President – High Cost Low Income Division
Universal Service Administrative Company
2000 L Street NW, Suite 200
Washington, D.C. 20036

RE: WC Docket No. 10-90: Annual Certification Requirements for High-Cost Recipients
§54.313(f)(1)(i).

Pursuant to 47 C.F.R. §54.313(f)(1)(i) of the Federal Communications Commission's rules, the company officer signing below certifies that Glasford Telephone Company is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas as determined in an annual survey, and that requests for such service are met within a reasonable amount of time.


Signature

Duane Goetze
Printed Name of Company Officer

President
Officer Title

June 15, 2015
Date

Glasford Telephone Company (SAC 341017)
FCC Form 481 – Line 3012
Program Year – 2016

Community Anchor Institutions Information in compliance with Section 54.313 (f) (1) (ii) of the Commission's Rules

The company has historically worked with community anchor institutions (such as the schools, libraries, local law enforcement, post office, etc.) to provide broadband service at the required service levels.

In the preceding calendar year (2014), the company did not deploy any new broadband service with any additional community anchor institutions.



MARLETT & ASSOCIATES
C P A S LTD

2131 W. White Oaks Dr. • Suite B-1
Springfield, Illinois 62704

Tel: (217) 679-0904

Fax: (217) 679-0912

Email: dmarlett@twocpas.net

scott@twocpas.net

www.twocpas.net

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Glasford Telephone Company
Glasford, Illinois 61533

| | |
|---|---|
| (3005b) Operating Report for Privately-Held Rate of Return Carriers Income Statement - Data Collection Form Page 2 of 3 | FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013 |
|---|---|

<010> Study Area Code 341017

<015> Study Area Name Glasford Telephone Company

<020> Program Year 2016

<030> Contact Name - Person USAC should contact regarding this data Mike Petrouske

<035> Contact Telephone Number - Number of person identified in data line <030> 815-621-5212

<039> Contact Email Address - Email Address of person identified in data line <030> mpetrouske@hometel.com

| PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS | | |
|---|------------|-----------|
| ITEM | PRIOR YEAR | THIS YEAR |
| 1. Local Network Services Revenues | | |
| 2. Network Access Services Revenues | | |
| 3. Long Distance Network Services Revenues | | |
| 4. Carrier Billing and Collection Revenues | | |
| 5. Miscellaneous Revenues | | |
| 6. Uncollectible Revenues | | |
| 7. Net Operating Revenues (1 thru 5 less 6) | | |
| 8. Plant Specific Operations Expense | | |
| 9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization) | | |
| 10. Depreciation Expense | | |
| 1. Amortization Expense | | |
| 2. Customer Operations Expense | | |
| 3. Corporate Operations Expense | | |
| 4. Total Operating Expenses (8 thru 13) | | |
| 5. Operating Income or Margins (7 less 14) | | |
| 6. Other Operating Income and Expenses | | |
| 7. State and Local Taxes | | |
| 8. Federal Income Taxes | | |
| 9. Other Taxes | | |
| 10. Total Operating Taxes (17+18+19) | | |
| 1. Net Operating Income or Margins (15+16-20) | | |
| 2. Interest on Funded Debt | | |
| 3. Interest Expense - Capital Leases | | |
| 4. Other Interest Expense | | |
| 5. Allowance for Funds Used During Construction | | |
| 6. Total Fixed Charges (22+23+24-25) | | |
| 7. Nonoperating Net Income | | |
| 8. Extraordinary Items | | |
| 9. Jurisdictional Differences | | |
| 10. Nonregulated Net Income | | |
| 1. Total Net Income or margins (21+27+28+29+30-26) | | |
| 2. Total Taxes Based on Income | | |
| 3. Retained Earnings or Margins Beginning-of-Year | | |
| 4. Miscellaneous Credits Year-to-Date | | |
| 5. Dividends Declared (Common) | | |
| 6. Dividends Declared (Preferred) | | |
| 7. Other Debits Year-to-Date | | |
| 8. Transfers to Patronage Capital | | |
| 9. Retained Earnings or Margins end-of-Period [(31+33+34)-(35+36+37+38)] | | |
| 10. Patronage Capital Beginning-of-Year | | |
| 1. Transfers to Patronage Capital | | |
| 2. Patronage Capital Credits Retired | | |
| 3. Patronage Capital End-of-Year (40+41-42) | | |
| 4. Annual Debt Service Payments | | |
| 5. Cash Ratio [(14+20-10-11)/7] | | |
| 6. Operating Accrual Ratio [(14+20+26)/7] | | |
| 7. TIER [(31+26)/26] | | |
| 8. DSCR [(31+26+10+11)/44] | | |

| | |
|--|---|
| (3005c) Operating Report for Privately-Held Rate of Return Carriers Cash Flow - Data Collection Form Page 3 of 3 | FCC Form 481 OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013 |
|--|---|

| | |
|---|----------------------------|
| <010> Study Area Code | 341017 |
| <015> Study Area Name | Glasford Telephone Company |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Mike Petrouske |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 815-621-5212 |
| <039> Contact Email Address - Email Address of person identified in data line <030> | mipetrouske@hometel.com |

| PART C. STATEMENTS OF CASH FLOWS | |
|--|--|
| 1. Beginning Cash (Cash and Equivalents plus RUS Construction Fund) | |
| CASH FLOWS FROM OPERATING ACTIVITIES | |
| 2. Net Income | |
| Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities | |
| 3. Add: Depreciation | |
| 4. Add: Amortization | |
| 5. Other (Explain) | |
| Changes In Operating Assets and Liabilities | |
| 6. Decrease/(Increase) in Accounts Receivable | |
| 7. Decrease/(Increase) in Materials and Inventory | |
| 8. Decrease/(Increase) in Prepayments and Deferred Charges | |
| 9. Decrease/(Increase) in Other Current Assets | |
| 10. Increase/(Decrease) in Accounts Payable | |
| 11. Increase/(Decrease) in Advance Billings & Payments | |
| 12. Increase/(Decrease) in Other Current Liabilities | |
| 13. Net Cash Provided/(Used) by Operations | |
| CASH FLOWS FROM FINANCING ACTIVITIES | |
| 14. Decrease/(Increase) in Notes Receivable | |
| 15. Increase/(Decrease) in Notes Payable | |
| 16. Increase/(Decrease) in Customer Deposits | |
| 17. Net Increase/(Decrease) in Long Term Debt (Including Current Maturities) | |
| 18. Increase/(Decrease) in Other Liabilities & Deferred Credits | |
| 19. Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital | |
| 20. Less: Payment of Dividends | |
| 21. Less: Patronage Capital Credits Retired | |
| 22. Other (Explain) | |
| 23. Net Cash Provided/(Used) by Financing Activities | |
| CASH FLOWS FROM INVESTING ACTIVITIES | |
| 24. Net Capital Expenditures (Property, Plant & Equipment) | |
| 25. Other Long-Term Investments | |
| 26. Other Noncurrent Assets & Jurisdictional Differences | |
| 27. Other (Explain) - Purchase of Temporary Investments, Net | |
| 28. Net Cash Provided/(Used) by Investing Activities | |
| 29. Net Increase/(Decrease) in Cash | |
| 30. Ending Cash | |

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