

<010> Study Area Code	378034
<015> Study Area Name	Pinpoint Wireless, Inc.
<020> Program Year	2015
<030> Contact Name: Person USAC should contact with questions about this data	Lynn Witte
<035> Contact Telephone Number: Number of the person identified in data line <030>	3086973375 ext.
<039> Contact Email: Email of the person identified in data line <030>	lynn.witte@pnpt.com

(check box when complete)

<040> Has the information required pursuant to §54.1009 been provided with a Form 481 filing (Y/N)		<input type="radio"/> <input checked="" type="radio"/>
<041> Attach a description of the documents filed with the Form 481 reporting	<041>	<div style="border: 1px solid black; height: 40px;"></div>
<042> Cite the Study Area Code (SAC) for the Form 481 reporting	<042>	<div style="border: 1px solid black; height: 15px;"></div>
<050> <u>Carrier Contact Information</u> <i>(complete attached worksheet)</i>	<050>	<input checked="" type="checkbox"/>
<060> <u>Coverage and Performance Report</u> <i>(complete attached worksheet)</i>	<060>	<input checked="" type="checkbox"/>
<070> <u>Urban Rate Comparability Certification</u> <i>(complete attached certification)</i>	<070>	<input checked="" type="checkbox"/>
<080> <u>Tribal Lands Reporting (y/n?)</u> <i>(Does this study area cover tribal lands? Yes or No)</i>		<input type="radio"/> <input checked="" type="radio"/>
	<i>(if yes, complete the attached worksheet)</i>	<080> <div style="border: 1px solid black; width: 30px; height: 20px;"></div>
<090> <u>Project Update Information</u> <i>(complete attached worksheet)</i>	<090>	<input checked="" type="checkbox"/>
<100> <u>Certifications</u>		
<101> Reporting Carrier Certification <i>(complete attached certification)</i>	<101>	<input checked="" type="checkbox"/>
<102> Agent Certification <i>(complete attached certification)</i>	<102>	<div style="border: 1px solid black; width: 30px; height: 20px;"></div>

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.

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lynn.witte@pnpt.com

Reporting Carrier / Mobility Fund Phase 1 Winning Bidder

<110>	FCC Registration Number	0002377901
<111>	Filing Carrier Name	Pinpoint Wireless, Inc.
<112>	Winning Bidder Carrier Name	Pinpoint Wireless, Inc.
<113>	Street Address (or PO Box)	611 Patterson St.
<114>	City	Cambridge
<115>	State	NE
<116>	Zip-Code	69022
<117>	Telephone Number	3086973375 ext.
<118>	Fax Number	3086973631
<119>	Email Address	lynn.witte@pnpt.com

Contact Information

if same as above, indicate in this box



<120>	Name (First, MI, Last, Suffix)	Lynn Witte
<121>	Filing Carrier Name	Pinpoint Wireless, Inc.
<122>	Street Address (or PO Box)	611 Patterson St.
<123>	City	Cambridge
<124>	State	NE
<125>	Zip-Code	69022
<126>	Telephone Number	3086973375 ext.
<127>	Fax Number	3086973631
<128>	Email Address	lynn.witte@pnpt.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	

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<140>	Coverage and Performance Report Year	07/2014 - 12/2014

Coverage and Performance attachments

378034_CPRd_Broadband_and_Voice_NE.zip, 378034_CPRE_DriveTest_NE.zip, 378034_CPRE_PropagationStudy_NE.zip

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

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

99

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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:	Pinpoint Wireless, Inc.
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	J Thomas Shoemaker
Title or position of Authorized Officer:	Executive Vice President
Telephone number of Authorized Officer:	3086973375 ext.
Study Area Code of Reporting Carrier:	378034
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 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 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:	
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:

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

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<200>	Date Authorized to Receive Support	06/07/2013
<201>	Targeted Completion Date	09/30/2015
<202>	Total Mobility Fund Support Awarded	270177.39
<203>	Total Mobility Fund Support Disbursed	90059.13

<210> Actual Completion Date

<211> Project Status Description (attached)
{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 checked="" type="checkbox"/>
<216>	Project Budget Status	<input checked="" type="checkbox"/>
<217>	Project Plan Status	<input checked="" type="checkbox"/>

<218> Certify Network will Support 3G/4G Mobile Service (Yes / No)

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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: Pinpoint Wireless, Inc.

Signature of Authorized Officer: _____ Date

Printed name of Authorized Officer: J Thomas Shoemaker

Title or position of Authorized Officer: Executive Vice President

Telephone number of Authorized Officer: 3086973375 ext.

Study Area Code of Reporting Carrier: 378034 Filing Due Date for this form: 07/01/2015

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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	
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 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:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
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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	07/2014 - 12/2014

<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	Furnas	310659639002735	0	0	0	0.95	0.88	0.88	Yes
NE	Furnas	310659639002454	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002727	0	0	0	0.02	0.02	0.02	Yes
NE	Furnas	310659639002749	0	0	0	0.6	0.6	0.6	Yes
NE	Furnas	310659639002619	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002595	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639006192	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002587	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002264	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002646	0	0	0	0.06	0.06	0.06	Yes
NE	Furnas	310659639002698	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002546	0	0	0	0.36	0.36	0.36	Yes
NE	Furnas	310659639002697	0	0	0	0.18	0.15	0.15	Yes
NE	Furnas	310659639002746	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002303	0	0	0	0.77	0.77	0.77	Yes
NE	Furnas	310659639002532	0	0	0	0.67	0.67	0.67	Yes
NE	Furnas	310659639002566	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002762	0	0	0	0.32	0.32	0.32	Yes
NE	Furnas	310659639002780	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002647	0	0	0	0.06	0.06	0.06	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

99

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<140>	Coverage and Performance Report Year	07/2014 - 12/2014

<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	Furnas	310659639002625	0	0	0	0.21	0.21	0.21	Yes
NE	Furnas	310659639002565	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002568	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002424	0	0	0	0.68	0.68	0.68	Yes
NE	Furnas	310659639002672	0	0	0	0.86	0.86	0.86	Yes
NE	Furnas	310659639002208	0	0	0	0.53	0.53	0.53	Yes
NE	Furnas	310659639002220	0	0	0	0.08	0.08	0.08	Yes
NE	Furnas	310659639002732	0	0	0	0.83	0.83	0.83	Yes
NE	Furnas	310659639002614	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002645	0	0	0	0.06	0.06	0.06	Yes
NE	Furnas	310659639002221	0	0	0	0.27	0.27	0.27	Yes
NE	Furnas	310659639002534	0	0	0	0.78	0.78	0.78	Yes
NE	Furnas	310659639002274	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002237	0	0	0	0.2	0.2	0.2	Yes
NE	Furnas	310659639002593	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002648	0	0	0	0.21	0.21	0.21	Yes
NE	Furnas	310659639002767	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639006196	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639006188	0	0	0	0.67	0.66	0.66	Yes
NE	Furnas	310659639002573	0	0	0	0.1	0.1	0.1	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

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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	Furnas	310659639002792	0	0	0	0.01	0.01	0.01	Yes
NE	Furnas	310659639002759	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002603	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002738	0	0	0	0.06	0.06	0.06	Yes
NE	Furnas	310659639002631	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002578	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002575	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002597	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002600	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002253	0	0	0	0.43	0.43	0.43	Yes
NE	Furnas	310659639002520	0	0	0	0.56	0.56	0.56	Yes
NE	Furnas	310659639002599	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002569	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002460	0	0	0	2.02	1.86	1.86	Yes
NE	Furnas	310659639002265	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002741	0	0	0	0.52	0.37	0.37	Yes
NE	Furnas	310659639002612	0	0	0	0.29	0.29	0.29	Yes
NE	Furnas	310659639002240	0	0	0	0.76	0.76	0.76	Yes
NE	Furnas	310659639002447	0	0	0	0.28	0.28	0.28	Yes
NE	Furnas	310659639002251	0	0	0	0.13	0.13	0.13	Yes

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NE	Furnas	310659639002247	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002659	0	0	0	0.22	0.22	0.22	Yes
NE	Furnas	310659639002239	0	0	0	0.26	0.26	0.26	Yes
NE	Furnas	310659639002616	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002267	0	0	0	0.16	0.16	0.16	Yes
NE	Furnas	310659639002269	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002576	0	0	0	0.16	0.16	0.16	Yes
NE	Furnas	310659639002189	0	0	0	0.08	0.08	0.08	Yes
NE	Furnas	310659639002783	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002570	0	0	0	0.33	0.33	0.33	Yes
NE	Furnas	310659639002643	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002786	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002795	0	0	0	0.03	0.03	0.03	Yes
NE	Furnas	310659639002596	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002470	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002266	0	0	0	0.18	0.18	0.18	Yes
NE	Furnas	310659639002650	0	0	0	0.02	0.02	0.02	Yes
NE	Furnas	310659639002426	0	0	0	1.52	1.36	1.36	Yes
NE	Furnas	310659639002638	0	0	0	0.21	0.21	0.21	Yes
NE	Furnas	310659639006189	0	0	0	0.07	0.07	0.07	Yes

Percentage of Total Population Reached by Service

0

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	378034
<015>	Study Area Name	Pinpoint Wireless, Inc.
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Lynn Witte
<035>	Contact Telephone Number - Number of person identified in data line <030>	3086973375 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lynn.witte@pnpt.com
<140>	Coverage and Performance Report Year	07/2014 - 12/2014

<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	Furnas	310659639002630	0	0	0	0.62	0.62	0.62	Yes
NE	Furnas	310659639002588	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002246	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002241	0	0	0	0.24	0.24	0.24	Yes
NE	Furnas	310659639002242	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002263	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002459	0	0	0	1.41	1.41	1.41	Yes
NE	Furnas	310659639002567	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002598	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002198	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002602	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002252	0	0	0	0.05	0.05	0.05	Yes
NE	Furnas	310659639002262	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002458	0	0	0	0.01	0.01	0.01	Yes
NE	Furnas	310659639002608	0	0	0	0.16	0.16	0.16	Yes
NE	Furnas	310659639002781	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639006286	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002804	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002632	0	0	0	0.18	0.18	0.18	Yes
NE	Furnas	310659639002748	0	0	0	0.07	0.07	0.07	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lynn.witte@pnpt.com
<140>	Coverage and Performance Report Year	07/2014 - 12/2014

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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	Furnas	310659639002651	0	0	0	0.05	0.05	0.05	Yes
NE	Furnas	310659639002673	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002611	0	0	0	0.35	0.35	0.35	Yes
NE	Furnas	310659639002636	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002770	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002618	0	0	0	0.15	0.15	0.15	Yes
NE	Furnas	310659639002275	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002581	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002605	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002740	0	0	0	0.63	0.63	0.63	Yes
NE	Furnas	310659639002457	0	0	0	1.59	1.59	1.59	Yes
NE	Furnas	310659639002224	0	0	0	0.3	0.3	0.3	Yes
NE	Furnas	310659639002464	0	0	0	0.33	0.33	0.33	Yes
NE	Furnas	310659639002733	0	0	0	0.39	0.39	0.39	Yes
NE	Furnas	310659639002234	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002785	0	0	0	0.03	0.03	0.03	Yes
NE	Furnas	310659639002574	0	0	0	0.16	0.16	0.16	Yes
NE	Furnas	310659639002637	0	0	0	0.06	0.06	0.06	Yes
NE	Furnas	310659639002739	0	0	0	0.29	0.29	0.29	Yes
NE	Furnas	310659639002613	0	0	0	0.02	0.02	0.02	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

99

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lynn.witte@pnpt.com
<140>	Coverage and Performance Report Year	07/2014 - 12/2014

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NE	Furnas	310659639002580	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002677	0	0	0	0.22	0.22	0.22	Yes
NE	Furnas	310659639002628	0	0	0	0.36	0.36	0.36	Yes
NE	Furnas	310659639002590	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002244	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002779	0	0	0	0.03	0.03	0.03	Yes
NE	Furnas	310659639002541	0	0	0	0.25	0.25	0.25	Yes
NE	Furnas	310659639006157	0	0	0	0.99	0.99	0.99	Yes
NE	Furnas	310659639002571	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002563	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002302	0	0	0	0.18	0.18	0.18	Yes
NE	Furnas	310659639002734	0	0	0	0.76	0.69	0.69	Yes
NE	Furnas	310659639002248	0	0	0	0.29	0.29	0.29	Yes
NE	Furnas	310659639002562	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002652	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002641	0	0	0	0.15	0.15	0.15	Yes
NE	Furnas	310659639002270	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002271	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002250	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639006199	0	0	0	0.07	0.07	0.07	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

99

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lynn.witte@pnpt.com
<140>	Coverage and Performance Report Year	07/2014 - 12/2014

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NE	Furnas	310659639002761	0	0	0	0.81	0.81	0.81	Yes
NE	Furnas	310659639002640	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002583	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002268	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002516	0	0	0	0.96	0.96	0.96	Yes
NE	Furnas	310659639002617	0	0	0	0.16	0.16	0.16	Yes
NE	Furnas	310659639002245	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002592	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002586	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002243	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002235	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002545	0	0	0	0.25	0.25	0.25	Yes
NE	Furnas	310659639002737	0	0	0	0.24	0.24	0.24	Yes
NE	Furnas	310659639002547	0	0	0	0.33	0.33	0.33	Yes
NE	Furnas	310659639002278	0	0	0	0.57	0.57	0.57	Yes
NE	Furnas	310659639002649	0	0	0	0.02	0.02	0.02	Yes
NE	Furnas	310659639002448	0	0	0	1.34	1.34	1.34	Yes
NE	Furnas	310659639002183	0	0	0	0.05	0.05	0.05	Yes
NE	Furnas	310659639006200	0	0	0	0.06	0.06	0.06	Yes
NE	Furnas	310659639002445	0	0	0	0.03	0.03	0.03	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

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<039>	Contact Email Address - Email Address of person identified in data line <030>	lynn.witte@pnpt.com
<140>	Coverage and Performance Report Year	07/2014 - 12/2014

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<c1>	<c2>	<c3>	<d>
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NE	Furnas	310659639002627	0	0	0	0.16	0.16	0.16	Yes
NE	Furnas	310659639002169	0	0	0	0.01	0.01	0.01	Yes
NE	Furnas	310659639002238	0	0	0	0.62	0.62	0.62	Yes
NE	Furnas	310659639002524	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002654	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002675	0	0	0	0.85	0.85	0.85	Yes
NE	Furnas	310659639002699	0	0	0	0.18	0.18	0.18	Yes
NE	Furnas	310659639002620	0	0	0	0.86	0.86	0.86	Yes
NE	Furnas	310659639002236	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002784	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002517	0	0	0	0.03	0.03	0.03	Yes
NE	Furnas	310659639002674	0	0	0	0.6	0.6	0.6	Yes
NE	Furnas	310659639002760	0	0	0	0.29	0.29	0.29	Yes
NE	Furnas	310659639002462	0	0	0	0.75	0.75	0.75	Yes
NE	Furnas	310659639002449	0	0	0	0.27	0.27	0.27	Yes
NE	Furnas	310659639002635	0	0	0	0.11	0.11	0.11	Yes
NE	Furnas	310659639002415	0	0	0	0.31	0.31	0.31	Yes
NE	Furnas	310659639002601	0	0	0	0.13	0.13	0.13	Yes
NE	Furnas	310659639002589	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002639	0	0	0	0.14	0.14	0.14	Yes

Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

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NE	Furnas	310659639002604	0	0	0	0.08	0.08	0.08	Yes
NE	Furnas	310659639002655	0	0	0	0.04	0.04	0.04	Yes
NE	Furnas	310659639002249	0	0	0	0.24	0.24	0.24	Yes
NE	Furnas	310659639002279	0	0	0	0.7	0.7	0.7	Yes
NE	Furnas	310659639002769	0	0	0	0.2	0.2	0.2	Yes
NE	Furnas	310659639002607	0	0	0	0.24	0.24	0.24	Yes
NE	Furnas	310659639002579	0	0	0	0.12	0.12	0.12	Yes
NE	Furnas	310659639002584	0	0	0	0.3	0.3	0.3	Yes
NE	Furnas	310659639002594	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002615	0	0	0	0.14	0.14	0.14	Yes
NE	Furnas	310659639002736	0	0	0	0.96	0.96	0.96	Yes
NE	Furnas	310659639006283	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002456	0	0	0	0.76	0.76	0.76	Yes
NE	Furnas	310659639002582	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002444	0	0	0	1.16	1.16	1.16	Yes
NE	Furnas	310659639002292	0	0	0	0.17	0.17	0.17	Yes
NE	Furnas	310659639002585	0	0	0	0.03	0.03	0.03	Yes
NE	Furnas	310659639002446	0	0	0	0.87	0.87	0.87	Yes
NE	Furnas	310659639002644	0	0	0	0.39	0.39	0.39	Yes
NE	Furnas	310659639002653	0	0	0	0.09	0.09	0.09	Yes

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NE	Furnas	310659639002591	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002543	0	0	0	0.34	0.34	0.34	Yes
NE	Furnas	310659639002466	0	0	0	1.81	1.75	1.75	Yes
NE	Furnas	310659639002465	0	0	0	0.29	0.29	0.29	Yes
NE	Furnas	310659639006191	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002564	0	0	0	0.09	0.09	0.09	Yes
NE	Furnas	310659639002606	0	0	0	0.03	0.03	0.03	Yes
NE	Furnas	310659639002560	0	0	0	0.1	0.1	0.1	Yes
NE	Furnas	310659639002763	0	0	0	0.83	0.8	0.8	Yes
NE	Furnas	310659639002297	0	0	0	0.07	0.07	0.07	Yes
NE	Furnas	310659639002425	0	0	0	0.39	0.39	0.39	Yes
NE	Furnas	310659639002467	0	0	0	0.07	0.07	0.07	Yes
NE	Furnas	310659639002561	0	0	0	0.21	0.21	0.21	Yes
NE	Furnas	310659639002523	0	0	0	1.7	1.7	1.7	Yes

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