

REDACTED - FOR PUBLIC INSPECTION

Rate Floor Data

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - Contact Information

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	351096
2	Carrier Study Area Name	alpha characters	Heartland Telecommunications Company of Iowa
3	Service Provider Identification Number	9 numeric digits	143002730
4	Residential Local Service Charge Effective Date	mm/dd/yyyy	6/1/2015
5	Contact Name	alpha characters	Jim DeLoss
6	Contact Telephone Number (include area code)	9 numeric digits	9365217737
7	Sheet number	numeric digit(s)	1
8	Total Number of Sheets	numeric digit(s)	1

Block 2 - Residential Local Service Rates, Fees, and Line Counts

	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	
9	\$ 17.00	\$ -	\$ -	\$ -		Annual
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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:

<p>Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data</p>			
<p>I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.</p>			
<p>Name of Reporting Carrier Heartland Telecommunications Company of Iowa</p>			
<p>Signature of authorized officer </p>			<p>07/01/2015</p>
<p>Printed name of authorized officer Michael Shultz</p>			
<p>Title or position of authorized officer VP Legislative and Regulatory Affairs</p>			
<p>Telephone number of authorized officer: (936) 788 - 7414, ext.</p>			
<p>Study Area Code of Reporting Carrier</p>	<p>351096</p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>07/01/2015</p>