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EUGENE MALISZEWSKYJ  
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

ACCEPTED/FILED

JUN 30 2015

Federal Communications Commission  
Office of the Secretary

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

**RE: Form 481 - Carrier Annual Reporting Data Collection Form  
WC Docket No. 14-58  
Leonore Mutual Telephone Company (SAC 341046)**

Dear Ms. Dortch:

Pursuant to sections 54.313(i) and 54.422(c) of the Commission's Rules and the Commission's *Protective Order*<sup>1</sup> in this proceeding, Leonore Mutual 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.

No. of Copies rec'd 041  
List ABCDE

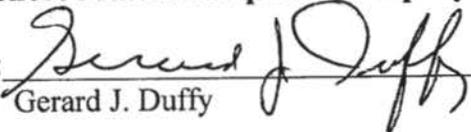
<sup>1</sup> *In the Matter of Connect America Fund, et al.*, PROTECTIVE ORDER, WC Docket No. 10-90, et al., DA 15-712, released June 17, 2015.

**REDACTED – FOR PUBLIC INSPECTION**

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,  
**Leonore Mutual Telephone Company**

By:   
Gerard J. Duffy

Its Attorney

LAW OFFICES  
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June 29, 2015

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WRITER'S CONTACT INFORMATION

(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

ACCEPTED/FILED

JUN 30 2015

Federal Communications Commission  
Office of the Secretary

**RE: Rule Section 0.459 Request for Confidential Treatment  
Leonore Mutual Telephone Company (SAC 341046)  
WC Docket No. 14-58  
FCC Form 481 – Carrier Annual Reporting Data Collection Form**

Dear Ms. Dortch:

Leonore Mutual 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.

**REDACTED – FOR PUBLIC INSPECTION**

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.

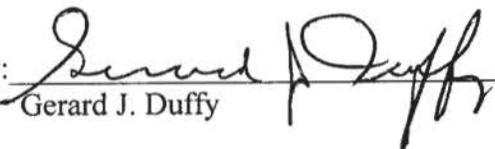
7. The Company does not make its 5-year service improvement plan or progress reports available to the public, and has not previously disclosed its plan or reports to third parties.

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.

**REDACTED – FOR PUBLIC INSPECTION**

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,  
**Leonore Mutual Telephone Company**

By:   
Gerard J. Duffy

Its Attorney

<010> Study Area Code 341046  
 <015> Study Area Name LEONORE MUTUAL TEL  
 <020> Program Year 2016  
 <030> Contact Name: Person USAC should contact with questions about this data Mike Petrouske  
 <035> Contact Telephone Number: 8156215212 ext. Number of the person identified in data line <030>  
 <039> Contact Email Address: Email of the person identified in data line <030> mpetrouske@hometel.com

ACCEPTED/FILED

JUN 30 2015

Federal Communications Commission  
 Office of the Secretary

ANNUAL REPORTING FOR ALL CARRIERS

	\$4,313 Completion Required	\$4,422 Completion Required
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			(check box when complete)	
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<200>	Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210>	<input type="text" value="0"/> ← check box if no outages to report		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<300>	Unfulfilled Service Requests (voice)	<input type="text" value="0"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<310>	Detail on Attempts (voice)	<input type="text" value=""/> (attach descriptive document)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<320>	Unfulfilled Service Requests (broadband)	<input type="text" value="1"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<330>	Detail on Attempts (broadband)	<input type="text" value="34104611330.pdf"/> (attach descriptive document)	<input checked="" type="checkbox"/>	<input checked="" 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"/>	<input checked="" type="checkbox"/>
<440>	Fixed	<input type="text" value="0.0"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<450>	Mobile	<input type="text" value="0.0"/>	<input checked="" type="checkbox"/>	<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="34104611510.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="34104611610.pdf"/> (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700>	Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<710>	Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<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)?	(if yes, complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<1000>	Voice Services Rate Comparability Certification	<input type="text" value="Yes"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<1010>	<input type="text" value="341046111010.pdf"/> (attach descriptive document)		<input checked="" type="checkbox"/>	<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"/>	<input checked="" type="checkbox"/>
<1110>		(complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<1200>	Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input checked="" 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)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

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

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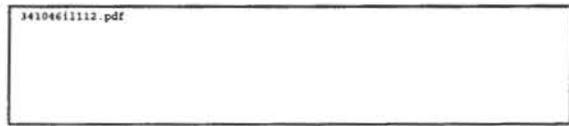
**(100) Service Quality Improvement Reporting Data Collection Form** FCC Form 481  
OMB Control No. 3060-0986/OMB Control No. 3060-0819  
July 2013

<010> Study Area Code 341046  
 <015> Study Area Name LEONORE MUTUAL TEL  
 <020> Program Year 2016  
 <030> Contact Name - Person USAC should contact regarding this data Mike Petroucke  
 <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> mpetroucke@home1.com

<110> Has your company received its ETC certification from the FCC? (yes / no)    
 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)

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.



34104611112.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
- <114> Report how much universal service (USF) support was received
- <115> How much (USF) was used to improve service quality and how support was used to improve service quality
- <116> How much (USF) was used to improve service coverage and how support was used to improve service coverage
- <117> How much (USF) was used to improve service capacity and how support was used to improve service capacity
- <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. 3060-0935 / OMB Control No. 3040-0819  
July 2013

<010> Study Area Code 341046  
 <015> Study Area Name LEONORE MUTUAL TEL  
 <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

REDACTED – FOR PUBLIC INSPECTION

(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	343046
<015> Study Area Name	LEONORE MUTUAL TEL
<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@comcast.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	341046
<015> Study Area Name	LEONORE MUTUAL TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Mike Petrouake
<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>	mpetrouake@hometel.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

341046111210.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.

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

FCC Form 342  
 OMB Control No. 3060-0945/OMB Control No. 3045-0018  
 July 2013

<010> Study Area Code 24104  
 <015> Study Area Name GEORGE MOTAL TEL  
 <020> Program Year 2015  
 <030> Contact Name - Person USAC should contact regarding this data MIKE PRYORUSKE  
 <035> Contact Telephone Number - Number of person identified in data line <030> 813219212 ext.  
 <039> Contact Email Address - Email Address of person identified in data line <030> mpryoruske@state1.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)i)
- <2011a> 3rd Year Certification (47 CFR § 54.313(b)(1)ii)
- <2011b> Attachment (47 CFR § 54.313(b)(1)ii)

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.

Name of Attached Document(s) Listing Required Information

- <2021> Interim Progress Community Anchor Institutions

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 483 OMB Control No. 3060-0086/OMB Control No. 3060-0019 July 2013
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<D10> Study Area Code	141046
<D15> Study Area Name	LEONORR MUTUAL TEL
<D20> Program Year	2016
<D30> Contact Name - Person USAC should contact regarding this data	Mike Petrouake
<D35> Contact Telephone Number - Number of person identified in data line <D30>	8156215212_ext
<D39> Contact Email Address - Email Address of person identified in data line <D30>	mikepetrouake@comcast.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(s)) 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))

341046113010.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)(ii))

341046113012.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

[Redacted]

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

341046113026.pdf

Name of Attached Document Listing Required Information

(3026) Attach the worksheet listing required information

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(3000) Rate Of Return Carrier Additional Documentation (Continued) Data Collection Form	FCC Form 431 OMB Control No. 3060-0286/OMB Control No. 3060-0823 July 2013
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<010> Study Area Code	341046
<015> Study Area Name	LEONORE MUTUAL TEL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Nike Patrouche
<035> Contact Telephone Number - Number of person identified in data line <030>	816215212 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	np@cowhousetele.com

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	341046
<015> Study Area Name	LEONORE MUTUAL TEL
<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@hometel.com

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

<b>Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients</b>	
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
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<010> Study Area Code	341046
<015> Study Area Name	LEONORE MUTUAL TEL
<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 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 Petrouske</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 Petrouske
Name of Reporting Carrier:	LEONORE MUTUAL TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 06/29/2015
Printed name of Authorized Officer:	Gary Naas
Title or position of Authorized Officer:	Vice President
Telephone number of Authorized Officer:	8158563164 ext.
Study Area Code of Reporting Carrier:	341046 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:	LEONORE MUTUAL TEL
Name of Authorized Agent or Employee of Agent:	Mike Petrouske
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 06/29/2015
Printed name of Authorized Agent or Employee of Agent:	Mike Petrouske
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:	341046 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 2015

REDACTED – FOR PUBLIC INSPECTION

REDACTED – FOR PUBLIC INSPECTION

REDACTED – FOR PUBLIC INSPECTION

341046il330.pdf

Leonore Mutual Telephone Company (SAC 341046)  
FCC Form 481 – Line 330  
Program Year – 2016

Explanation of unfulfilled broadband access request

341046il510.pdf

Leonore Mutual Telephone Company (SAC 341046)  
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.

341046il610.pdf

Leonore Mutual Telephone Company (SAC 341046)

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 hours in the event of a power source outage. The central office is equipped with a Natural Gas powered generator with a fuel capacity of unlimited hours of generation capacity 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 unlimited hours of service in the event of a commercial power outage.

The company has additional route capacity to keep emergency service (911 service) available in the event of an emergency situation. The company also supplies emergency answering points Knox call boxes for emergency personnel in the event of an isolation or emergency situation.

341046il1010.pdf

Leonore Mutual Tel. Co. (SAC 341046)  
FCC Form 481 – Line 1010  
Program Year – 2016

Voice Services Rate Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10 ) Leonore Mutual 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.

Leonore Mutual Telephone Co. current total local end-user rate<sup>1</sup> of \$11.43 (which includes a local fee of \$11.43) is not above the standard deviation as specified in the USF/ICC Transformation Order.<sup>2</sup>

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

<sup>2</sup> 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."

Leonore Mutual Telephone Co. (SAC 341046)  
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.



LEONORE MUTUAL  
TELEPHONE COMPANY

P.O. Box 228  
Leonore, IL 61332  
815-856-3164  
815-856-2963 Fax  
LMTC@LMTC.NET

June 15, 2015

Ms. Marlene H. Dortch  
Office of the Secretary  
Federal Communications Commission  
445 12<sup>th</sup> 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 Leonore Mutual 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

Donna Naas  
\_\_\_\_\_  
Printed Name of Company Officer

Assistant Secretary  
\_\_\_\_\_  
Officer Title

June 15, 2015  
\_\_\_\_\_  
Date

341046il3012.pdf

Leonore Mutual Telephone Company (SAC 341046)  
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.



LEONORE MUTUAL  
TELEPHONE COMPANY  
P.O. Box 228  
Leonore, IL 61332  
815-856-3164  
815-856-2963 Fax  
LMTC@LMTC.NET

### SECTION 54.313(f)(2)(iii) OFFICER CERTIFICATION

Pursuant to Section 54.313(f)(2)(iii) of the FCC Rules, I, Donna Naas, hereby certify the following under penalty of perjury:

1. I am the Assistant Secretary of Leonore Mutual Telephone Company (the "Carrier"; Study Area Code 341046), and am authorized to make this certification on its behalf.
2. The Carrier was not audited in the ordinary course of business for the preceding fiscal year.
3. The reported data in the accompanying financial statements of the Carrier are accurate.
4. The accompanying financial statements of the Carrier have been subject to review by Marlett & Associates, CPAs Ltd., an independent certified public accountant.

Signature

Donna Naas  
Printed Name

June 25, 2015  
Date



MARLETT & ASSOCIATES  
C P A S LTD

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

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**INDEPENDENT ACCOUNTANT'S REVIEW REPORT**

Tel: (217) 679-0904  
Fax: (217) 679-0912  
Email: dmarlett@twocpas.net  
scott@twocpas.net  
[www.twocpas.net](http://www.twocpas.net)

<b>(3005a) Operating Report for Privately-Held Rate of Return Carriers</b> Balance Sheet - Data Collection Form Page 1 of 3	FCC Form 481 OMB Control No. 3060-0088 OMB Control No. 3060-0819 July 2013
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<b>&lt;010&gt; Study Area Code</b>	341046
<b>&lt;015&gt; Study Area Name</b>	Leonore Mutual Telephone Company
<b>&lt;020&gt; Program Year</b>	2016
<b>&lt;030&gt; Contact Name - Person USAC should contact regarding this data</b>	Mike Petroušek
<b>&lt;035&gt; Contact Telephone Number - Number of person identified in data line &lt;030&gt;</b>	815-621-5212
<b>&lt;039&gt; Contact Email Address - Email Address of person identified in data line &lt;030&gt;</b>	m.petrousek@lhmotel.com

Filed as reviewed single company <input type="checkbox"/> Filed as reviewed consolidated company <input checked="" type="checkbox"/> Filed as subsidiary of reviewed consolidated company <input type="checkbox"/>	Filed as audited single company <input type="checkbox"/> Filed as audited consolidated company <input type="checkbox"/> Filed as subsidiary of audited consolidated company <input type="checkbox"/>
--	--

**CERTIFICATION**

We hereby certify that the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief.

6-29-15  
 Signature Date

PART A. BALANCE SHEET		BALANCE PRIOR YEAR	BALANCE END OF PERIOD
<b>ASSETS</b>			
<b>CURRENT ASSETS</b>	<b>LIABILITIES AND STOCKHOLDERS' EQUITY</b>		
1. Cash and Equivalents	<b>CURRENT LIABILITIES</b>		
2. Cash-RUS Construction Fund	25. Accounts Payable		
3. Affiliates:	26. Notes Payable		
a. Telecom, Accounts Receivable	27. Advance Billings and Payments		
b. Other Accounts Receivable	28. Customer Deposits		
c. Notes Receivable	29. Current Mat. L/T Debt		
4. Non-Affiliates:	30. Current Mat. L/T Debt-Rur. Dev.		
a. Telecom, Accounts Receivable	31. Current Mat.-Capital Leases		
b. Other Accounts Receivable	32. Income Taxes Accrued		
c. Notes Receivable	33. Other Taxes Accrued		
5. Interest and Dividends Receivable	34. Other Current Liabilities		
6. Material-Regulated	35. Total Current Liabilities (25 thru 34)		
7. Material-Nonregulated	<b>LONG-TERM DEBT</b>		
8. Prepayments	36. Funded Debt-RUS Notes		
9. Other Current Assets - Temporary Investments	37. Funded Debt-RTB Notes		
10. Total Current Assets (1 Thru 9)	38. Funded Debt-FFB Notes		
	39. Funded Debt-Other		
<b>NONCURRENT ASSETS</b>	40. Funded Debt-Rural Develop. Loan		
1. Investment in Affiliated Companies	41. Premium (Discount) on L/T Debt		
a. Rural Development	42. Recacquired Debt		
b. Nonrural Development	43. Obligations Under Capital Lease		
2. Other Investments	44. Adv. From Affiliated Companies		
a. Rural Development	45. Other Long-Term Debt		
b. Nonrural Development	46. Total Long-Term Debt (36 thru 45)		
3. Nonregulated Investments	<b>OTHER LIAB. &amp; DEF. CREDITS</b>		
4. Other Noncurrent Assets	47. Other Long-Term Liabilities		
5. Deferred Charges	48. Other Deferred Credits - Deferred Income Taxes		
6. Jurisdictional Differences	49. Other Jurisdictional Differences		
7. Total Noncurrent Assets (11 thru 16)	50. Total Other Liabilities and Deferred Credits (47 thru 49)		
	<b>EQUITY</b>		
<b>PLANT, PROPERTY, AND EQUIPMENT</b>	51. Cap. Stock Outstanding & Subscribed		
8. Telecom, Plant-in-Service	52. Additional Paid-in-Capital		
9. Property Held for Future Use	53. Treasury Stock		
10. Plant Under Construction	54. Membership and Cap. Certificates		
1. Plant Adj., Nonop. Plant & Goodwill	55. Other Capital		
2. Less Accumulated Depreciation	56. Patronage Capital Credits		
3. Net Plant (18 thru 21 less 22)	57. Retained Earnings or Margins		
	58. Total Equity (51 thru 57)		
<b>A. TOTAL ASSETS (10+17+23)</b>	<b>59. TOTAL LIABILITIES AND EQUITY (35+46+50+58)</b>		

(3005a) Operating Report for Privately-Held Rate of Return Carriers

FCC Form 481

Balance Sheet - Data Collection Form

OAS Control No. 3050-0995

OAS Control No. 3050-0819

Page 1 of 3

July 2013

<010> Study Area Code 341046  
 <015> Study Area Name Leonore Mutual 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

Filed as reviewed single company   
 Filed as reviewed consolidated company   
 Filed as subsidiary of reviewed consolidated company

Filed as audited single company   
 Filed as audited consolidated company   
 Filed as subsidiary of audited consolidated company

CERTIFICATION

We hereby certify that the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief.

Signature \_\_\_\_\_

Date \_\_\_\_\_

PART A. BALANCE SHEET

ASSETS	BALANCE PRIOR YEAR	BALANCE END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY	BALANCE PRIOR YEAR	BALANCE END OF PERIOD
<b>CURRENT ASSETS</b>			<b>CURRENT LIABILITIES</b>		
1. Cash and Equivalents			25. Accounts Payable		
2. Cash-RUS Construction Fund			26. Notes Payable		
3. Affiliates:			27. Advance Billings and Payments		
a. Telecom, Accounts Receivable			28. Customer Deposits		
b. Other Accounts Receivable			29. Current Mat. L/T Debt		
c. Notes Receivable			30. Current Mat. L/T Debt-Rur. Dev.		
4. Non-Affiliates:			31. Current Mat.-Capital Leases		
a. Telecom, Accounts Receivable			32. Income Taxes Accrued		
b. Other Accounts Receivable			33. Other Taxes Accrued		
c. Notes Receivable			34. Other Current Liabilities		
5. Interest and Dividends Receivable			35. Total Current Liabilities (25 thru 34)		
6. Material-Regulated			<b>LONG-TERM DEBT</b>		
7. Material-Nonregulated			36. Funded Debt-RUS Notes		
8. Prepayments			37. Funded Debt-RTB Notes		
9. Other Current Assets - Temporary Investments			38. Funded Debt-FFB Notes		
0. Total Current Assets (1 Thru 9)			39. Funded Debt-Other		
			40. Funded Debt-Rural Develop. Loan		
<b>NONCURRENT ASSETS</b>			41. Premium (Discount) on L/T Debt		
1. Investment in Affiliated Companies			42. Reacquired Debt		
a. Rural Development			43. Obligations Under Capital Lease		
b. Nonrural Development			44. Adv. From Affiliated Companies		
2. Other Investments			45. Other Long-Term Debt		
a. Rural Development			46. Total Long-Term Debt (36 thru 45)		
b. Nonrural Development			<b>OTHER LIAB. &amp; DEF. CREDITS</b>		
3. Nonregulated Investments			47. Other Long-Term Liabilities		
4. Other Noncurrent Assets			48. Other Deferred Credits - Deferred Income Taxes		
5. Deferred Charges			49. Other Jurisdictional Differences		
6. Jurisdictional Differences			50. Total Other Liabilities and Deferred Credits (47 thru 49)		
7. Total Noncurrent Assets (11 thru 16)			<b>EQUITY</b>		
			51. Cap. Stock Outstanding & Subscribed		
<b>PLANT, PROPERTY, AND EQUIPMENT</b>			52. Additional Paid-in-Capital		
8. Telecom, Plant-in-Service			53. Treasury Stock		
9. Property Held for Future Use			54. Membership and Cap. Certificates		
0. Plant Under Construction			55. Other Capital		
1. Plant Adj., Nonop. Plant & Goodwill			56. Patronage Capital Credits		
2. Less Accumulated Depreciation			57. Retained Earnings or Margins		
3. Net Plant (18 thru 21 less 22)			58. Total Equity (51 thru 57)		
4. TOTAL ASSETS (10+17+23)			59. TOTAL LIABILITIES AND EQUITY (35+46+50+58)		

(3005b) Operating Report for Privately-Held Rate of Return Carriers  
Income Statement - Data Collection Form

FCC Form 481  
OMB Control No. 3060-0986  
OMB Control No. 3060-0813  
July 2013

Page 2 of 3

<010> Study Area Code 341046  
 <015> Study Area Name Leonore Mutual 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**

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.	<b>Net Operating Revenues (1 thru 5 less 6)</b>
8.	Plant Specific Operations Expense
9.	Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)
10.	Depreciation Expense
11.	Amortization Expense
12.	Customer Operations Expense
13.	Corporate Operations Expense
14.	<b>Total Operating Expenses (8 thru 13)</b>
15.	Operating Income or Margins (7 less 14)
16.	Other Operating Income and Expenses
17.	State and Local Taxes
18.	Federal Income Taxes
19.	Other Taxes
20.	<b>Total Operating Taxes (17+18+19)</b>
21.	<b>Net Operating Income or Margins (15+16-20)</b>
22.	Interest on Funded Debt
23.	Interest Expense - Capital Leases
24.	Other Interest Expense
25.	Allowance for Funds Used During Construction
26.	<b>Total Fixed Charges (22+23+24-25)</b>
27.	<b>Nonoperating Net Income</b>
28.	Extraordinary Items
29.	Jurisdictional Differences
30.	<b>Nonregulated Net Income</b>
31.	<b>Total Net Income or margins (21+27+28+29+30-26)</b>
32.	Total Taxes Based on Income
33.	Retained Earnings or Margins Beginning-of-Year
34.	Miscellaneous Credits Year-to-Date
35.	Dividends Declared (Common)
36.	Dividends Declared (Preferred)
37.	Other Debits Year-to-Date
38.	Transfers to Patronage Capital
39.	<b>Retained Earnings or Margins end-of-Period [(31+33+34)-(35+36+37+38)]</b>
40.	Patronage Capital Beginning-of-Year
41.	Transfers to Patronage Capital
42.	Patronage Capital Credits Retired
43.	<b>Patronage Capital End-of-Year (40+41-42)</b>
44.	Annual Debt Service Payments
45.	Cash Ratio [(14+20-10-11)/7]
46.	Operating Accrual Ratio [(14+20+26)/7]
47.	TIER [(31+26)/26]
48.	DSCR [(31+26+10+11)/44]

REDACTED - FOR PUBLIC INSPECTION

(300Sc) Operating Report for Privately-Held Rate of Return Carriers Cash Flow - Data Collection Form  Page 3 of 3	FCC Form 481 OMB Control No. 3060-0585 OMB Control No. 3060-0519 July 2013
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<010> Study Area Code	341046
<015> Study Area Name	Leonore Mutual 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@bometel.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) - Equity Loss in Partnerships, Net of Distributions	
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 Investments, Net	
28. Net Cash Provided/(Used) by Investing Activities	
29. Net Increase/(Decrease) in Cash	
30. Ending Cash	