



Rural Health Care Division

30 Lanidex Plaza West
 P.O. Box 685
 Parsippany, NJ 07054-0685

www.rhc.universalservice.org
 Phone: 1-800-229-5476

June 17, 2010

David T Wellman
 Copper River Native Association
 P.O. Box H, Mile 104 Old Richardson Highway
 Copper Center, AK 99573

Re: Funding Commitment for Funding Year 2009, Packet ID# 91936

Dear David Wellman:

The Rural Health Care Division (RHCD) of the Universal Service Administrative Company (USAC) has completed a review of your FCC Forms 466 or 466A and made decisions with respect to your request for support of telecommunications or Internet services. This letter is to advise you of our decisions. We have sent this letter to both the rural HCP mailing address (above) and the rural HCP physical location (below) if these addresses are different.

HCP Number: 13016
HCP Contact Name: David T Wellman
HCP Name: Native Village of Tazlina Health Clinic
HCP Address: Mile 110.5 Richardson Highway 62d
 04m N Lat, 146d 27m W Long
 Glennallen, AK 99588

In addition, a copy of this letter has been sent to your service provider listed below.

Service Provider Name: Copper Valley Telephone Cooperative
Service Provider Identification Number (SPIN): 143006030

Based on the information provided on your applications, the RHCD determined that the rural HCP may receive the onetime (non-recurring) and monthly recurring support amounts shown below for Funding Year 2009 (7/1/09 to 6/30/10). The estimated total support amount listed below is what the RHCD has reserved for your request.

Service: T1 or DS1 - 1544 Kbps
Billing Account Number: 7909

Type of Service Agreement	Eligible Support Start Date	Support End Date	Estimated Months of Support	Non-Recurring Support Amount	Monthly Recurring Support Amount	Estimated Total Support Amount	Funding Request Number
Month to Month	7/6/2009	4/12/2010	9.24	\$0.00	\$356.99	\$3,298.59	45356

To help you understand the information provided in this letter, the following definitions are provided:

- **Service:** The type of service ordered from the service provider as shown on Form 466 or 466A.