



Your business is our business.

DOCKET FILE COPY ORIGINAL

REDACTED - FOR PUBLIC INSPECTION

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September 30, 2013

By Hand Delivery

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

ACCEPTED/FILED

SEP 30 2013

Federal Communications Commission
Office of the Secretary

**Re: WC Docket No. 10-90, WC Docket No. 11-42
2013 ETC Annual Report of Palmetto Rural Telephone Cooperative, Inc.
Study Area Code 240536**

Dear Ms. Dortch:

On behalf of Palmetto Rural Telephone Cooperative, Inc. "Palmetto", JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission's rules.¹ Palmetto seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.² The redacted version is also being filed this date via the FCC's Electronic Comment Filing System.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

¹ 47 C.F.R. §§ 54.313, 54.422.

² *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 12-1857 rel. Nov. 16, 2012 (Protective Order). 47 C.F.R. § 54.313(f)(2).

No. of Copies rec'd 0+3
List ABCDE

Echelon Building II, Suite 200
9430 Research Blvd., Austin, TX 78759
phone: 512-338-0473, fax: 512-346-0822

Eagandale Corporate Center, Suite 310
1380 Corporate Center Curve, Eagan, MN 55121
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6849 Peachtree Dunwoody Road
Bldg. B-3, Suite 200, Atlanta, GA 30328
phone: 770-569-2105, fax: 770-410-1608

547 South Oakview Lane
Bountiful, UT 84010
phone: 801-294-4576, fax: 801-294-512

FCC Form 481 - Carrier Annual Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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ACCEPTED/FILED

<010> Study Area Code	240536	
<015> Study Area Name	PALMETTO RURAL COOP	SEP 30 2013
<020> Program Year	2014	Federal Communications Commission Office of the Secretary
<030> Contact Name: Person USAC should contact with questions about this data	Valerie Ancrum	
<035> Contact Telephone Number: Number of the person identified in data line <030>	8435389383	
<039> Contact Email Address: Email of the person identified in data line <030>	valerie.ancrum@prtc.coop	

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

<100> Service Quality Improvement Reporting <i>(complete attached worksheet)</i>	<input type="checkbox"/>	
<200> Outage Reporting (voice) <i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		
<300> Unfulfilled Service Requests (voice) <i>(attach descriptive document)</i>	<input checked="" type="checkbox"/>	
<310> Detail on Attempts (voice)	<input type="text" value="0"/>	
<320> Unfulfilled Service Requests (broadband) <i>(attach descriptive document)</i>	<input type="text"/>	
<330> Detail on Attempts (broadband)	<input type="text"/>	
<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"/>	
<420> Mobile	<input type="text"/>	
<430> Number of Complaints per 1,000 customers (broadband)	<input type="text"/>	
<440> Fixed	<input type="text"/>	
<450> Mobile	<input type="text"/>	
<500> Service Quality Standards & Consumer Protection Rules Compliance <i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> 2405368C510 <i>(attached descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations <i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> 2405368C610 <i>(attached descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice) <i>(complete attached worksheet)</i>	<input type="text"/>	
<710> Company Price Offerings (broadband) <i>(complete attached worksheet)</i>	<input type="text"/>	
<800> Operating Companies and Affiliates <i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/> <i>(if yes, complete attached worksheet)</i>	<input checked="" type="checkbox"/>	
<1000> Voice Services Rate Comparability <i>(check to indicate certification)</i>	<input type="text"/>	
<1010> <i>(attach descriptive document)</i>	<input type="text"/>	
<1100> Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/> <i>(if not, check to indicate certification)</i>	<input checked="" type="checkbox"/>	
<1110> <i>(complete attached worksheet)</i>	<input type="text"/>	
<1200> Terms and Condition for Lifeline Customers <i>(complete attached worksheet)</i>	<input type="text"/>	<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>	<i>(check to indicate certification)</i>	<input type="text"/>
<2005>	<i>(complete attached worksheet)</i>	

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

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

(100) Service Quality Improvement Reporting 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	240536
<015> Study Area Name	PALMETTO RURAL COOP
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035> Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039> Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

<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.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, 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 (USF) was used to improve service quality**
- <116> How (USF) was used to improve service coverage**
- <117> How (USF) was used to improve service capacity**
- <118> Provide an explanation of network improvement targets not met in the prior calendar year.**

(800) Operating Companies 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	240536
<015> Study Area Name	PALMETTO RURAL COOP
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035> Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039> Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop
<810> Reporting Carrier	Palmetto Rural Telephone Cooperative, Incorporated
<811> Holding Company	
<812> Operating Company	

<813> <a1>	<a2>	<a3>
Affiliates	SAC	Doing Business As Company or Brand Designation
-- See attached worksheet --		

**(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	240536
<015>	Study Area Name	PALMETTO RURAL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035>	Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039>	Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

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

<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, 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, No, NA)

<input type="checkbox"/>

**(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	240536
<015>	Study Area Name	PALMETTO RURAL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035>	Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039>	Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

<1130> Please check this box 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
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<010>	Study Area Code	240536
<015>	Study Area Name	PALMETTO RURAL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035>	Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039>	Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

<1210> Terms & Conditions of Voice Telephony Lifeline Plans 240536SC1210

Name of attached document (.pdf)

<1220> Link to Public Website HTTP _____

“Please check these boxes below to confirm that the attached PDF, 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 <i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	240536
<015>	Study Area Name	PALMETTO RURAL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035>	Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039>	Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

CHECK the boxes below 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)} | <input type="checkbox"/> |
| <2011> | 3rd Year Certification {47 CFR § 54.313(b)(2)} | <input type="checkbox"/> |

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

- | | | |
|--------|--|--------------------------|
| <2012> | 2013 Frozen Support Certification | <input type="checkbox"/> |
| <2013> | 2014 Frozen Support Certification | <input type="checkbox"/> |
| <2014> | 2015 Frozen Support Certification | <input type="checkbox"/> |
| <2015> | 2016 and future Frozen Support Certification | <input type="checkbox"/> |

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

- | | | |
|--------|---|--------------------------|
| <2016> | Certification Support Used to Build Broadband | <input type="checkbox"/> |
|--------|---|--------------------------|

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

- | | | |
|--------|---|--------------------------|
| <2017> | 3rd year Broadband Service Certification | <input type="checkbox"/> |
| <2018> | 5th year Broadband Service Certification | <input type="checkbox"/> |
| <2019> | Interim Progress Certification | <input type="checkbox"/> |
| <2020> | Please check the box to confirm that the attached PDF, 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. | <input type="checkbox"/> |

- | | | |
|--------|--|--|
| <2021> | Interim Progress Community Anchor Institutions | Name of Attached Document Listing Required Information _____ |
|--------|--|--|

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481
	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010> Study Area Code	240536
<015> Study Area Name	PALMETTO RURAL COOP
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035> Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039> Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

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). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

<p>(3010) Milestone Certification {47 CFR § 54.313(f)(1)(i)} Please check this box to confirm that the attached PDF , on line 3012, contains the required information pursuant to § 54.313 (f)(1)(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.</p>	<p>Name of Attached Document Listing Required Information</p> <p><input type="checkbox"/></p>
<p>(3012) Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)} (3013) Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)} (3014) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, 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) PDF of Balance Sheet, Income Statement and Statement of Cash Flows</p>	<p>Name of Attached Document Listing Required Information</p> <p><input checked="" type="checkbox"/> (Yes/No) <input checked="" type="checkbox"/> (Yes/No)</p> <p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/></p>
<p>(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation (3018) If the response is no on line 3014, Is your company audited? 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) PDF of Balance Sheet, Income Statement and Statement of Cash Flows (3021) Management letter 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) PDF of Balance Sheet, Income Statement and Statement of Cash Flows</p>	<p>Name of Attached Document Listing Required Information</p> <p>240536SC3017</p> <p><input type="checkbox"/> (Yes/No)</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>(3026) Attach the worksheet listing required information</p>	<p>Name of Attached Document Listing Required Information</p> <p>_____</p>

Certification - Reporting 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	240536
<015> Study Area Name	PALMETTO RURAL COOP
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035> Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039> Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

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:	PALMETTO RURAL COOP
Signature of Authorized Officer:	CERTIFIED ONLINE Date 09/27/2013
Printed name of Authorized Officer:	Dewaine Wilson
Title or position of Authorized Officer:	CFO
Telephone number of Authorized Officer:	843-538-9382
Study Area Code of Reporting Carrier:	240536 Filing Due Date for this form: 10/15/2013
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 491 OMB Control No. 3060-0986/GMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	240536
<015>	Study Area Name	PALMETTO RURAL COOP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Valerie Ancrum
<035>	Contact Telephone Number - Number of person identified in data line <030>	8435389383
<039>	Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop

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) _____ 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: _____	
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.	

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: _____	
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: _____
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

In establishing this certification in its *2005 ETC Order*,¹ the FCC found that an ETC must make “a specific commitment to objective measures to protect consumers.”² The FCC found that for wireless ETCs, compliance with CTIA’s Consumer Code for Wireless Service would satisfy this requirement and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, “to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement.”⁴

Palmetto Rural Telephone Cooperative, Inc. (“Palmetto”) hereby certifies that it is in compliance with applicable service quality standards and consumer protection rules. Palmetto is subject to consumer protection obligations under both federal and South Carolina state law. These obligations include, but are not limited to, the following: (1) filing a Local Exchange Tariff pursuant to the requirements of the Public Service Commission of South Carolina which disclose rates, and terms and conditions of service to customers (Section 103-612.2.1 of the South Carolina Code of Regulations); (2) adherence to state consumer protection requirements governing telephone providers which govern Standards and Quality of Service (Sections 103-661, 103-662, and 103-663 of the South Carolina Code of Regulations); Customer Relations, including billing,

¹ *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) (“*2005 ETC Order*”).

² *Id.* at para. 28.

³ *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: “(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy.” *Id.* at n. 71.

⁴ *Id.* at n. 72.

deposits, discontinuance and termination of service (Sections 103-620 through 103-633 of the South Carolina Code of Regulations); Engineering and Safety Standards (Sections 103-640 through 103-646 and 103-670 through 103-672 of the South Carolina Code of Regulations); Inspections and Tests (Sections 103-650 through 103-653 of the South Carolina Code of Regulations); Records and Reports (Sections 103-610 through 103-619 of the South Carolina Code of Regulations) and Customer Complaints (Section 103-628 of the South Carolina Code of Regulations); (3) truth-in-billing requirements (Section 103-622.1 of the South Carolina Code of Regulations); and (4) CPNI, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

Palmetto Rural Telephone Cooperative, Inc. (“Palmetto”) hereby certifies that it is able to function in emergency situations as set forth in 47 C.F.R. § 54.202(a)(2)¹ and Section 103-646 of the South Carolina Code of Regulations. Palmetto’s network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2) and Section 103-646 of the South Carolina Code of Regulations. Palmetto can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow Palmetto to manage traffic spikes throughout its network, as emergency situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. Palmetto has battery backup at all office locations and in its electronic equipment sites. Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment. Generators are installed at all Central Office locations. They will continue to run as long as Palmetto has access to propane.

¹ Section 54.202(a)(2) requires ETCs that are designated by the Commission to “demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.”

2013 Lifeline Guidelines

- Lifeline is a federal benefit and willfully making false statements to obtain the benefit can result in de-enrollment, fines and prosecution.
- Only one Lifeline benefit is available per household.
- A household is defined, for purposes of the Lifeline program, as any individual or group of individuals who live together at the same address and share income and expenses.
- A household may not receive Lifeline benefits from multiple providers.
- If a household receives more than one Lifeline benefit, it will be de-enrolled from the program.
- The Lifeline benefit may not be transferred to any other person.

Qualifying Methods

A subscriber may qualify for Lifeline either because he/she or someone in his/her household participates in one of the programs below or because your income is within the following guidelines. **NOTE: A subscriber may receive Social Security and Medicare benefits, but to qualify for Lifeline, must receive benefits from one of the following programs or income must fall within the guidelines.**

Program Eligibility

- Supplemental Nutrition Assistance Program (SNAP)
- Federal Public Housing/Section 8
- Medicaid
- Supplemental Security Income (SSI)
- National School Lunch (NSL) free lunch program
- Low Income Home Energy Assistance Program (LIHEAP)
- Temporary Assistance for Needy Families (TANF)

Income Eligibility for 2013

Annual Income 135% Thresholds Based on Household Size								
1	2	3	4	5	6	7	8	For each add'l person
\$15,512	\$20,939	\$26,366	\$31,793	\$37,220	\$42,647	\$48,074	\$53,501	+ \$5,427/person

(Note: You will need to provide 3 of your most recent paystubs from the previous 12 months, Social Security Benefit Letter or W-2.)

The subscriber understands that:

1. His/Her household meets the income-based or program-based eligibility criteria for receiving Lifeline, shown above. If annual income exceeds 135% of the Federal Poverty Guidelines, the subscriber will notify the provider.
2. He/She will notify the provider within 30 days if for any reason he/she no longer qualifies to receive Lifeline.
3. He/She will notify the provider within 30 days if he/she moves to a new address or he/she will verify every 90 days that the temporary address is still current.
4. He/She must certify that his/her household is not receiving any other Lifeline benefit and will not apply for an additional one from another wireline or wireless carrier.
5. Giving fraudulent information is punishable by law.
6. He/She may be required to re-certify my continued eligibility for Lifeline and that my failure to re-certify will result in de-enrollment.

Before enrolling in Lifeline, the subscriber will authorize the provider to release his/her information contained in his/her Lifeline Application to the FCC or its designee, including the Universal Service Administrative Company, and to any state and federal agency, as required by law.

Pricing

By enrolling in Lifeline, the subscriber will receive \$9.25 credit from Federal and \$3.00 credit from State towards his/her local service of \$14.35. The total credit of \$12.25 may be applied towards local service on POTS or bundle packages. If a subscriber chooses to have toll calls, they can subscribe to 12 cents per minute, 6 cents per minute and \$3.95 per month, or unlimited minutes for \$25.90.

REDACTED – FOR PUBLIC INSPECTION

PALMETTO RURAL TELEPHONE COOPERATIVE, INC. (SAC 240536)

ATTACHMENT - LINE 3026

ATTACHMENT REDACTED IN ENTIRETY