chariton VALLEY
phone ◆ internet ◆ cable tv ◆ wireless

DOCKET FILE COPY ORIGINAL

Received & Inspected
OCT 21 2013
FCC Mail Room

October 15, 2013

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

Dear Ms. Dortch:

Pursuant to the Missouri Public Service Commission order under Case No. TO-2006-0172 and the **FCC WC Docket No. 10-90**, enclosed please find **FCC Form 481** for Chariton Valley Telephone Corporation.

If you have questions regarding this filing, please contact me.

Sincerely,

CHARITON VALLEY TELEPHONE CORPORATION

James A. Simon
General Manager

Enclosure

No. of Copies rec'd 0
List ABCDE

FCC Form 481 - Carrier Annual Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

Received & Inspected
OCT 21 2013
FCC Mail Room

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name: Person USAC should contact with questions about this data	Tina Jordan
<035>	Contact Telephone Number: Number of the person identified in data line <030>	660-395-9682
<039>	Contact Email Address: Email of the person identified in data line <030>	tjordan@charitonvalley.com

ANNUAL REPORTING FOR ALL CARRIERS

				54.313 Completion Required	54.422 Completion Required
				(check box when complete)	
<100>	Service Quality Improvement Reporting		(complete attached worksheet)		
<200>	Outage Reporting (voice)		(complete attached worksheet)	✓	✓
<210>		[ ] <-- check box if no outages to report			
<300>	Unfulfilled Service Requests (voice)	0		✓	
<310>	Detail on Attempts (voice)		(attach descriptive document)		
<320>	Unfulfilled Service Requests (broadband)	0			
<330>	Detail on Attempts (broadband)		(attach descriptive document)		
<400>	Number of Complaints per 1,000 customers (voice)			✓	✓
<410>	Fixed	5.0E-4			
<420>	Mobile	0.0			
<430>	Number of Complaints per 1,000 customers (broadband)				
<440>	Fixed	0.0			
<450>	Mobile	0.0			
<500>	Service Quality Standards & Consumer Protection Rules Compliance		(check to indicate certification)	✓	✓
<510>	421864mo510		(attached descriptive document)	✓	✓
<600>	Functionality in Emergency Situations		(check to indicate certification)	✓	✓
<610>	421864mo610		(attached descriptive document)	✓	✓
<700>	Company Price Offerings (voice)		(complete attached worksheet)		
<710>	Company Price Offerings (broadband)		(complete attached worksheet)		
<800>	Operating Companies and Affiliates		(complete attached worksheet)	✓	✓
<900>	Tribal Land Offerings (Y/N)?	○ ◉	(if yes, complete attached worksheet)		
<1000>	Voice Services Rate Comparability		(check to indicate certification)		
<1010>			(attach descriptive document)		
<1100>	Terrestrial Backhaul (Y/N)?	◉ ○	(if not, check to indicate certification)		
<1110>			(complete attached worksheet)		
<1200>	Terms and Condition for Lifeline Customers		(complete attached worksheet)		✓

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)		
<2005>	(complete attached worksheet)		

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	(check to indicate certification)	✓	
<3005>	(complete attached worksheet)	✓	

(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	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<110>	Has your company received its ETC certification from the FCC?	(yes / no)	◉ ○
<111>	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.	☐

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<220>

<a> NORS Reference Number	<b1> Outage Start Date	<b2> Outage Start Time	<b3> Outage End Date	<b4> Outage End Time	<c1> Number of Customers Affected	<c2> Total Number of Customers	<d> 911 Facilities Affected (Yes / No)	<e> Service Outage Description (Check all that apply)	<f> Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution	<h> Preventative Procedures

-- See attached worksheet --

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<701>	Residential Local Service Charge Effective Date	1/1/2013
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1> State	<a2> Exchange (ILEC)	<a3> SAC (CETC)	<b1> Rate Type	<b2> Residential Local Service Rate	<b3> State Subscriber Line Charge	<b4> State Universal Service Fee	<b5> Mandatory Extended Area Service Charge	<c> Total per line Rates and Fees
				-- See attached worksheet				
				--				

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<711>

<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {*select*}

-- See attached worksheet --

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<810>	Reporting Carrier	Chariton Valley Telephone Corporation
<811>	Holding Company	Chariton Valley Telephone Corporation
<812>	Operating Company	Chariton Valley Telephone Corporation

<813>

<a1> Affiliates	<a2> SAC	<a3> 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	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<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:

		Select (Yes,No, NA)
<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.	

(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	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<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

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans — 421864mo1210

Name of attached document (.pdf)

<1220> Link to Public Website — HTTP www.cvalley.net

"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
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

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)} ☐

<2011> 3rd Year Certification {47 CFR § 54.313(b)(2)} ☐

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

<2012> 2013 Frozen Support Certification ☐

<2013> 2014 Frozen Support Certification ☐

<2014> 2015 Frozen Support Certification ☐

<2015> 2016 and future Frozen Support Certification ☐

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 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. ☐

<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	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

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

(3010)	Milestone Certification {47 CFR § 54.313(f)(1)(i)} Please check this box to confirm that the attached PDF , on line 3012,	Name of Attached Document Listing Required Information	☐
(3011)	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.		
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	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)
	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		☑
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	421864mo3017
(3018)	If the response is no on line 3014, Is your company audited?		☐ (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)	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		☐
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

Received & Inspected
OCT 21 2013
FCC Mail Room

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	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

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: CHARITON VALLEY TEL

Signature of Authorized Officer: CERTIFIED ONLINE Date 10/14/2013

Printed name of Authorized Officer: Tina Jordan

Title or position of Authorized Officer: Director of Finance

Telephone number of Authorized Officer: 6603959000

Study Area Code of Reporting Carrier: 421864 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 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.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)_____ 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.

Received & inspected
OCT 21 2013
FCC Mail Room

Attachments

(200) Service Outage Reporting (Voice)
Data Collection Form

Received & Inspected
OCT 21 2013
FCC Mail Room

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 421864

<015> Study Area Name CHARITON VALLEY TEL

<020> Program Year 2014

<030> Contact Name - Person USAC should contact regarding this data Tina Jordan

<035> Contact Telephone Number - Number of person identified in data line <030> 660-395-9682

<039> Contact Email Address - Email Address of person identified in data line <030> tjordan@charitonvalley.com

<220>

<a> NORS Reference Number	<b1> Outage Start Date	<b2> Outage Start Time	<b3> Outage End Date	<b4> Outage End Time	<c1> Number of Customers Affected	<c2> Total Number of Customers	<d> 911 Facilities Affected (Yes / No)	<e> Service Outage Description (Check all that apply)	<f> Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution	<h> Preventative Procedures
	06/27/2012	23:00	06/28/2012	08:30	439	5897	Yes	Wireline (including cable) VoIP	No	Corrected Error in Configuration	Added more testing measures after a configuration change.

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	421864
<015>	Study Area Name	CHARITON VALLEY TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Tina Jordan
<035>	Contact Telephone Number - Number of person identified in data line <030>	660-395-9682
<039>	Contact Email Address - Email Address of person identified in data line <030>	tjordan@charitonvalley.com

<810>	Reporting Carrier	Chariton Valley Telephone Corporation
<811>	Holding Company	Chariton Valley Telephone Corporation
<812>	Operating Company	Chariton Valley Telephone Corporation

<813>

<a1> Affiliates	<a2> SAC	<a3> Doing Business As Company or Brand Designation
Chariton Valley Communication Corporation		
Chariton Valley Cellular RSA No 2 Corporation		
Chariton Valley Telecom Corporation		
Chariton Valley L.D. Corporation		
Chariton Valley Services Corporation		
Missouri RSA 5 Partnership	429790	Chariton Valley Wireless Services

421864 MO 510

Certification of Officer as to Compliance with Applicable Service Quality Standards and Consumer Protection Rules

(010) Study Area Code	**421864**
(015) Study Area Name	**CHARITON VALLEY TEL**
(020) Program Year	**2014**
(030) Contact Name	**Tina Jordan**
(035) Contact Telephone No	**660-395-9682**
(039) Contact Email Address	**tjordan@charitonvalley.com**

Received & Inspected
OCT 21 2013
FCC Mail Room

CERTIFICATION

Chariton Valley Telephone Corporation (Chariton Valley) operates in the state of Missouri. The Missouri PSC Service Quality Rules have been waived. However, Chariton Valley continues to operate under the same standards as set by the Missouri PSC in 4 CSR 240-32.070 Quality of Service. Chariton Valley also complies with Red Flag Rules, CPNI, and the Fair Credit Reporting Act, and seeks to protect our customer's privacy while providing them with high quality, state-of-the-art telecommunications products and services. I certify that I am an officer of the reporting carrier; my responsibilities include ensuring compliance with the applicable service quality standards as well as the consumer protection rules; and, to the best of my knowledge, the carrier is in compliance with applicable service quality standards and consumer protection rules pursuant to 47 C.F. R. 54.313 and 54.422.

Signature of Authorized Officer James Simon **Date** 10/10/13
Printed Name of Authorized Officer James Simon
Title or position of Authorized Officer General Manager

(Persons making willful 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.)

421864mo610

Certification of Officer as to Compliance with Functionality in Emergency Situations

(010) Study Area Code	**421864**
(015) Study Area Name	**CHARITON VALLEY TEL**
(020) Program Year	**2014**
(030) Contact Name	**Tina Jordan**
(035) Contact Telephone No	**660-395-9682**
(039) Contact Email Address	**tjordan@charitonvalley.com**

Received & Inspected
OCT 21 2013
FCC Mail Room

CERTIFICATION

Chariton Valley Telephone Corporation (Chariton Valley) operates in the state of Missouri and adheres to the Provisions in 4 CSR 240 Chapter 34 Emergency Telephone Service Standards. Chariton Valley Telephone Corporation (Chariton Valley) has a reasonable amount of back-up power to ensure functionality without an external power source and is able to reroute traffic around damaged facilities. I certify that I am an officer of the reporting carrier; my responsibilities include ensuring functionality in emergency situations; and, to the best of my knowledge, the carrier is in compliance with able to function in emergency situations pursuant to 47 C.F. R. 54.313 and 54.422.

Signature of Authorized Officer James Simon **Date** 10/10/13
Printed Name of Authorized Officer James Simon
Title or position of Authorized Officer General Manager

(Persons making willful 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.)

421864mo 1210
1 of 5

Received & Inspected
OCT 21 2013
FCC Mail Room

LIFELINE OR DISABLED CUSTOMER PROGRAMS

chariton VALLEY

Service Initiation Procedures for Qualifying Individuals

Chariton Valley Telephone Corporation
1213 E. Briggs Drive • P O Box 67
Macon, MO 63552
Phone 660-395-9000 • Fax 660-395-4403

1. Objective

Initiation of a customer's Lifeline service following qualification of eligibility by verifying participation in the one or more of the lifeline or disabled programs

Chariton Valley Telephone Corporation has established these procedures to initiate Lifeline service for low income or disabled customers in compliance with state regulation Title 4 CSR 240.31.050(3)(D). In addition, these procedures are established to comply with federal regulation Title 47 CFR 54.410 to verify consumer qualifications for Lifeline.

2. Provisions

A. A customer makes an inquiry with a Customer Service or Sales Representative as to the availability of Lifeline service.

B. The customer completes a Board Approved Lifeline Self-Certification Application.

C. The customer presents documentation to certify participation in a qualifying lifeline or disability program.

D. The Customer Service or Sales Representative notes the type of qualifying documentation on the application.

E. The qualifying document is returned to the applicant or destroyed once recorded.

F. The Customer Service or Sales Representative attests the supporting program documentation was presented and verified.

G. The Application is scanned into the electronic customer record and then destroyed.

3. Sample Documentation

- Board Approved Self-Certification Application Form (Exhibit A)

chariton VALLEY
phone ◆ internet ◆ cable tv ◆ wireless

Chariton Valley Telephone Corporation
Missouri Application for the Lifeline or Disabled Programs

Consumers meeting certain eligibility criteria are able to receive monthly discounts for voice telephony service through the Lifeline program or the Disabled program. Lifeline service offers a monthly discount of $12.75. The Disabled program offers a $3.50 monthly discount. To apply complete this form and also submit **proof of eligibility**.

Eligibility Criteria	
Lifeline Program	**Disabled Program**
___ MO HealthNet (f/k/a Medicaid) ___ Supplemental Nutrition Assistance (Food Stamps) ___ Supplemental Security Income ___ Low-Income Home Energy Assistance (LIHEAP) ___ Federal Public Housing Assistance (Section 8) ___ National School Free Lunch Program ___ Temporary Assistance for Needy Families (TANF) ___ 135% of the Federal Poverty Level *(See next page for income threshold requirements)*	___ Veteran Administration Disability Benefits ___ State Blind Pension ___ State Aid to Blind Persons ___ State Supplemental Disability Assistance ___ Federal Social Security Disability ___ Federal Supplemental Security Income

Applicant's Full Name:	**Birth Date:**	**Social Security #** *(last 4 digits)*:	**DCN:***
Name on Voice Service Account *(If different from Applicant)*:		**Customer Contact Telephone Number:**	
Customer's Full Residential Service Address ***(no P.O. Boxes)***: Street: City, Town, Zip:		**Is this address a temporary address?** Yes / No *(circle the appropriate response)* *(If "yes" then must verify address every 90 days.)*	
Is this address also my billing address? ___ Yes ___ No *(If "no" please provide billing address)*:			

**This number is assigned to program participants of MO HealthNet, LIHEAP, Food Stamps and TANF.*

I understand the following obligations and provisions about the Lifeline and Disabled programs:

- The Lifeline and Disabled programs are government benefit programs and that willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program.
- Only one Lifeline or Disabled service 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 is not permitted to receive Lifeline or Disabled benefits from multiple providers or combine Lifeline and Disabled program benefits.
- Violation of the one-per-household limitation constitutes a violation of rules and will result in the subscriber's de-enrollment from the program.
- Lifeline and the Disabled program are non-transferable benefits and the subscriber may not transfer his or her benefit to any other person.

I CERTIFY UNDER PENALTY OF PERJURY EACH OF THE FOLLOWING:

- I meet the eligibility criteria for the Lifeline program or the Disabled program.
- I will provide notification to my voice service provider within 30 days if for any reasons I no longer satisfy the criteria for receiving Lifeline or Disabled benefits including, as relevant, if I no longer meet the income-based or program-based criteria for receiving Lifeline or Disabled support, I receive more than one Lifeline or Disabled benefit, or another member of my household is receiving a Lifeline or Disabled benefit.
- If I move to a new address I will provide that new address to my voice service provider within 30 days.
- If I have a temporary residential address then I will be required to verify my address with my voice service provider every 90 days.
- My household will receive only one Lifeline or Disabled service and, to the best of my knowledge, my household is not already receiving a Lifeline or Disabled service.
- I acknowledge the obligation to re-certify my continued eligibility for Lifeline or Disabled benefits at any time and failure to re-certify my continued eligibility will result in de-enrollment and the termination of Lifeline or Disabled benefits.
- I consent to providing my name, telephone number and address to the Universal Service Administrative Company for the purpose of verifying I do not receive more than one Lifeline benefit. I also consent to sharing my account information with the Federal Communications Commission and Missouri Public Service Commission who oversee and administer the Lifeline or Disabled programs.

_____ I certify I have _____individuals in my household.
(Initial and complete only if qualifying under income threshold.)

The information supplied on this form is true and correct.

I acknowledge providing false or fraudulent information to receive Lifeline or Disabled benefits is punishable by law.

_____ _____
Signature of Customer **Date**

Submit a completed signed form <u>and proof of eligibility</u>.

Annual Income Thresholds for Meeting 135% of Federal Poverty Level (Based on Household Size)								
1	2	3	4	5	6	7	8	Each add'l person
$15,512	$20,939	$26,366	$31,793	$37,220	$42,647	$48,074	$53,5001	+ $5,427/person

Acceptable documentation for meeting the criteria of 135% of the federal poverty level includes: a copy of prior year's state or federal tax return; paycheck stub (three consecutive months); a statement of benefits for Social Security, Veterans Administration, retirement/pension or Unemployment/Workmen's Compensation; or other legal documents showing current income (e.g. divorce decree, child support award). Any documentation must cover a full year or three consecutive months within the previous twelve months.

<u>Company Use Only</u>:

I hereby attest the applicant presented acceptable proof of eligibility:

_____ _____ _____
Print name of company official **Signature** **Date**

421864mo 3017
1 of 9

ccording to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid MB control number for this information collection is 0572-0031. The time required to complete this information collection is estimated to average 4 hours per response, including the time for reviewing instructions, arching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

USDA-RUS

This data will be used by RUS to review your financial situation. Your response is required by 7 U.S.C. 901 et seq. and, subject to federal laws and regulations regarding confidential information, will be treated as confidential.

OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER NAME

Chariton Valley Telephone Corporation

(Prepared with Audited Data)

Received & Inspected
OCT 21 2013
FCC Mail Room

ISTRUCTIONS-Submit report to RUS within 30 days after close of the period.
r detailed instructions, see RUS Bulletin 1744-2. Report in whole dollars only.

PERIOD ENDING: December, 2012

BORROWER DESIGNATION: MO0535

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.

ALL INSURANCE REQUIRED BY 7 CFR PART 1788, CHAPTER XVII, RUS, WAS IN FORCE DURING THE REPORTING PERIOD AND RENEWALS HAVE BEEN OBTAINED FOR ALL POLICIES.

DURING THE PERIOD COVERED BY THIS REPORT PURSUANT TO PART 1788 OF 7CFR CHAPTER XVII

(Check one of the following)

[X] All of the obligations under the RUS loan documents have been fulfilled in all material respects.

[ ] There has been a default in the fulfillment of the obligations under the RUS loan documents. Said default(s) is/are specifically described in the Telecom Operating Report

DATE

PART A. BALANCE SHEET

ASSETS	BALANCE PRIOR YEAR	BALANCE END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY	BALANCE PRIOR YEAR	BALANCE END OF PERIOD
URRENT ASSETS			CURRENT LIABILITIES		
1. Cash and Equivalents	7,666,917	14,539,350	25. Accounts Payable	1,815,799	1,319,466
2. Cash-RUS Construction Fund	0	0	26. Notes Payable	0	0
3. Affiliates:			27. Advance Billings and Payments	0	0
a. Telecom, Accounts Receivable	152,732	0	28. Customer Deposits	94,227	99,427
b. Other Accounts Receivable	4,338,829	360,983	29. Current Mat. L/T Debt	96,911	96,911
c. Notes Receivable	0	0	30. Current Mat. L/T Debt-Rur. Dev.	0	0
4. Non-Affiliates:			31. Current Mat.-Capital Leases	0	0
a. Telecom, Accounts Receivable	0	161,464	32. Income Taxes Accrued	(347,500)	(279,552)
b. Other Accounts Receivable	1,017,086	1,001,264	33. Other Taxes Accrued	0	0
c. Notes Receivable	0	0	34. Other Current Liabilities	36,679	40,775
5. Interest and Dividends Receivable	0	0	**35. Total Current Liabilities (25 thru 34)**	1,696,116	1,277,027
6. Material-Regulated	331,700	469,241	LONG-TERM DEBT		
7. Material-Nonregulated	0	0	36. Funded Debt-RUS Notes	3,088,751	8,610,007
8. Prepayments	377,496	346,091	37. Funded Debt-RTB Notes	0	0
9. Other Current Assets	0	0	38. Funded Debt-FFB Notes	0	0
0. Total Current Assets (1 Thru 9)	13,884,760	16,878,393	39. Funded Debt-Other	0	0
ONCURRENT ASSETS			40. Funded Debt-Rural Develop. Loan	0	0
1. Investment in Affiliated Companies			41. Premium (Discount) on L/T Debt	0	0
a. Rural Development	69,035	69,035	42. Reacquired Debt	0	0
b. Nonrural Development	38,003,642	43,397,968	43. Obligations Under Capital Lease	0	0
2. Other Investments			44. Adv. From Affiliated Companies	0	0
a. Rural Development	0	0	45. Other Long-Term Debt	0	0
b. Nonrural Development	0	0	**46. Total Long-Term Debt (36 thru 45)**	3,088,751	8,610,007
3. Nonregulated Investments	5,000	5,000	OTHER LIAB. & DEF. CREDITS		
4. Other Noncurrent Assets	377,264	100,589	47. Other Long-Term Liabilities	0	0
5. Deferred Charges	0	0	48. Other Deferred Credits	133,229	104,871
6. Jurisdictional Differences	0	0	49. Other Jurisdictional Differences	0	0
7. Total Noncurrent Assets (11 thru 16)	38,454,941	43,572,592	50. Total Other Liabilities and Deferred Credits (47 thru 49)	133,229	104,871
LANT, PROPERTY, AND EQUIPMENT			EQUITY		
8. Telecom, Plant-in-Service	55,774,427	56,992,123	51. Cap. Stock Outstand. & Subscribed	0	0
9. Property Held for Future Use	0	0	52. Additional Paid-in-Capital	0	0
0. Plant Under Construction	694,568	512,544	53. Treasury Stock	0	0
1. Plant Adj., Nonop. Plant & Goodwill	0	0	54. Membership and Cap. Certificates	0	0
2. Less Accumulated Depreciation	29,042,190	31,856,534	55. Other Capital	6,019,018	6,370,265
3. Net Plant (18 thru 21 less 22)	27,426,805	25,648,133	56. Patronage Capital Credits	65,586,275	67,936,396
4. TOTAL ASSETS (10+17+23)			57. Retained Earnings or Margins	3,243,117	1,800,552
			58. Total Equity (51 thru 57)	74,848,410	76,107,213
	79,766,506	86,099,118	**59. TOTAL LIABILITIES AND EQUITY (35+46+50+58)**	79,766,506	86,099,118

Total Equity = 88.39% % of Total Assets

USDA-RUS **OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS**	BORROWER DESIGNATION MO0535
INSTRUCTIONS- See RUS Bulletin 1744-2	PERIOD ENDING December, 2012

PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS

ITEM	PRIOR YEAR	THIS YEAR
1. Local Network Services Revenues	1,202,776	1,166,924
2. Network Access Services Revenues	12,966,479	12,294,258
3. Long Distance Network Services Revenues	0	0
4. Carrier Billing and Collection Revenues	129,696	105,134
5. Miscellaneous Revenues	314,332	320,338
6. Uncollectible Revenues	5,657	5,068
7. Net Operating Revenues (1 thru 5 less 6)	14,607,626	13,881,586
8. Plant Specific Operations Expense	5,098,827	4,873,400
9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)	430,018	424,414
10. Depreciation Expense	2,836,738	2,943,888
11. Amortization Expense	0	0
12. Customer Operations Expense	1,033,696	979,238
13. Corporate Operations Expense	1,402,946	1,471,496
14. Total Operating Expenses (8 thru 13)	10,802,225	10,692,436
15. Operating Income or Margins (7 less 14)	3,805,401	3,189,150
16. Other Operating Income and Expenses	0	0
17. State and Local Taxes	3,653	3,879
18. Federal Income Taxes	4,814	23,743
19. Other Taxes	584,102	589,643
20. Total Operating Taxes (17+18+19)	592,569	617,265
21. Net Operating Income or Margins (15+16-20)	3,212,832	2,571,885
22. Interest on Funded Debt	160,360	216,107
23. Interest Expense - Capital Leases	0	0
24. Other Interest Expense	3,159	2,738
25. Allowance for Funds Used During Construction	4,178	8,945
26. Total Fixed Charges (22+23+24-25)	159,341	209,900
27. Nonoperating Net Income	36,325	44,241
28. Extraordinary Items	0	0
29. Jurisdictional Differences	0	0
30. Nonregulated Net Income	153,301	(605,674)
31. Total Net Income or Margins (21+27+28+29+30-26)	3,243,117	1,800,552
32. Total Taxes Based on Income	0	0
33. Retained Earnings or Margins Beginning-of-Year	3,361,462	3,243,117
34. Miscellaneous Credits Year-to-Date	0	0
35. Dividends Declared (Common)	0	0
36. Dividends Declared (Preferred)	0	0
37. Other Debits Year-to-Date	(2,538)	118
38. Transfers to Patronage Capital	3,364,000	3,242,999
39. Retained Earnings or Margins End-of-Period [(31+33+34) - (35+36+37+38)]	3,243,117	1,800,552
40. Patronage Capital Beginning-of-Year	63,397,067	65,586,275
41. Transfers to Patronage Capital	3,364,000	3,242,999
42. Patronage Capital Credits Retired	1,174,792	892,878
43. Patronage Capital End-of-Year (40+41-42)	65,586,275	67,936,396
44. Annual Debt Service Payments	160,360	216,107
45. Cash Ratio [(14+20-10-11) / 7]	0.5859	0.6027
46. Operating Accrual Ratio [(14+20+26) / 7]	0.7910	0.8298
47. TIER [(31+26) / 26]	21.3533	9.5781
48. DSCR [(31+26+10+11) / 44]	38.9074	22.9254

421864mo 3017
3 of 9

USDA-RUS

OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

INSTRUCTIONS - See RUS Bulletin 1744-2

BORROWER DESIGNATION
MO0535

PERIOD ENDED
December, 2012

Part C. SUBSCRIBER (ACCESS LINE), ROUTE MILE, & HIGH SPEED DATA INFORMATION

	1. RATES		2. SUBSCRIBERS (ACCESS LINES)			3. ROUTE MILES	
EXCHANGE	B-1 (a)	R-1 (b)	BUSINESS (a)	RESIDENTIAL (b)	TOTAL (c)	TOTAL (including fiber) (a)	FIBER (b)
Atlanta	13.00	13.00	41	255	296	213.00	70.00
Bevier	13.00	13.00	83	339	422	260.00	54.00
Bosworth	13.00	13.00	35	202	237	152.00	37.00
Bucklin	13.00	13.00	104	357	461	277.00	74.00
Bynumville	13.00	13.00	26	194	220	127.00	23.00
Callao	13.00	13.00	31	201	232	140.00	28.00
Clifton Hill	13.00	13.00	58	91	149	89.00	18.00
DeWitt	13.00	13.00	32	81	113	72.00	20.00
Ethel	13.00	13.00	33	96	129	82.00	21.00
Excello	13.00	13.00	26	254	280	153.00	18.00
Forest Green	13.00	13.00	11	68	79	43.00	8.00
Hale	13.00	13.00	69	294	363	243.00	68.00
Huntsville	13.00	13.00	257	646	903	499.00	82.00
Jacksonville	13.00	13.00	42	312	354	300.00	129.00
New Boston	13.00	13.00	15	97	112	63.00	12.00
New Cambria	13.00	13.00	54	204	258	153.00	29.00
Prairie Hill	13.00	13.00	23	145	168	139.00	61.00
Salisbury	13.00	13.00	379	768	1,147	656.00	97.00
MobileWireless					0		
Route Mileage Outside Exchange Area						74.00	74.00
Total			1,319	4,604	5,923	3,735.00	923.00
No. Exchanges	18						

USDA-RUS

OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

INSTRUCTIONS - See RUS Bulletin 1744-2

BORROWER DESIGNATION
MO0535

PERIOD ENDED
December, 2012

Part C. SUBSCRIBER (ACCESS LINE), ROUTE MILE, & HIGH SPEED DATA INFORMATION

4. BROADBAND SERVICE

			Details on Least Expensive Broadband Service					
EXCHANGE	No. Access Lines with BB available (a)	No Of Broadband Subscribers (b)	Number Of Subscribers (c)	Advertised Download Rate (Kbps) (d)	Advertised Upload Rate (Kbps) (e)	Price Per Month (f)	Standalone/Pckg (f)	Type Of Technology (g)
Atlanta	266	181	121	768	256	39.99	Package	Fiber to the Home
Bevier	380	210	132	768	256	39.99	Package	Fiber to the Home
Bosworth	201	112	84	768	256	39.99	Package	DSL
Bucklin	415	229	137	768	256	39.99	Package	Fiber to the Home
Bynumville	187	93	69	768	256	39.99	Package	DSL
Callao	220	124	72	768	256	39.99	Package	Fiber to the Home
Clifton Hill	146	64	50	768	256	39.99	Package	Fiber to the Home
DeWitt	107	55	40	768	256	39.99	Package	Fiber to the Home
Ethel	110	53	37	768	256	39.99	Package	Fiber to the Home
Excello	266	174	114	768	256	39.99	Package	Fiber to the Home
Forest Green	79	39	31	768	256	39.99	Package	DSL
Hale	345	223	135	768	256	39.99	Package	Fiber to the Home
Huntsville	903	435	294	768	256	39.99	Package	Fiber to the Home
Jacksonville	347	197	99	768	256	39.99	Package	Fiber to the Home
New Boston	84	47	42	768	256	39.99	Package	DSL
New Cambria	219	122	83	768	256	39.99	Package	Fiber to the Home
Prairie Hill	163	102	54	768	256	39.99	Package	DSL
Salisbury	1,136	537	302	768	256	39.99	Package	Fiber to the Home
Total	5,574	2,997						

421864mo3017
5 of 9

USDA-RUS

OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER DESIGNATION: MO0535

PERIOD ENDING: December, 2012

INSTRUCTIONS- See RUS Bulletin 1744-2

PART D. SYSTEM DATA

1. No. Plant Employees	2. No. Other Employees	3. Square Miles Served	4. Access Lines per Square Mile	5. Subscribers per Route Mile
18	8	1,245	4.76	1.59

PART E. TOLL DATA

1. Study Area ID Code(s)
   - a. 421864
   - b.
   - c.
   - d.
   - e.
   - f.
   - g.
   - h.
   - i.
   - j.

2. Types of Toll Settlements (Check one)

Interstate:	☐ Average Schedule	☒ Cost Basis
Intrastate:	☐ Average Schedule	☐ Cost Basis

PART F. FUNDS INVESTED IN PLANT DURING YEAR

1. RUS, RTB, & FFB Loan Funds Expended	0
2. Other Long-Term Loan Funds Expended	0
3. Funds Expended Under RUS Interim Approval	0
4. Other Short-Term Loan Funds Expended	0
5. General Funds Expended (Other than Interim)	1,209,325
6. Salvaged Materials	0
7. Contribution in Aid to Construction	0
8. Gross Additions to Telecom. Plant (1 thru 7)	1,209,325

PART G. INVESTMENTS IN AFFILIATED COMPANIES

INVESTMENTS	CURRENT YEAR DATA		CUMULATIVE DATA		
	Investment This Year	Income/Loss This Year	Cumulative Investment To Date	Cumulative Income/Loss To Date	Current Balance
(a)	(b)	(c)	(d)	(e)	(f)
1. Investment in Affiliated Companies - Rural Development	0	0	69,035	0	69,035
2. Investment in Affiliated Companies - Nonrural Development	6,000,000	605,674	43,397,968	0	43,397,968

USDA-RUS

OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

BORROWER DESIGNATION
MO0535

PERIOD ENDING
December, 2012

PART H. CURRENT DEPRECIATION RATES

Are corporation's depreciation rates approved by the regulatory authority with jurisdiction over the provision of telephone services? (Check one) [X] YES [ ] NO

EQUIPMENT CATEGORY	DEPRECIATION RATE
1. Land and support assets - Motor Vehicles	
2. Land and support assets - Aircraft	
3. Land and support assets - Special purpose vehicles	
4. Land and support assets - Garage and other work equipment	10.00%
5. Land and support assets - Buildings	2.50%
6. Land and support assets - Furniture and Office equipment	5.00%
7. Land and support assets - General purpose computers	
8. Central Office Switching - Digital	
9. Central Office Switching - Analog & Electro-mechanical	
10. Central Office Switching - Operator Systems	
11. Central Office Transmission - Radio Systems	
12. Central Office Transmission - Circuit equipment	10.00%
13. Information origination/termination - Station apparatus	
14. Information origination/termination - Customer premises wiring	
15. Information origination/termination - Large private branch exchanges	
16. Information origination/termination - Public telephone terminal equipment	
17. Information origination/termination - Other terminal equipment	
18. Cable and wire facilities - Poles	4.50%
19. Cable and wire facilities - Aerial cable - Metal	4.00%
20. Cable and wire facilities - Aerial cable - Fiber	4.00%
21. Cable and wire facilities - Underground cable - Metal	
22. Cable and wire facilities - Underground cable - Fiber	
23. Cable and wire facilities - Buried cable - Metal	4.00%
24. Cable and wire facilities - Buried cable - Fiber	4.00%
25. Cable and wire facilities - Conduit systems	
26. Cable and wire facilities - Other	

USDA-RUS OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS	BORROWER DESIGNATION MO0535
INSTRUCTIONS – See help in the online application.	PERIOD ENDED December, 2012

	PART I – STATEMENT OF CASH FLOWS	
1.	**Beginning Cash (Cash and Equivalents plus RUS Construction Fund)**	7,666,917
	CASH FLOWS FROM OPERATING ACTIVITIES	
2.	**Net Income**	1,800,552
	Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities	
3.	Add: Depreciation	2,943,888
4.	Add: Amortization	0
5.	Other (Explain) Abandoned Plant	(129,544)
	Changes in Operating Assets and Liabilities	
6.	Decrease/(Increase) in Accounts Receivable	3,984,936
7.	Decrease/(Increase) in Materials and Inventory	(137,541)
8.	Decrease/(Increase) in Prepayments and Deferred Charges	31,405
9.	Decrease/(Increase) in Other Current Assets	0
10.	Increase/(Decrease) in Accounts Payable	(496,333)
11.	Increase/(Decrease) in Advance Billings & Payments	0
12.	Increase/(Decrease) in Other Current Liabilities	4,096
13.	**Net Cash Provided/(Used) by Operations**	8,001,459
	CASH FLOWS FROM FINANCING ACTIVITIES	
14.	Decrease/(Increase) in Notes Receivable	0
15.	Increase/(Decrease) in Notes Payable	0
16.	Increase/(Decrease) in Customer Deposits	5,200
17.	Net Increase/(Decrease) in Long Term Debt (Including Current Maturities)	5,521,256
18.	Increase/(Decrease) in Other Liabilities & Deferred Credits	(28,358)
19.	Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital	351,247
20.	Less: Payment of Dividends	0
21.	Less: Patronage Capital Credits Retired	(892,878)
22.	Other (Explain) Accrued Income Taxes	67,948
23.	**Net Cash Provided/(Used) by Financing Activities**	5,024,415
	CASH FLOWS FROM INVESTING ACTIVITIES	
24.	Net Capital Expenditures (Property, Plant & Equipment)	(1,035,672)
25.	Other Long-Term Investments	(5,394,326)
26.	Other Noncurrent Assets & Jurisdictional Differences	276,675
27.	Other (Explain) Other Debts YTD	(118)
28.	**Net Cash Provided/(Used) by Investing Activities**	(6,153,441)
29.	**Net Increase/(Decrease) in Cash**	6,872,433
30.	**Ending Cash**	14,539,350

USDA-RUS **OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS**	BORROWER DESIGNATION MO0535
INSTRUCTIONS - See RUS Bulletin 1744-2	PERIOD ENDED December, 2012

NOTES TO THE OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS

USDA-RUS **OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS**	BORROWER DESIGNATION MO0535
INSTRUCTIONS - See RUS Bulletin 1744-2	PERIOD ENDED December, 2012
CERTIFICATION LOAN DEFAULT NOTES TO THE OPERATING REPORT FOR TELECOMMUNICATIONS BORROWERS	