

DOCKET FILE COPY ORIGINAL

American Broadband

1605 Washington Street • P.O. Box 400 • Blair, NE 68008
888.262.2661 • www.abbnebraska.com

REDACTED – FOR PUBLIC INSPECTION

October 21, 2013

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

Received & Inspected

OCT 29 2013

FCC Mail Room

Re: *In the Matter of Connect America Fund, A National Broadband Plan for Our Future, Establishing Just and Reasonable Rates for Local Exchange Carriers, High-Cost Universal Service Support, Developing a Unified Intercarrier Compensation Regime, Federal-State Joint Board on Universal Service, Lifeline and Link-Up, Universal Service Reform – Mobility Fund, WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208*

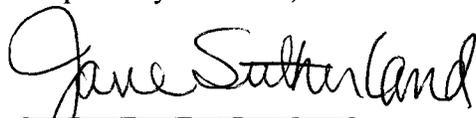
Dear Ms. Dortch:

On behalf of Arlington Telephone Co., The Blair Telephone Co., Eastern Nebraska Telephone Co., Rock County Telephone Co., HunTel CableVision, Inc., KLM Telephone Co. and Holway Telephone Co., please find enclosed two copies of each company's FCC Form 481, along with the redacted versions of the Confidential Financial Information.

One copy of the FCC Form 481, containing Confidential Financial Information is being filed under separate cover.

Please do not hesitate to contact me at (402) 426-6242 if you have any questions regarding this submission.

Respectfully submitted,



Jane Sutherland
Customer Operations Manager
American Broadband

No. of Copies rec'd 0+1
List ABCDE



Page 1
 Received & Inspected
 OCT 29 2013
 FCC Mail Room

FCC Form 481 - Carrier Annual Reporting Data Collection Form
 FCC Form 481
 OMB Control No. 3045-0085 (OMB Control No. 3045-0213)
 July 2013

<010> Study Area Code	421929
<015> Study Area Name	HOLWAY TEL CO
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Jane Sutherland
<035> Contact Telephone Number: Number of the person identified in data line <030>	402-426-6242
<039> Contact Email Address: Email of the person identified in data line <030>	jsutherland@americonbb.com

ANNUAL REPORTING FOR ALL CARRIERS

	94.915 Completion Required	94.422 Completion Required
--	----------------------------------	----------------------------------

	94.915 Completion Required	94.422 Completion Required
<100> Service Quality Improvement Reporting <i>(complete attached worksheets)</i>	4	4
<200> Outage Reporting (voice) <i>(complete attached worksheets)</i>	4	4
<210> <input type="checkbox"/> <i>(check box if no outages to report)</i>		
<300> Unfulfilled Service Requests (voice) <i>(attach descriptive documents)</i>	4	4
<310> Detail on Attempts (voice)		
<320> Unfulfilled Service Requests (broadband) <i>(attach descriptive documents)</i>	4	4
<330> Detail on Attempts (broadband)		
<400> Number of Complaints per 1,000 customers (voice)		
<410> Fixed	0.0	
<420> Mobile	0.0	
<430> Number of Complaints per 1,000 customers (broadband)		
<440> Fixed		
<450> Mobile		
<500> Service Quality Standards & Consumer Protection Rules Compliance	4	4
<510> 421929H0510 <i>(attach descriptive documents)</i>	4	4
<600> Functionality in Emergency Situations	4	4
<610> 421929H0610 <i>(attach descriptive documents)</i>	4	4
<700> Company Price Offerings (voice) <i>(complete attached worksheets)</i>	4	4
<710> Company Price Offerings (broadband) <i>(complete attached worksheets)</i>	4	4
<800> Operating Companies and Affiliates <i>(complete attached worksheets)</i>	4	4
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input type="radio"/>	4	4
<1000> Voice Services Rate Comparability <i>(check to indicate certification)</i>	4	4
<1010> <input type="checkbox"/> <i>(attach descriptive documents)</i>		
<1100> Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/>	4	4
<1110> <input type="checkbox"/> <i>(if not, check to indicate certification)</i>		
<1200> Terms and Condition for Lifeline Customers <i>(complete attached worksheets)</i>	4	4

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>	4	4
<2005>	<i>(complete attached worksheets)</i>		

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	<i>(check to indicate certification)</i>	4	4
<3005>	<i>(complete attached worksheets)</i>		

**(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	421929
<015> Study Area Name	HOLWAY TEL CO
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Jane Sucherland
<035> Contact Telephone Number - Number of person identified in data line <030>	402-426-6242
<039> Contact Email Address - Email Address of person identified in data line <030>	jsutherland@americonbb.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.

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.

<input type="checkbox"/>	<input type="checkbox"/>

**(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	421929
<015>	Study Area Name	BOLWAY TEL CO
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Jane Sutherland
<035>	Contact Telephone Number - Number of person identified in data line <030>	402-426-6242
<039>	Contact Email Address - Email Address of person identified in data line <030>	jsutherland@americantbb.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:

- <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)

**(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	421929
<015>	Study Area Name	HOLWAY TEL CO
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Jane Sutherland
<035>	Contact Telephone Number - Number of person identified in data line <030>	402-426-6242
<039>	Contact Email Address - Email Address of person identified in data line <030>	jsutherland@americantbb.com

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

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

<010>	Study Area Code	421929
<015>	Study Area Name	HOLWAY TEL CD
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Jane Sutherland
<035>	Contact Telephone Number - Number of person identified in data line <030>	402-426-6242
<039>	Contact Email Address - Email Address of person identified in data line <030>	jsutherland@americasnb.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans 421929M01210
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	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/ OMB Control No. 3060-0819
<i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	July 2013

<010>	Study Area Code	421929
<015>	Study Area Name	HOLWAY TEL CO
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Jane Sutherland
<035>	Contact Telephone Number - Number of person identified in data line <030>	402-426-6242
<039>	Contact Email Address - Email Address of person identified in data line <030>	jsutherland@americantbb.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)(1),(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	<input type="checkbox"/>
	Name of Attached Document listing Required information	_____

(3000) Rate Of Return Carrier Additional Documentation	FCC Form 481
Date Collection Form	OMB Control No. 3060-0989 / OMB Control No. 3060-0819
	July 2013

<310>	Study Area Code	421929
<315>	Study Area Name	HOLWAY TEL CO
<320>	Program Year	2014
<330>	Contact Name - Person USAF should contact regarding this data	Jane Su cherland
<335>	Contact Telephone Number - Number of person identified in data in ex 310>	402-426-6242
<339>	Contact Email Address - Email Address of person identified in data in ex 310>	jsu@hclandpower.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, contains the required information pursuant to § 54.313(f)(1)(i) as a recipient of CAF funds (support) shall provide the number, names and addresses of community anchor institutions to which it is providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information <input type="checkbox"/>
3012	Community Anchor Institutions (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required Information
3013	Does your company's Privacy Policy (47 CFR § 54.313(f)(2))	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
3014	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 required.	<input type="checkbox"/> Yes / <input type="checkbox"/> No
3015	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	<input type="checkbox"/>
3016	PDF of Balance Sheet, Income Statement, and Statement of Cash Flows	<input type="checkbox"/>
3017	If the response is on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information
3018	If the response is no on line 3014, is your company audited? If the response is on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
3019	Electronic copy of their audited financial statement or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications	<input type="checkbox"/>
3020	PDF of Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>
3021	Management letter issued by the independent certified public accountant that performed the company's financial audit	<input checked="" type="checkbox"/>
3022	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: Copy of the 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.	<input checked="" type="checkbox"/>
3023	Underlying information subjected to a review by an independent certified public accountant	<input type="checkbox"/>
3024	Underlying information subjected to an officer certification	<input type="checkbox"/>
3025	PDF of Balance Sheet, Income Statement, and Statement of Cash Flows	<input checked="" type="checkbox"/>
3026	Attach their original listing required information	Name of Attached Document Listing Required Information 421929M03026

Certification - Reporting Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0866/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	421929	
<015> Study Area Name	HOLWAY TEL CO	
<020> Program Year	2014	
<030> Contact Name - Person USAC should contact regarding this data	Jane Sutherland	
<035> Contact Telephone Number - Number of person identified in data line <030>	402-426-6242	
<039> Contact Email Address - Email Address of person identified in data line <030>	jsutherland@americantbb.com	

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

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or U 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 attachment is accurate.	
Name of Reporting Carrier	HOLWAY TEL CO
Signature of Authorized Officer	CERTIFIED ONLINE Date
Printed name of Authorized Officer	Joe Jecensky
Title or position of Authorized Officer	President
Telephone number of Authorized Officer	402 426 6245
Study Area Code of Reporting Carrier	421929 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 USC §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 USC § 1001.	

Attachments

10/14/2013

Redacted – for Public Inspection

Holway Telephone Company

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

Service Quality Standards

The Company:

- Provides voice grade access to the public switched network.
- Provides flat rated local exchange service with no additional charge to end users.
- Provides access to the emergency services provided by local government or other public safety organizations, such as 911 and enhanced 911.
- Provides toll blocking and toll limitation services.
- Advertises the availability of its services and the charges using media of general distribution and on its website.
- Maintains a business office providing customers with access to a customer service representative either in person or via a local telephone call or toll-free telephone number during normal business hours.
- Directs after hour calls to the Company's help desk.
- Directs trouble reports to the on-call technician.
- Tracks all service orders to ensure they are completed in a timely manner.
- Measures its service connection and service interruption performance on a regular basis.
- Trains employees to:
 - Answer all incoming calls promptly.
 - Respond to all inquiries for information promptly and courteously.
 - Investigate thoroughly all customer complaints and handle appropriately according to the Company's guidelines for resolution of customer complaints.
 - Be knowledgeable about products and service offerings so they can assist the customer with selecting the best service option.
- Has a process for periodic inspection, testing and preventive maintenance of its equipment to permit the rendering of safe, adequate and continuous service at all times.

Consumer Protection Rules

The Company has established operating procedures designed to facilitate compliance with applicable consumer protection rules which include compliance with the Customer Proprietary Network Information (CPNI) rules. The operating procedures include:

- Appointment of a compliance officer.
- A manual detailing the specific procedures for protecting consumer information.
- Employee training on an annual basis.
- A disciplinary process for improper use of consumer information.

Redacted for Public Inspection

**Holway Telephone Company
KLM Telephone Company**

Functionality in Emergency Situations

Back-Up Power

Both Rich Hill and Maitland switches have 7-8 hours of battery backup. Both have a fixed generator with auto startup that will carry the total electrical load of the building. CO's in Skidmore, Metz, Deerfield, and Richards are designed with 7-8 hours of battery backup but do not have a fixed generator. We have portable generators to backup the batteries. All DLC's are for 5-6 hours of battery backup. We have portable generators as a backup to the batteries in the DLC's.

Rerouting of Traffic around Damaged Facilities

The Rich Hill switch's toll traffic routes to BlueBird Networks by fiber which is redundant and diverse. Maitland switch's toll traffic routes to CenturyLink by fiber which is redundant. Each DLC has a working fiber circuit with a hot standby.

Traffic Spikes

Our DLC's are designed with a 4:1 concentration ratio to our switches. Trunk capacity to BlueBird Network and CenturyLink Network is set by high busy hour traffic capacity. The switches in Rich Hill and Maitland are non-blocking.

Redacted – for Public Inspection

Holway Telephone Company

Lifeline Assistance Program Terms and Conditions

Lifeline Assistance Eligibility

The LIFELINE ASSISTANCE PROGRAM and the DISABLED PROGRAM are plans which assist qualified low-income applicants with reductions in their monthly local exchange service rate. The applicant applies for a single telephone line at the applicant's principal place of residence. The Lifeline Program is limited to one benefit per household, consisting of either wireline or wireless service. Lifeline is a government benefit program, and consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be barred from the program. Qualified applicants of LIFELINE shall have their monthly local exchange service rate reduced by the federal support of \$9.25, in addition to the state support of \$3.50. Qualified applicants of the DISABLED program are eligible for state support of \$3.50. Eligibility is reviewed annually. To establish continued eligibility, Lifeline subscribers will need to submit an annual recertification form signed under penalty of perjury that you still participate in a qualifying program or meet the income-based eligibility threshold. Your benefits will be discontinued when you no longer meet the requirements or when the annual recertification form is not received. Customers who are no longer eligible for Lifeline benefits must notify their service provider.

To be eligible for LIFELINE, an applicant must participate in one of the following:

- 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

To be eligible for the DISABLED program, an applicant must participate in one of the following:

- Veteran Administration Disability Benefits
- State Blind Pension
- State Aid to Blind Persons
- State Supplemental Disability Assistance
- Federal Social Security Disability
- Federal Supplemental Security Income

Applications are available by contacting Holway Telephone Company at 888-438-4490.

Numbers of Minutes-of-Use Provided as Part of Lifeline Program Service

Holway Telephone Company's Voice lifeline service includes unlimited local minutes-of-use within the toll-free calling area. Holway's Voice Lifeline Plan does not include any free minutes-of-use for toll. Toll is billed at the standard toll rate depending on which interexchange carrier

the consumer subscribes to for toll service. As part of the Lifeline service, Toll blocking is available to eligible consumers at no cost.

Rates

Subscribers may receive the Lifeline credit on any type or grade of local service, including bundled services that are normally offered by Holway Telephone Company. Advertised rates do not include any applicable taxes or surcharges.

Recertification of Lifeline Eligibility

Lifeline recipients are required to recertify their eligibility annually. Failure to properly recertify a recipient's continued eligibility for Lifeline will result in termination of the Lifeline recipient's monthly Lifeline discount and de-enrollment from Lifeline.

Additional Lifeline Program Information

Lifeline is limited to one benefit per household, consisting of either wireline or wireless service. A household is defined as an individual or group of individuals who live together at the same address and share income and expenses. Lifeline is a government benefit program, and consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be barred from the program.

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Holway Telephone Company (421900)

ATTACHMENT - LINE 3019-3021

ATTACHMENT REDACTED IN ENTIRETY

FCC Form 481 - Carrier Annual Reporting Data Collection Form FCC Form 481
OMB Control No. 3060-0096/OMB Control No. 3060-0019
July 2013

<010> Study Area Code 421909

<015> Study Area Name KLR TEL CO

<020> Program Year 2014

<030> Contact Name: Person USAC should contact with questions about this data Jane Suchterland

<035> Contact Telephone Number: Number of the person identified in data line <030> 402-426-6242

<039> Contact Email Address: Email of the person identified in data line <030> jsuchterland@americonbb.com

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ANNUAL REPORTING FOR ALL CARRIERS 54,518 Completion Required 94,422 Completion Required

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<400>	Number of Complaints per 1,000 customers (voice)	4	4
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<420>	Mobile 0.0		
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<450>	Mobile		
<500>	Service Quality Standards & Consumer Protection Rules Compliance (check to indicate certification)	4	4
<510>	4219090510 (attach descriptive documents)	4	4
<600>	Functionality in Emergency Situations (check to indicate certification)	4	4
<610>	4219090610 (attach descriptive documents)	4	4
<700>	Company Price Offerings (voice) (complete attached worksheets)		
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<800>	Operating Companies and Affiliates (complete attached worksheets)	4	4
<900>	Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/> (if yes, complete attached worksheets)	4	
<1000>	Voice Services Rate Comparability (check to indicate certification)		
<1010>	<input type="checkbox"/> (attach descriptive documents)		
<1100>	Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/> (if not, check to indicate certification)	4	
<1110>	<input type="checkbox"/> (complete attached worksheets)		
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<2000>	(check to indicate certification)		
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<3000>	(check to indicate certification)	4	
<3005>	(complete attached worksheets)	4	

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0985/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	421900
<015> Study Area Name	RLN TEL CO
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Jane Sutherland
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- <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.

<input type="checkbox"/>	<input type="checkbox"/>

