(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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

<810>	Reporting Carrier	Oneida Telephone Exchange
<811>	Holding Company	NA
<812>	Operating Company	Oneida Telephone Exchange

<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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

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

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

		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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

341066111210.pdf

Name of Attached Document

<1220> Link to Public Website HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☑

<1222> Details on the number of minutes provided as part of the plan, ☑

<1223> Additional charges for toll calls, and rates for each such plan. ☑

{2000} Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

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

<010>	Study Area Code	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.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 document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

<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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.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.

(3010) **Progress Report on 5 Year Plan**
Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year. ☐

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

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 document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) ☑

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows ☑

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

341066113017.pdf

Name of Attached Document Listing Required Information

(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) Document(s) for 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) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3026) Attach the worksheet listing required information

Name of Attached Document Listing Required Information

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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.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:

Signature of Authorized Officer: Date

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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

<010>	Study Area Code	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.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) Gary Peterson 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: Gary Peterson

Name of Reporting Carrier: ONEIDA TEL EXCHANGE

Signature of Authorized Officer: CERTIFIED ONLINE Date: 06/02/2014

Printed name of Authorized Officer: Gary Peterson

Title or position of Authorized Officer: President

Telephone number of Authorized Officer: 3094833111 ext.

Study Area Code of Reporting Carrier: 341066 Filing Due Date for this form: 06/30/2014

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: ONEIDA TEL EXCHANGE

Name of Authorized Agent or Employee of Agent: Tom Korte

Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE Date: 06/02/2014

Printed name of Authorized Agent or Employee of Agent: Tom Korte

Title or position of Authorized Agent or Employee of Agent Senior Consultant, GVNW Consulting

Telephone number of Authorized Agent or Employee of Agent: 2178621944 ext.

Study Area Code of Reporting Carrier: 341066 Filing Due Date for this form: 06/30/2014

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

(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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
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<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

<701>	Residential Local Service Charge Effective Date	1/1/2014
<702>	Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
IL	Oneida		FR	20.5	0.0	0.0	0.0	20.5

(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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Tom Korte
<035>	Contact Telephone Number - Number of person identified in data line <030>	2178621944 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

<711>

<a1> State	<a2> Exchange (ILEC)	<b1> Residential Rate	<b2> State Regulated Fees	<c> Total Rates and Fees	<d1> Broadband Service - Download Speed (Mbps)	<d2> Broadband Service -Upload Speed (Mbps)	<d3> Usage Allowance (GB)	<d4> Usage Allowance Action Taken When Limit Reached (select)
IL	All	49.95	0.0	49.95	25.0	10.0	0.0	Other, NA
IL	All	60.0	0.0	60.0	40.0	10.0	0.0	Other, NA
IL	All	70.0	0.0	70.0	50.0	10.0	0.0	Other, NA

(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	341066
<015>	Study Area Name	ONEIDA TEL EXCHANGE
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<039>	Contact Email Address - Email Address of person identified in data line <030>	tkorte@gvnw.com

<810>	Reporting Carrier	Oneida Telephone Exchange
<811>	Holding Company	NA
<812>	Operating Company	Oneida Telephone Exchange

<813>

<a1> Affiliates	<a2> SAC	<a3> Doing Business As Company or Brand Designation
Oneida Network Services, Inc.	349001	

The following is information for Oneida Telephone Exchange regarding compliance with applicable service quality standards and consumer protection rules.

Oneida Telephone Exchange complies with the service quality standards pursuant to Subpart A, Section 730.100 of Title 83, Chapter 1, Subchapter f of the Illinois Administrative Code. Subpart E of this section addresses "Standards of Quality of Service". Subpart A, Section 730.115 requires the quarterly reporting of various installation, repair and answer time data for Illinois Commerce Commission and public review.

Oneida Telephone Exchange complies with the requirements of 47 CFR Part 64 Subpart U, Customer Proprietary Network Information and Subpart Y, Truth in Billing Requirements for Common Carrier, and Federal Trade Commission Red Flag rules to prevent identity theft. A manual for CPNI and Red Flags is in place and employee training is conducted annually. New hires are instructed on the programs as required by their job functions.

The following is information regarding the ability of Oneida Telephone Exchange to function in emergency situations.

Oneida Telephone Exchange has a generator and batteries for backup power for the switch. Battery backup power is available for the Company's ONTs associated with FTTH. The Company's network includes a ring configuration with two routes out of the exchange to connecting company facilities. There is more than adequate switching and transport capacity available in the Company's network to handle potential traffic spikes during emergency situations.

Voice Services Rate Comparability Information for Oneida Telephone Exchange

As evidenced by the data provided on line 700 of FCC Form 481, the Company's voice service pricing is no more than 2 standard deviations above the national average urban rate ($46.96) as announced by the Wireline Competition Bureau on March 20, 2014 (DA 14-384).

The following is information describing the voice telephony service plan offered by Oneida Telephone Exchange to Lifeline Program subscribers.

Oneida Telephone Exchange offers residential basic local exchange service to Lifeline subscribers. This service provides a network access line and unlimited calling on a flat rate basis to all exchanges within the local calling area. The rate for this service is $28.34 less the Lifeline discount of $9.25 for a total of $18.09.

For toll (long distance) calls outside of the local calling area, the Lifeline subscriber must choose an interexchange carrier and a long distance calling plan from that carrier. The rates for toll calls will be the rates charged by the Lifeline subscriber's interexchange carrier for the chosen long distance calling plan.