

EXHIBIT 21

FCC Form 497
 April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
 3060-0819
 Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information		(7) Filing Information	
Company Legal Name:	Gearheart Communications Inc	a) Submission Date	02/04/2014
Contact Name:	DONNA SCAGGS	b) Data Month	January 2014
Mailing Address:	P. O. BOX 542	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	HAROLD, KY 41635		
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>1004</u>	x \$ <u>9.25</u>	= \$ <u>9287</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u>	= \$ <u>0</u>
		(not to exceed \$34.25)	
Total Federal Lifeline Support Claimed (10)			\$ <u>9287</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
 (the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
 (not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 9287 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 9287

If you have any questions, please call USAC at (866) 873-4727 Toll Free

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(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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02/04/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	02/27/2014
Contact Name:	Donna Scaggs	b) Data Month	February 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>986</u>	x \$ <u>9.25</u>	= \$ <u>9121</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>9121</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 9121 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 9121

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LIFELINE WORKSHEET

OMB Approval
3060-0819

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I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

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02/27/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	03/28/2014
Contact Name:	DONNA SCAGGS	b) Data Month	March 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>1002</u>	x \$ <u>9.25</u>	= \$ <u>9269</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>9269</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)
 Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0
 Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)
 Total Connection Charges Waived (16) \$ 0.0
 Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 9269 Total TLS \$ 0 Total Tribal Link Up \$ 0
 Total Dollars (19) \$ 9269

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LIFELINE WORKSHEET

OMB Approval
3060-0819

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03/28/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	04/28/2014
Contact Name:	DONNA SCAGGS	b) Data Month	April 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one)	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
	HAROLD, KY 41635		
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>990</u>	x \$ <u>9.25</u>	= \$ <u>9158</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>9158</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 9158 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 9158

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LIFELINE WORKSHEET

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04/28/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	05/29/2014
Contact Name:	DONNA SCAGGS	b) Data Month	May 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one)	Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>
	HAROLD, KY 41635		
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>984</u>	x \$ <u>9.25</u>	= \$ <u>9102</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>9102</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 9102 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 9102

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05/29/2014

Donna Scaggs

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Donna Scaggs

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LIFELINE WORKSHEET

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(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information (7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	06/25/2014
Contact Name:	DONNA SCAGGS	b) Data Month	June 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>993</u>	x \$ <u>9.25</u>	= \$ <u>9185</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>9185</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 9185 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 9185

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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06/25/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

NOTICE: To implement section 254 of the Communications Act of 1934, as amended, the Federal Communications Commission has adopted changes to the federal low-income programs.

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FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	07/30/2014
Contact Name:	DONNA SCAGGS	b) Data Month	July 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>938</u>	x \$ <u>9.25</u>	= \$ <u>8677</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>8677</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 8677 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 8677

If you have any questions, please call USAC at (866) 873-4727 Toll Free

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

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07/30/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	08/29/2014
Contact Name:	DONNA SCAGGS	b) Data Month	August 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/ Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>930</u>	x \$ <u>9.25</u>	= \$ <u>8603</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>8603</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)
 Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0
 Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)
 Total Connection Charges Waived (16) \$ 0.0
 Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 8603 Total TLS \$ 0 Total Tribal Link Up \$ 0
 Total Dollars (19) \$ 8603

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

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I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

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08/29/2014

Regulatory Manager

DATE

OFFICER SIGNATURE

Donna Scaggs

Regulatory Manager

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	10/01/2014
Contact Name:	DONNA SCAGGS	b) Data Month	September 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>941</u>	x \$ <u>9.25</u>	= \$ <u>8704</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>8704</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)
 Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0
 Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)
 Total Connection Charges Waived (16) \$ 0.0
 Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 8704 Total TLS \$ 0 Total Tribal Link Up \$ 0
 Total Dollars (19) \$ 8704

LIFELINE WORKSHEET

(20) CERTIFICATIONS AND SIGNATURES

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10/01/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	10/29/2014
Contact Name:	DONNA SCAGGS	b) Data Month	October 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>853</u>	x \$ <u>9.25</u>	= \$ <u>7890</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7890</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7890 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7890

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

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(20) CERTIFICATIONS AND SIGNATURES

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10/29/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

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(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	12/04/2014
Contact Name:	DONNA SCAGGS	b) Data Month	November 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>826</u>	x \$ <u>9.25</u>	= \$ <u>7641</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7641</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7641 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7641

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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12/04/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	12/31/2014
Contact Name:	DONNA SCAGGS	b) Data Month	December 2014
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>825</u>	x \$ <u>9.25</u>	= \$ <u>7631</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7631</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7631 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7631

LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

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I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

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12/31/2014

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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FCC Form 497
 April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
 3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	02/04/2015
Contact Name:	DONNA SCAGGS	b) Data Month	January 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@mis.net		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>802</u>	x \$ <u>9.25</u>	= \$ <u>7419</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7419</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7419 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7419

If you have any questions, please call USAC at (866) 873-4727 Toll Free

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

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02/04/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	03/03/2015
Contact Name:	DONNA SCAGGS	b) Data Month	February 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	HAROLD, KY 41635		
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>816</u>	x \$ <u>9.25</u>	= \$ <u>7548</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7548</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7548 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7548

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

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03/03/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

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(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	03/31/2015
Contact Name:	DONNA SCAGGS	b) Data Month	March 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one)	Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>814</u>	x \$ <u>9.25</u>	= \$ <u>7530</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7530</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7530 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7530

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

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03/31/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

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LIFELINE WORKSHEET

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(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	04/28/2015
Contact Name:	DONNA SCAGGS	b) Data Month	April 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>815</u>	x \$ <u>9.25</u>	= \$ <u>7539</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7539</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7539 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7539

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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04/28/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

NOTICE: To implement section 254 of the Communications Act of 1934, as amended, the Federal Communications Commission has adopted changes to the federal low-income programs.

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	05/29/2015
Contact Name:	DONNA SCAGGS	b) Data Month	May 2015
Mailing Address:	P. O. BOX 166	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>820</u>	x \$ <u>9.25</u>	= \$ <u>7585</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7585</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7585 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7585

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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05/29/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	07/01/2015
Contact Name:	Donna Scaggs	b) Data Month	June 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>813</u>	x \$ <u>9.25</u>	= \$ <u>7520</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7520</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7520 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7520

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

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I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

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07/01/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	07/22/2015
Contact Name:	DONNA SCAGGS	b) Data Month	July 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>803</u>	x \$ <u>9.25</u>	= \$ <u>7428</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7428</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7428 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7428

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

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07/22/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	08/26/2015
Contact Name:	DONNA SCAGGS	b) Data Month	August 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one)	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
	HAROLD, KY 41635		
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>790</u>	x \$ <u>9.25</u>	= \$ <u>7308</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7308</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)
 Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0
 Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)
 Total Connection Charges Waived (16) \$ 0.0
 Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7308 Total TLS \$ 0 Total Tribal Link Up \$ 0
 Total Dollars (19) \$ 7308

LIFELINE WORKSHEET

(20) CERTIFICATIONS AND SIGNATURES

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08/26/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Manager

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	09/28/2015
Contact Name:	DONNA SCAGGS	b) Data Month	September 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	
	HAROLD, KY 41501		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>759</u>	x \$ <u>9.25</u>	= \$ <u>7021</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>7021</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 7021 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 7021

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

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09/28/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	10/29/2015
Contact Name:	DONNA SCAGGS	b) Data Month	October 2015
Mailing Address:	P. O. BOX 160	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	HAROLD, KY 41635		
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>755</u>	x \$ <u>9.25</u>	= \$ <u>6984</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>6984</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 6984 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6984

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

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10/29/2015

Regulatory Mgr.

DATE

OFFICER SIGNATURE

Donna Scaggs

Regulatory Mgr.

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	12/03/2015
Contact Name:	Donna Scaggs	b) Data Month	November 2015
Mailing Address:	P. O. BOX 542	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting
	HAROLD, KY 41635		
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>728</u>	x \$ <u>9.25</u>	= \$ <u>6734</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>6734</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 6734 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6734

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

(20) CERTIFICATIONS AND SIGNATURES

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12/03/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	12/24/2015
Contact Name:	DONNA SCAGGS	b) Data Month	December 2015
Mailing Address:	20 Laynesville Rd. P. O. BOX 160 HAROLD, KY 41635	c) Type of Filing (check one)	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>728</u>	x \$ <u>9.25</u>	= \$ <u>6734</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>6734</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 6734 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6734

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

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12/24/2015

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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FCC Form 497
 April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
 3060-0819

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408

(3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless

(5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	02/01/2016
Contact Name:	Donna Scaggs	b) Data Month	January 2016
Mailing Address:	20 Laynesville Rd.	c) Type of Filing (check one)	Original Revision <input checked="" type="checkbox"/>
	P. O. Box 160		
	Harold, KY 41635	d) State Reporting	KENTUCKY
Telephone Number:	606-479-6206		
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/ Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>729</u>	x \$ <u>9.25</u>	= \$ <u>6743</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>6743</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)

Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0

Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)

Total Connection Charges Waived (16) \$ 0.0

Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 6743 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6743

FCC Form 497
April 2012 Edition

LIFELINE WORKSHEET

OMB Approval
3060-0819
Avg. Burden Est. per Respondent: 2.5 Hrs.

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02/01/2016

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Mgr.

Donna Scaggs

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	03/02/2016
Contact Name:	DONNA SCAGGS	b) Data Month	February 2016
Mailing Address:	20 Laynesville Rd. P. O. BOX 160 HAROLD, KY 41635	c) Type of Filing (check one)	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>694</u>	x \$ <u>9.25</u>	= \$ <u>6420</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>6420</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)
 Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

Tribal Link Up (Available only to ETCs receiving High Cost support)

Number of Connections Waived (14) 0
 Charges Waived per Connection (15) \$ 0.00 (for multiple rates, use an average amount)
(not to exceed \$100)
 Total Connection Charges Waived (16) \$ 0.0
 Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 6420 Total TLS \$ 0 Total Tribal Link Up \$ 0
 Total Dollars (19) \$ 6420

LIFELINE WORKSHEET

(20) CERTIFICATIONS AND SIGNATURES

I certify that my company will pass through the full amount of all Non-Tribal and Tribal federal Lifeline support for which it seeks reimbursement, as well as all applicable intrastate Lifeline support, to all qualifying low-income subscribers by an equivalent reduction in the subscriber's monthly bill for voice telephony service, or by offering a pre-paid wireless plan that includes a set number of minutes of use per month.

I certify that my company is in compliance with all of the Lifeline program rules, and, to the extent required, have obtained valid certifications for each subscriber for whom my company seeks reimbursement.

Based on the information known to me or provided to me by employees responsible for the preparation of the data being submitted, I certify under penalty of perjury that the data contained in this form has been examined and reviewed and is true, accurate, and complete.

I acknowledge the Fund Administrator's authority to request additional supporting information as may be necessary.

Persons willfully making false statements on this form can be punished by fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. §1001.

03/02/2016

Donna Scaggs

DATE

OFFICER SIGNATURE

Regulatory Manager

Donna Scaggs

OFFICER TITLE

OFFICER NAME

NOTICE: To implement section 254 of the Communications Act of 1934, as amended, the Federal Communications Commission has adopted changes to the federal low-income programs.

The following worksheet provides the means by which eligible telecommunications carriers will be reimbursed by the Universal Service Administrative Company (USAC) for their participation in these programs. Failing to collect the information, or collecting it less frequently, would prevent the Commission from implementing sections 214 and 254 of the Act, would thwart Congress' goals of providing affordable service and access to advanced services throughout the nation, and would result in eligible telecommunications carriers not receiving universal service support reimbursements in a timely fashion.

We have estimated that each response to this collection of information will take, on average, three hours for each respondent. Our estimate includes the time to read this data request, review existing records, gather and maintain required data, and complete and review the response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERMs, Washington, D.C. 20554, Paperwork Reduction Project (3060-0819). We will also accept your comments on the burden estimate via the Internet if you send them to PRA@fcc.gov. Please DO NOT SEND the data requested to this e-mail address.

Remember -- An agency may not conduct or sponsor, and a person is not required to respond to a collection of information sponsored by the Federal government unless it displays a currently valid OMB control number. This information collection has been assigned OMB Control Number: 3060-0819.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your worksheet may be referred to the Federal, state or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your worksheets may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

If you do not provide the information we request on the form, the FCC may delay processing of your worksheet or may return your worksheet without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. Section 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. Section 3501, et seq.

LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001570 (2) Study Area Code 260408
 (3) Filer 499 ID 802101 (4) Technology Type (check one) Wireline Wireless
 (5) ETC Designation Type (Check one): Lifeline Only High Cost/Low Income

(6) Organization Information

(7) Filing Information

Company Legal Name:	Gearheart Communications Inc	a) Submission Date	03/29/2016
Contact Name:	Donna Scaggs	b) Data Month	March 2016
Mailing Address:	20 Laynesville Rd. P. O. Box 159 Harold, KY 41635	c) Type of Filing (check one)	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
Telephone Number:	606-479-6206	d) State Reporting	KENTUCKY
Fax Number:	606-478-8923		
E-mail Address:	donnasc@gearheart.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>699</u>	x \$ <u>9.25</u>	= \$ <u>6466</u>
Tribal Low-Income Subscribers Receiving federal Lifeline Support	(9) <u>0</u>	x \$ <u>0.00</u> <small>(not to exceed \$34.25)</small>	= \$ <u>0</u>
Total Federal Lifeline Support Claimed (10)			\$ <u>6466</u>

Toll Limitation Services (TLS)

Cost of Providing TLS per Subscriber (11) 0.000000
(the lesser of incremental cost or \$3 in 2012 /\$2 in 2013)
 Number of TLS Subscribers (12) 0

Total TLS Support Claimed (13) \$ 0

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(not to exceed \$100)
 Total Connection Charges Waived (16) \$ 0.0
 Deferred Interest (17) \$ 0.00

Total Tribal Link Up Support Claimed (18) \$ 0

ETC Payment

Total Lifeline \$ 6466 Total TLS \$ 0 Total Tribal Link Up \$ 0
 Total Dollars (19) \$ 6466

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