

Leslie County Telephone Company

Question 2

Federal Communication Commission

Form 497

LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	01/29/2014
Contact Name:	Jody Jewell	b) Data Month	January 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one)	Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>708</u>	x \$ <u>9.25</u>	= \$ <u>6549</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>6549</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 \$ 6549 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6549

(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.

01/29/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

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.

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	03/04/2014
Contact Name:	Jody Jewell	b) Data Month	February 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>712</u>	x \$ <u>9.25</u>	= \$ <u>6586</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>6586</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 \$ 6586 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6586

(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.

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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03/04/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	04/08/2014
Contact Name:	Jody Jewell	b) Data Month	March 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>712</u>	x \$ <u>9.25</u>	= \$ <u>6586</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>6586</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 \$ 6586 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6586

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04/08/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	05/02/2014
Contact Name:	Jody Jewell	b) Data Month	April 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>710</u>	x \$ <u>9.25</u>	= \$ <u>6568</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>6568</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 \$ 6568 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6568

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05/02/2014

Sandy L. Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy L. Gaylor

OFFICER TITLE

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

(6) Organization Information

(7) Filing Information

Company Legal Name:	Lesile County Telephone Company	a) Submission Date	05/30/2014
Contact Name:	Jody Jewell	b) Data Month	May 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>701</u>	x \$ <u>9.25</u>	= \$ <u>6484</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>6484</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 \$ 6484 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6484

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	07/08/2014
Contact Name:	Jody Jewell	b) Data Month	June 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one)	Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>692</u>	x \$ <u>9.25</u>	= \$ <u>6401</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>6401</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 \$ 6401 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 6401

(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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07/08/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	07/29/2014
Contact Name:	Jody Jewell	b) Data Month	July 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>636</u>	x \$ <u>9.25</u>	= \$ <u>5883</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>5883</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 \$ 5883 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5883

(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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07/29/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	09/05/2014
Contact Name:	Jody Jewell	b) Data Month	August 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>520</u>	x \$ <u>9.25</u>	= \$ <u>4810</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>4810</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 \$ 4810 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4810

(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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09/05/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	09/29/2014
Contact Name:	Jody Jewell	b) Data Month	September 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>542</u>	x \$ <u>9.25</u>	= \$ <u>5014</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>5014</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 \$ 5014 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5014

(20) CERTIFICATIONS AND SIGNATURES

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09/29/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	11/06/2014
Contact Name:	Jody Jewell	b) Data Month	October 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>536</u>	x \$ <u>9.25</u>	= \$ <u>4958</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>4958</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 \$ 4958 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4958

(20) CERTIFICATIONS AND SIGNATURES

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11/06/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	12/03/2014
Contact Name:	Jody Jewell	b) Data Month	November 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>550</u>	x \$ <u>9.25</u>	= \$ <u>5088</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>5088</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 \$ 5088 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5088

(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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12/03/2014

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

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.

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	01/08/2015
Contact Name:	Jody Jewell	b) Data Month	December 2014
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/ Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>547</u>	x \$ <u>9.25</u>	= \$ <u>5060</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>5060</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 \$ 5060 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5060

(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.

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01/08/2015

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasury

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	01/05/2016
Contact Name:	Tracy Heidemann	b) Data Month	December 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4253	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>443</u>	x \$ <u>9.25</u>	= \$ <u>4098</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>4098</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 \$ 4098 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4098

(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.

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01/05/2016

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	02/06/2015
Contact Name:	Jody Jewell	b) Data Month	January 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>543</u>	x \$ <u>9.25</u>	= \$ <u>5023</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>5023</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 \$ 5023 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5023

(20) CERTIFICATIONS AND SIGNATURES

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02/06/2015

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	02/25/2015
Contact Name:	Jody Jewell	b) Data Month	February 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>542</u>	x \$ <u>9.25</u>	= \$ <u>5014</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>5014</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 \$ 5014 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5014

(20) CERTIFICATIONS AND SIGNATURES

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02/25/2015

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

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(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	04/02/2015
Contact Name:	Jody Jewell	b) Data Month	March 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>545</u>	x \$ <u>9.25</u>	= \$ <u>5041</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>5041</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 \$ 5041 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5041

(20) CERTIFICATIONS AND SIGNATURES

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04/02/2015

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	04/30/2015
Contact Name:	Jody Jewell	b) Data Month	April 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>546</u>	x \$ <u>9.25</u>	= \$ <u>5051</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>5051</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 \$ 5051 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 5051

(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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04/30/2015

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

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(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	06/05/2015
Contact Name:	Jody Jewell	b) Data Month	May 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4565	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>530</u>	x \$ <u>9.25</u>	= \$ <u>4903</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>4903</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 \$ 4903 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4903

(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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06/05/2015

Sandy Gaylor

DATE

OFFICER SIGNATURE

Assistant Treasurer

Sandy Gaylor

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	07/08/2015
Contact Name:	Jody Jewell	b) Data Month	June 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>436</u>	x \$ <u>9.25</u>	= \$ <u>4033</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>4033</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 \$ 4033 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4033

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07/08/2015

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

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(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	08/07/2015
Contact Name:	Jody Jewell	b) Data Month	July 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>438</u>	x \$ <u>9.25</u>	= \$ <u>4052</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>4052</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 \$ 4052 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4052

(20) CERTIFICATIONS AND SIGNATURES

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08/07/2015

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

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(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	09/08/2015
Contact Name:	Jody Jewell	b) Data Month	August 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4565		
Fax Number:	608-830-5580		
E-mail Address:	jody.jewell@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>446</u>	x \$ <u>9.25</u>	= \$ <u>4126</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>4126</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 \$ 4126 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4126

(20) CERTIFICATIONS AND SIGNATURES

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09/08/2015

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	10/08/2015
Contact Name:	Tracy Heidemann	b) Data Month	September 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4253		
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>449</u>	x \$ <u>9.25</u>	= \$ <u>4153</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>4153</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 \$ 4153 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4153

(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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10/08/2015

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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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.

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	11/06/2015
Contact Name:	Tracy Heidemann	b) Data Month	October 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4253	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>454</u>	x \$ <u>9.25</u>	= \$ <u>4200</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>4200</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 \$ 4200 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4200

(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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11/06/2015

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	12/08/2015
Contact Name:	Tracy Heidemann	b) Data Month	November 2015
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>	d) State Reporting KENTUCKY
	Madison, WI 53717		
Telephone Number:	608-664-4253		
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>453</u>	x \$ <u>9.25</u>	= \$ <u>4190</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>4190</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 \$ 4190 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4190

(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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12/08/2015

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	02/08/2016
Contact Name:	Tracy Heidemann	b) Data Month	January 2016
Mailing Address:	525 Junction Road	c) Type of Filing (check one)	Original <input type="checkbox"/> Revision <input checked="" type="checkbox"/>
	Madison, WI 53717		
Telephone Number:	608-664-4253		
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>436</u>	x \$ <u>9.25</u>	= \$ <u>4033</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>4033</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 \$ 4033 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4033

(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.

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02/08/2016

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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LIFELINE WORKSHEET

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	03/08/2016
Contact Name:	Tracy Heidemann	b) Data Month	February 2016
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4253	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>444</u>	x \$ <u>9.25</u>	= \$ <u>4107</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>4107</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 \$ 4107 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4107

(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.

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03/08/2016

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

OFFICER TITLE

OFFICER NAME

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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

Avg. Burden Est. per Respondent: 2.5 Hrs.

(1) USAC Service Provider Identification Number 143001572 (2) Study Area Code 260411

(3) Filer 499 ID 806619 (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:	Lesile County Telephone Company	a) Submission Date	04/08/2016
Contact Name:	Tracy Heidemann	b) Data Month	March 2016
Mailing Address:	525 Junction Road	c) Type of Filing (check one) Original <input checked="" type="checkbox"/> Revision <input type="checkbox"/>	
	Madison, WI 53717		
Telephone Number:	608-664-4253	d) State Reporting	KENTUCKY
Fax Number:	608-830-5580		
E-mail Address:	tracy.heidemann@tdstelecom.com		

Lifeline

	(a) # Lifeline Subscribers	(b) Lifeline Support/Subscriber Support	(c) Total Lifeline
Non-Tribal Low-Income Subscribers Receiving federal Lifeline Support	(8) <u>447</u>	x \$ <u>9.25</u>	= \$ <u>4135</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>4135</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 \$ 4135 Total TLS \$ 0 Total Tribal Link Up \$ 0

Total Dollars (19) \$ 4135

(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.

04/08/2016

Amanda Moore

DATE

OFFICER SIGNATURE

Assistant Treasurer

Amanda Moore

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-PERM, 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.

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**TDS TELECOM ON BEHALF OF
LESLIE COUNTY TELEPHONE
COMPANY**

APPENDIX C

**Commonwealth of Kentucky
Before the Public Service Commission
Case No. 2016 - 00059**

TDS TELECOM ON BEHALF OF LESLIE COUNTY TELEPHONE COMPANY

APPENDIX C

Requests for Information to All Parties

Q1. If not already provided in a previous response to a Commission Staff request for information, respond to the following:

a. Provide the monthly Kentucky Universal Service Fund ("KUSP") forms 1 ("KUSF form") submitted to the Commission and the Department of Finance and Administration from January 2014 to the present.

Response: Please refer to TDS Telecom's response to Appendix B "Requests for information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF")" question 1.

b. Explain how the total number of subscriber lines is calculated for the KUSF form when a new customer receives service in the middle of a month.

Response: Please refer to TDS Telecom's response to Appendix B "Requests for information to All Parties" question 2.

c. Explain how the total number of subscriber lines is calculated for the KUSF form when a customer leaves in the middle of a month.

Response: Please refer to TDS Telecom's response to Appendix B "Requests for information to All Parties" question 3.

d. Explain how the KUSF surcharge remittance is calculated when you experience a bad debt. Explain whether none of the surcharge amount or the full surcharge amount billed to, but not paid by, the customer is remitted.

Response: Please refer to TDS Telecom's response to Appendix B "Requests for information to All Parties" question 4.

e. State whether the KUSF surcharge billed to a customer is prorated if the customer has service for less than a full month.

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TDS TELECOM ON BEHALF OF LESLIE COUNTY TELEPHONE COMPANY

APPENDIX C

Response: If the customer has service less than a month then the surcharge is prorated.

Q2. If no KUSF forms have been submitted to the Commission and the Kentucky Department of Finance and Administration from January 2014, to the present, explain why the KUSF forms have not been submitted.

a. If no KUSF forms have been submitted, state whether you collect the KUSF surcharge from your customers.

b. If you do not collect the KUSF surcharge from your customers, explain why the KUSF surcharge has not been collected.

c. If no KUSF forms have been submitted, state whether you remit the KUSF surcharge to the Kentucky Department of Finance and Administration.

d. If you do not remit the KUSF surcharge to the Kentucky Department of Finance and Administration, explain why the KUSF surcharge has not been remitted.

Response: Not applicable.

Q3. Explain the anticipated impact, if any, that the FCC's recent Lifeline Reform Order will have on the provision of Lifeline service in Kentucky, including, but not limited to, verifying eligibility of Lifeline customers; the potential provision of broadband service; and, the impact of the reduction of Federal Universal Service funding for voice service.

Response: TDS will continue processing KY Lifeline applications as we do today, until the State transitions to the National Verifier. Once that occurs, the impact of verifications and any associated process is unknown until more information concerning the National Verifier's plan/process is communicated. As communicated in Appendix B Requests for information to Parties that Received Payment from the Kentucky Universal Service Fund ("KUSF") questions , a Lifeline customer is able to subscriber to any residential voice offering. If a customer qualifies for Lifeline and subscribes to a bundle offering of voice and broadband, the federal Lifeline benefit of \$9.25 would apply. As it relates to the reduction of federal Lifeline support for voice services starting in 2019, that could result in a customer no longer able to receive Lifeline benefit although they qualify for Lifeline.

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Q4. In light of the *Lifeline Reform Order*, explain how a reduction in the amount of, or elimination of, KUSF support would impact the provision of Lifeline service in Kentucky.

Response: A reduction of or an elimination of the state Lifeline benefit would not impact the provision of Lifeline for TDS Telecom. As an ETC, TDS Telecom will continue providing Lifeline services. A change in the support amount may impact which services a Lifeline customer could take. When the federal support amount decreases for voice offerings, a change in the Kentucky support amount may impact if a customer is able to take service.