

TO BE COMPLETED BY THE REPORTING CARRIER.

Certification of Officer as to the Accuracy of the CAF ICC Data Reported

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier	ACT TELEPHONE ASSOCIATION IOWA		
Signature of Authorized Officer			Date
Printed name of Authorized Officer	TODD ROESLER		
Title or position of Authorized Officer	CEO		
Telephone number of Authorized Officer	507.896.6292 ext.		
Study Area Code of Reporting Carrier	351346	Filing Due Date for this form (mm/dd/yyyy)	12/19/2016

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