

# VOLUME 1

## APPENDIX C Exhibit 4

### CARRIER CERTIFICATIONS Accuracy of CAF BLS Data

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OXFORD WEST TEL. CO.</u>					
Signature of authorized officer or employee		<b>Cindy Bryce</b> <small>Digitally signed by Cindy Bryce DN:cn=Cindy Bryce,email=cbryce@firstlight.net,O=oxford west tel. co.,l=Lewiston ME 04240-7418, Date:3/26/2018</small>		Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Cindy Bryce</u>					
Title or position of authorized officer or employee: <u>Accounting Mgr.</u>					
Telephone number of authorized officer or employee: <u>207-333-3461</u>					
Study Area Code of Reporting Carrier	<u>100002</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<small>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.</small>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LINCOLNVILLE NETWORKS, INC.</u>					
Signature of authorized officer or employee <b>Seth Robertson</b>				Digitally signed by Seth Robertson DN:cn=Seth Robertson,email=sethr@intelco.net,O=lincolnvill networks, inc.,l=Nobleboro ME 04555, Date:3/18/2018 Date: <u>3/18/2018</u>	
Printed name of authorized officer or employee: <u>Seth Robertson</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>207-563-9911</u>					
Study Area Code of Reporting Carrier	<u>100003</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Linolnville Networks, Inc**

Signature of authorized officer or employee  Date **07/05/2018**

Printed name of authorized officer or employee **Seth S Robertson**

Title or position of authorized officer or employee **Controller**

Telephone number of authorized officer or employee: ( **207** ) **563** - **9910** , ext.

Study Area Code of Reporting Carrier	<b>100003</b>		Filing Due Date for this form (mm/dd/yyyy)	<b>July 2018</b>	
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OXFORD COUNTY TEL. &amp; TELE. CO.</u>					
Signature of authorized officer or employee <b>Cindy Bryce</b>				Digitally signed by Cindy Bryce DN:cn=Cindy Bryce,email=cbryce@firstlight.net,O=oxford county tel. & tele. co.,l=Lewiston ME 04240-7418, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Cindy Bryce</u>					
Title or position of authorized officer or employee: <u>Accounting Mgr.</u>					
Telephone number of authorized officer or employee: <u>207-333-3461</u>					
Study Area Code of Reporting Carrier	<u>100019</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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OMB Control No. 3060-0972  
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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UNION RIVER TEL. CO.</u>					
Signature of authorized officer or employee <b>David Pelletier</b>				Digitally signed by David Pelletier DN:cn=David Pelletier,email=dpelletier@RIVAH.NET,O=union river tel. co.,l= , Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>David Pelletier</u>					
Title or position of authorized officer or employee: <u>Business Office Manager</u>					
Telephone number of authorized officer or employee: <u>207-584-9911</u>					
Study Area Code of Reporting Carrier	<u>100027</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UNITEL, INC.</u>					
Signature of authorized officer or employee <u>Laurie Osgood</u>				Digitally signed by Laurie Osgood DN:cn=Laurie Osgood,email=losgood@unitel.me,O=unitel,inc.,l=Unity ME 04988, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Laurie Osgood</u>					
Title or position of authorized officer or employee: <u>CEO/President</u>					
Telephone number of authorized officer or employee: <u>207-948-9952</u>					
Study Area Code of Reporting Carrier	<u>100029</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF.

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Bretton Woods Telephone Company, Inc.</u>			
Signature of authorized officer or employee 			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Karen Wante</u>			
Title or position of authorized officer or employee <u>Vice President</u>			
Telephone number of authorized officer or employee: ( <u>603</u> ) <u>278</u> - <u>9911</u> , ext. <u>        </u>			
Study Area Code of Reporting Carrier	<u>120038</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRANITE STATE TEL., INC.</u>					
Signature of authorized officer or employee <b>Steven Schilling</b>				Digitally signed by Steven Schilling DN:cn=Steven Schilling,email=sschilling@gsn.net,O=granite state tel., inc.,l=Weare NH 03281, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Steven Schilling</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>603-529-6258</u>					
Study Area Code of Reporting Carrier	<u>120039</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

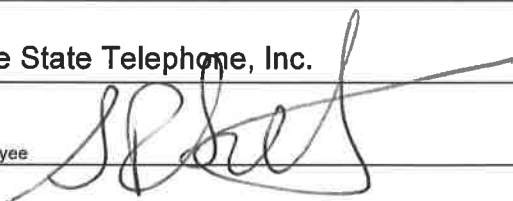
**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

**I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.**

Name of Reporting Carrier

Granite State Telephone, Inc.

Signature of authorized officer or employee



Date

10/06/2018

Printed name of authorized officer or employee

Steven Schilling

Title or position of authorized officer or employee

Controller

Telephone number of authorized officer or employee: ( 603 ) 529 - 6258 , ext.

Study Area Code of Reporting Carrier

120039

Filing Due Date for this  
form (mm/dd/yyyy)

October 2018

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
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Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DIXVILLE TEL. CO.</u>					
Signature of authorized officer or employee <b>Ann Walsh</b>				Digitally signed by Ann Walsh DN:cn=Ann Walsh,email=awalsh@tillotsoncorp.com,O=dixville tel. co.,l=Seekonk MA 02771, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Ann Walsh</u>					
Title or position of authorized officer or employee: <u>Assistant Secretary</u>					
Telephone number of authorized officer or employee: <u>781-402-1731</u>					
Study Area Code of Reporting Carrier	<u>120042</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DUNBARTON TEL. CO.</u>					
Signature of authorized officer or employee <b>David Montgomery</b>				<small>Digitally signed by David Montgomery DN:cn=David Montgomery,email=duntelco@gsinet.net,O=dunbarton tel. co.,l=Dunbarton NH 03046, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>David Montgomery</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>603-774-9911</u>					
Study Area Code of Reporting Carrier	<u>120043</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FRANKLIN TEL. CO.-VT</u>					
Signature of authorized officer or employee <b>Kimberly Gates Maynard</b>				Digitally signed by Kimberly Gates Maynard DN: cn=Kimberly Gates Maynard, email=ftc@franklinvt.net, O=franklin tel. co. -vt, l=Franklin VT 05457, Date: 3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Kimberly Gates Maynard</u>					
Title or position of authorized officer or employee: <u>Treasurer</u>					
Telephone number of authorized officer or employee: <u>802-285-9911</u>					
Study Area Code of Reporting Carrier	<u>140053</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

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Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>TOPSHAM TELEPHONE COMPANY INC.</u>			
Signature of authorized officer or employee <u>Mark DePerrion</u>			Date <u>03/26/2018</u>
Printed name of authorized officer or employee <u>MARK DEPERRION</u>			
Title or position of authorized officer or employee <u>CONTROLLER</u>			
Telephone number of authorized officer or employee: <u>(315) 324 - 5911</u> , ext.			
Study Area Code of Reporting Carrier	<u>141068</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WAITSFIELD/FAYSTON TEL. CO.</u>					
Signature of authorized officer or employee <b>Roger Nishi</b>				Digitally signed by Roger Nishi DN:cn=Roger Nishi,email=rnishi@wcvt.com,O=waitsfield/fayston tel. co.,l=Waitsfield VT 05673, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Roger Nishi</u>					
Title or position of authorized officer or employee: <u>Vice President - Industry Relations</u>					
Telephone number of authorized officer or employee: <u>802-496-8336</u>					
Study Area Code of Reporting Carrier	<u>140069</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Waitsfield-Fayston Telephone Co., Inc.**

Signature of authorized officer or employee  Date **10/04/2018**

Printed name of authorized officer or employee **Roger Nishi**

Title or position of authorized officer or employee **Vice President - Industry Relations**

Telephone number of authorized officer or employee: ( 802 ) 496 - 3391 , ext.

Study Area Code of Reporting Carrier	<b>140069</b>	Filing Due Date for this form (mm/dd/yyyy)	October 2018
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VERMONT TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Fran Stocker</b>				Digitally signed by Fran Stocker DN:cn=Fran Stocker,email=fstocker@vermontel.com,O=vermont telephone company, inc.,l=Springfield VT 05156, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Fran Stocker</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>802-885-7745</u>					
Study Area Code of Reporting Carrier	<u>147332</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CASSADAGA TEL. CORP.</u>					
Signature of authorized officer or employee <b>Mark Maytum</b>				Digitally signed by Mark Maytum DN:cn=Mark Maytum,email=mark.maytum@dfel.com,O=cassadaga tel. corp.,l=Fredonia NY 14063, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Mark Maytum</u>					
Title or position of authorized officer or employee: <u>President, COO</u>					
Telephone number of authorized officer or employee: <u>716-673-3016</u>					
Study Area Code of Reporting Carrier	<u>150076</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHAMPLAIN TEL. CO.</u>					
Signature of authorized officer or employee <b>Mark Webster</b>				Digitally signed by Mark Webster DN:cn=Mark Webster,email=mwebster@champlaintelephone.com,O=champlain tel. co.,l=Champlain NY 12919, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Mark Webster</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>518-298-2480</u>					
Study Area Code of Reporting Carrier	<u>150077</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CROWN POINT TEL. CORP.</u>					
Signature of authorized officer or employee <b>Shana Macey</b>				<small>Digitally signed by Shana Macey DN:cn=Shana Macey,email=shana.macey@cptelco.net,O=crown point tel. corp.,l=Crown Point NY 12928, Date:3/23/2018</small> Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Shana Macey</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>518-597-3300</u>					
Study Area Code of Reporting Carrier	<u>150085</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DUNKIRK AND FREDONIA TEL. CO.</u>					
Signature of authorized officer or employee <b>Mark Maytum</b>				Digitally signed by Mark Maytum DN:cn=Mark Maytum,email=mark.maytum@dfel.com,O=dunkirk and fredonia tel. co.,l=Fredonia NY 14063, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Mark Maytum</u>					
Title or position of authorized officer or employee: <u>President, COO</u>					
Telephone number of authorized officer or employee: <u>716-673-3016</u>					
Study Area Code of Reporting Carrier	<u>150091</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GERMANTOWN TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Bruce Bohnsack</b>				Digitally signed by Bruce Bohnsack DN:cn=Bruce Bohnsack,email=bruceb@gtel.net,O=germantown tel. co., inc.,l=Germantown NY 12526, Date:3/24/2018 Date: <u>3/24/2018</u>	
Printed name of authorized officer or employee: <u>Bruce Bohnsack</u>					
Title or position of authorized officer or employee: <u>President and CEO</u>					
Telephone number of authorized officer or employee: <u>518-537-4835</u>					
Study Area Code of Reporting Carrier	<u>150097</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HANCOCK TEL. CO.-NY</u>					
Signature of authorized officer or employee <u>Robert Wrighter, Jr</u>				Digitally signed by Robert Wrighter, Jr DN:cn=Robert Wrighter, Jr,email=robjr@hancocktelephone.com,O=hancock tel. co.-ny,l=Hancock NY 13783, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Robert Wrighter, Jr</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>607-637-9912</u>					
Study Area Code of Reporting Carrier	<u>150099</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ONEIDA COUNTY RURAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Heather Kirkland</b>				Digitally signed by Heather Kirkland DN:cn=Heather Kirkland,email=hkirkland@ocrt.com,O=oneida county rural tel. co.,l=Holland Patent NY 13354, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Heather Kirkland</u>					
Title or position of authorized officer or employee: <u>Vice President of Finance</u>					
Telephone number of authorized officer or employee: <u>315-865-3239</u>					
Study Area Code of Reporting Carrier	<u>150111</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ONTARIO TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Marion Peisher</b>				Digitally signed by Marion Peisher DN:cn=Marion Peisher,email=marionp@ottctel.com,O=ontario telephone company, inc.,l=Victor NY 14564, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Marion Peisher</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>585-433-6661</u>					
Study Area Code of Reporting Carrier	<u>150112</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

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OMB Control No. 3060-0972  
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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STATE TEL. CO.</u>					
Signature of authorized officer or employee <b>Mark Evans</b>				<small>Digitally signed by Mark Evans DN:cn=Mark Evans,email=mevans@statetel.com,O=state tel. co.,l=Coxsackie NY 12051, Date:3/23/2018</small>	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Mark Evans</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>518-731-6128</u>					
Study Area Code of Reporting Carrier	<u>150125</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRUMANSBURG TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Marion Peisher</b>				Digitally signed by Marion Peisher DN:cn=Marion Peisher,email=marionp@ottctel.com,O=trumansburg telephone company, inc.,l=Victor NY 14564, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Marion Peisher</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>585-433-6661</u>					
Study Area Code of Reporting Carrier	<u>150131</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent **National Exchange Carrier Association, Inc.**

Name of Reporting Carrier **Alteva of Warwick LLC**

Signature of authorized officer or employee  Date **3/26/2018**

Printed name of authorized officer or employee **Matthew Conroy**

Title or position of authorized officer or employee **CFO**

Telephone number of authorized officer or employee: ( **205** ) **978** - **4430** , ext.

Study Area Code of Reporting Carrier	<b>160135</b>		Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>	
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**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.**

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Citizens Telephone Company of Kecksburg</u>				
Signature of authorized officer or employee <u>Arnold K. Cutrell</u>				Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Arnold K. Cutrell</u>				
Title or position of authorized officer or employee <u>Treasurer</u>				
Telephone number of authorized officer or employee: ( <u>724</u> ) <u>424</u> - <u>4444</u> , ext.				
Study Area Code of Reporting Carrier <u>170156</u>		Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
<small>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.</small>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HICKORY TEL. CO.</u>					
Signature of authorized officer or employee <b>Terri Jeffers</b>				Digitally signed by Terri Jeffers DN:cn=Terri Jeffers,email=tj@hky.com,O=hickory tel. co.,l=Hickory PA 15340, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Terri Jeffers</u>					
Title or position of authorized officer or employee: <u>Regulatory Director</u>					
Telephone number of authorized officer or employee: <u>724-356-2211</u>					
Study Area Code of Reporting Carrier	<u>170171</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>Ironton Telephone Company</b>			
Signature of authorized officer or employee 			Date <b>03/27/2018</b>
Printed name of authorized officer or employee <b>Patricia L Stewart</b>			
Title or position of authorized officer or employee <b>Secretary-Treasurer</b>			
Telephone number of authorized officer or employee: ( 610 ) 799 - 0225 , ext.			
Study Area Code of Reporting Carrier	170175	Filing Due Date for this form (mm/dd/yyyy)	3/31/2018
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Lackawaxen Telecommunication, Inc</u>			
Signature of authorized officer or employee 			Date <u>03/19/2018</u>
Printed name of authorized officer or employee <u>James J Kail</u>			
Title or position of authorized officer or employee <u>President &amp; CEO</u>			
Telephone number of authorized officer or employee: ( <u>724</u> ) <u>593</u> - <u>2411</u> , ext.			
Study Area Code of Reporting Carrier	<u>170177</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ARMSTRONG TEL. CO.-PA</u>					
Signature of authorized officer or employee <b>David Ames</b>				<small>Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel. co.-pa,l=Butler PA 16002, Date:3/26/2018</small> Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>David Ames</u>					
Title or position of authorized officer or employee: <u>Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>724-283-0925</u>					
Study Area Code of Reporting Carrier	<u>170189</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ARMSTRONG TEL. CO. NORTH</u>					
Signature of authorized officer or employee		<b>David Ames</b> <small>Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel. co. north,l=Butler PA 16002, Date:3/26/2018</small>		Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>David Ames</u>					
Title or position of authorized officer or employee: <u>Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>724-283-0925</u>					
Study Area Code of Reporting Carrier	<u>170195</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PALMERTON TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Timothy Hausman</b>				Digitally signed by Timothy Hausman DN: cn=Timothy Hausman, email=THausman@pencor.com, O=palmer-ton telephone company, l=Palmerton PA 18071	
				Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Timothy Hausman</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>610-826-9433</u>					
Study Area Code of Reporting Carrier	<u>170196</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Pennsylvania Telephone Company</u>			
Signature of authorized officer or employee <u>Kimberly M. Hannan</u>			Date <u>3/26/18</u>
Printed name of authorized officer or employee <u>Kimberly M. Hannan</u>			
Title or position of authorized officer or employee <u>VP</u>			
Telephone number of authorized officer or employee: <u>570, 745-2101</u> ext.			
Study Area Code of Reporting Carrier	<u>170197</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>South Canaan Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/19/2018</u>
Printed name of authorized officer or employee <u>James J Kail</u>			
Title or position of authorized officer or employee <u>President &amp; CEO</u>			
Telephone number of authorized officer or employee: ( <u>724</u> ) <u>593</u> - <u>2411</u> , ext. _____			
Study Area Code of Reporting Carrier	<u>170205</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VENUS TEL. CORP.</u>					
Signature of authorized officer or employee <u>Janice Kline</u>				Digitally signed by Janice Kline DN:cn=Janice Kline,email=jlk@venustel.com,O=venus tel. corp.,l=Venus PA 16364, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Janice Kline</u>					
Title or position of authorized officer or employee: <u>General Manager and Asst. Sec/Treas.</u>					
Telephone number of authorized officer or employee: <u>814-354-6400</u>					
Study Area Code of Reporting Carrier	<u>170210</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ARMSTRONG TEL. CO. OF MD</u>					
Signature of authorized officer or employee <b>David Ames</b>				<small>Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel. co. of md,l=Butler PA 16002, Date:3/26/2018</small>	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>David Ames</u>					
Title or position of authorized officer or employee: <u>Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>724-283-0925</u>					
Study Area Code of Reporting Carrier	<u>180216</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier			
I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Buggs Island Telephone Cooperative</u>			
Signature of authorized officer or employee <u>Michele Taylor</u>		Date <u>03/26/2018</u>	
Printed name of authorized officer or employee <u>Michele Taylor</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>434</u> ) <u>636</u> - <u>2274</u> , ext. <u>227</u>			
Study Area Code of Reporting Carrier <u>190219</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BURKE'S GARDEN TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Missy Lynch</b>				Digitally signed by Missy Lynch DN:cn=Missy Lynch,email=missylynch@bgco.net,O=burke's garden tel. co., inc.,l=Tazewell VA 24651, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Missy Lynch</u>					
Title or position of authorized officer or employee: <u>Office Manager/Secretary</u>					
Telephone number of authorized officer or employee: <u>276-472-2345</u>					
Study Area Code of Reporting Carrier	<u>190220</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEW HOPE TELEPHONE COOPERATIVE</u>					
Signature of authorized officer or employee <u>Laurie Hensley</u>				Digitally signed by Laurie Hensley DN:cn=Laurie Hensley,email=lauriehensley@newhopetel.com,O=new hope telephone cooperative,l=Fort Defiance VA 24469, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Laurie Hensley</u>					
Title or position of authorized officer or employee: <u>Secretary-Treasurer</u>					
Telephone number of authorized officer or employee: <u>540-363-6277</u>					
Study Area Code of Reporting Carrier	<u>190239</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories, 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Pembroke Telephone Cooperative</u>				
Signature of authorized officer or employee 				Date <u>03/21/2018</u>
Printed name of authorized officer or employee <u>Lisa W. Epperley</u>				
Title or position of authorized officer or employee <u>General Manager</u>				
Telephone number of authorized officer or employee: ( <u>540</u> ) <u>626</u> - <u>7111</u> , ext.				
Study Area Code of Reporting Carrier	<u>190243</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<b>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.</b>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SCOTT COUNTY TEL. COOP. INC.</u>					
Signature of authorized officer or employee <b>Daniel Odom</b>				Digitally signed by Daniel Odom DN:cn=Daniel Odom,email=dano@sctc.org,O=scott county tel. coop. inc.,l=Gate City VA 24251, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Daniel Odom</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>276-452-7224</u>					
Study Area Code of Reporting Carrier	<u>190248</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Scott County Telephone Cooperative</b></p>				
<p>Signature of authorized officer or employee <i>Daniel E. Odom</i></p>			<p>Date <b>10/08/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Daniel E. Odom</b></p>				
<p>Title or position of authorized officer or employee <b>Chief Financial Officer</b></p>				
<p>Telephone number of authorized officer or employee: ( 276 ) 452 - 7224 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>190248</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>October 2018</p>	
<p><b>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</b></p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SHENANDOAH TEL. CO.</u>					
Signature of authorized officer or employee <b>Jay Turtora</b>				Digitally signed by Jay Turtora DN:cn=Jay Turtora,email=Jay.turtora@emp.shentel.com,O=shenandoah tel. co.,l=Edinburg VA 22824, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Jay Turtora</u>					
Title or position of authorized officer or employee: <u>V.P. Accounting &amp; Planning</u>					
Telephone number of authorized officer or employee: <u>540-984-5295</u>					
Study Area Code of Reporting Carrier	<u>190250</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SHENANDOAH TELEPHONE COMPANY - NR</u>					
Signature of authorized officer or employee <b>Jay Turtora</b>				Digitally signed by Jay Turtora DN:cn=Jay Turtora,email=Jay.turtora@emp.shentel.com,O=shenandoah telephone company - nr,l=Edinburg VA 22824, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Jay Turtora</u>					
Title or position of authorized officer or employee: <u>V.P. Accounting &amp; Planning</u>					
Telephone number of authorized officer or employee: <u>540-984-5295</u>					
Study Area Code of Reporting Carrier	<u>197251</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SPRUCE KNOB SENECA ROCKS TEL., INC.</u>					
Signature of authorized officer or employee <b>Vickie Colaw</b>				Digitally signed by Vickie Colaw DN:cn=Vickie Colaw,email=vcolaw@spruceknob.net,O=spruce knob seneca rocks tel., inc.,l=Riverton WV 26814, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Vickie Colaw</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>304-567-2121</u>					
Study Area Code of Reporting Carrier	<u>200257</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HARDY TELECOMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Scott Sherman</b>				Digitally signed by Scott Sherman DN:cn=Scott Sherman,email=ssherman@hardynet.com,O=hardy telecommunications, inc.,l=Lost River WV 26810, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Scott Sherman</u>					
Title or position of authorized officer or employee: <u>General Manager &amp; CEO</u>					
Telephone number of authorized officer or employee: <u>304-897-9911</u>					
Study Area Code of Reporting Carrier	<u>200259</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ITS TELECOMMUNICATIONS SYSTEMS, INC.</u>					
Signature of authorized officer or employee <b>Bruce Russell</b>				Digitally signed by Bruce Russell DN:cn=Bruce Russell,email=brucer@itstelecom.net,O=its telecommunications systems, inc.,l=Indiantown FL 34956 Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Bruce Russell</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>772-597-2106</u>					
Study Area Code of Reporting Carrier	<u>210331</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHEAST FLORIDA TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Amanda Molina</b>				Digitally signed by Amanda Molina DN:cn=Amanda Molina,email=amolina@townes.net,O=northeast florida tel. co., inc.,l=Merritt Island FL 32952, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Amanda Molina</u>					
Title or position of authorized officer or employee: <u>Vice President of External Relations</u>					
Telephone number of authorized officer or employee: <u>904-259-0029</u>					
Study Area Code of Reporting Carrier	<u>210335</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BRANTLEY TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Andrea Mathie</b>				Digitally signed by Andrea Mathie DN:cn=Andrea Mathie,email=andrea.mathie@btctelcom.net,O=brantley tel. co., inc.,l=Nahunta GA 31553, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Andrea Mathie</u>					
Title or position of authorized officer or employee: <u>Regulatory Supervisor</u>					
Telephone number of authorized officer or employee: <u>912-462-3126</u>					
Study Area Code of Reporting Carrier	<u>220347</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
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**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

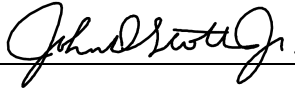
**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent **National Exchange Carrier Association, Inc.**

Name of Reporting Carrier

Signature of authorized officer or employee



Date

Printed name of authorized officer or employee

Title or position of authorized officer or employee

Telephone number of authorized officer or employee: (       )       -       , ext.

Study Area Code of Reporting Carrier

Filing Due Date for this form  
(mm/dd/yyyy)

**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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DARIEN TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Kenneth Johnson</b>				Digitally signed by Kenneth Johnson DN:cn=Kenneth Johnson,email=kenj@darientel.net,O=darien tel. co., inc.,l=Darien GA 31305, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Kenneth Johnson</u>					
Title or position of authorized officer or employee: <u>Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>912-437-6615</u>					
Study Area Code of Reporting Carrier	<u>220358</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ELLIJAY TEL. CO.</u>					
Signature of authorized officer or employe <b>Darrell Harper</b>				Digitally signed by Darrell Harper DN:cn=Darrell Harper,email=darrellh@ellijay.com,O=ellijay tel. co.,l=Ellijay GA 30540, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Darrell Harper</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>706-697-5519</u>					
Study Area Code of Reporting Carrier	<u>220360</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GLENWOOD TEL. CO.</u>					
Signature of authorized officer or employee <u>Janice O'Brien</u>				Digitally signed by Janice O'Brien DN:cn=Janice O'Brien,email=jeogtc@gtconline.com,O=glenwood tel. co.,l=Glenwood GA 30428-0235, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Janice O'Brien</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>912-523-5111</u>					
Study Area Code of Reporting Carrier	<u>220365</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent: <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier: <u>Hart Telephone Company</u>			
Signature of authorized officer or employee: <u>Melissa F. Green</u>			Date: <u>3-23-2018</u>
Printed name of authorized officer or employee: <u>Melissa F. Green</u>			
Title or position of authorized officer or employee: <u>CFO</u>			
Telephone number of authorized officer or employee: <u>(706) 376-4701 ext. 2238</u>			
Study Area Code of Reporting Carrier: <u>220368</u>		Filing Due Date for this form (mm/dd/yyyy): <u>3/31/2018</u>	
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PEMBROKE TEL. CO., INC.</u>					
Signature of authorized officer or employee <u>Mary Anna Hite</u>				Digitally signed by Mary Anna Hite DN:cn=Mary Anna Hite,email=mahite@pemtelco.com,O=pembroke tel. co., inc.,l=Pembroke GA 31321, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Mary Anna Hite</u>					
Title or position of authorized officer or employee: <u>Secretary-Treasurer/General Manager</u>					
Telephone number of authorized officer or employee: <u>912-653-4389</u>					
Study Area Code of Reporting Carrier	<u>220376</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Pembroke Telephone Company, Inc.**

Signature of authorized officer or employee



Date

**08/07/2018**

Printed name of authorized officer or employee

**MaryAnna B. Hite**

Title or position of authorized officer or employee

**Secretary-Treasurer/CFO**

Telephone number of authorized officer or employee: ( 912 ) 653 - 4389 , ext.

Study Area Code of Reporting Carrier

**220376**

Filing Due Date for this form (mm/dd/yyyy)

**August 2018**

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier Planters Rural Telephone Cooperative

Signature of authorized officer or employee



Date

3/21/2018

Printed name of authorized officer or employee Stephen D. Milner

Title or position of authorized officer or employee CEO/GM

Telephone number of authorized officer or employee: ( 912 ) 857 - 4411 , ext.

Study Area Code of Reporting Carrier

220378

Filing Due Date for this form  
(mm/dd/yyyy)

3/31/2018

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

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Planters Rural Telephone Cooperative**

Signature of authorized officer or employee  Date **07/06/2018**

Printed name of authorized officer or employee **Stephen D. Milner**

Title or position of authorized officer or employee **CEO/General Manager**

Telephone number of authorized officer or employee: ( **912** ) **857** - **4411** , ext.

Study Area Code of Reporting Carrier	<b>220378</b>		Filing Due Date for this form (mm/dd/yyyy)	<b>July 2018</b>	
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

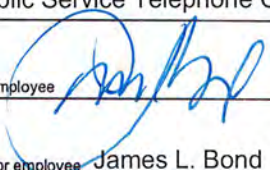
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PROGRESSIVE RURAL TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Ron Chambers</b>				Digitally signed by Ron Chambers DN:cn=Ron Chambers,email=ron.chambers@prtc.co,O=progressive rural tel. coop., inc.,l=Rentz GA 31075, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Ron Chambers</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>478-984-4201</u>					
Study Area Code of Reporting Carrier	<u>220380</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Public Service Telephone Company</u>				
Signature of authorized officer or employee 				Date <u>March 22, 2018</u>
Printed name of authorized officer or employee <u>James L. Bond</u>				
Title or position of authorized officer or employee <u>President</u>				
Telephone number of authorized officer or employee: <u>( 478 ) 847 - 4111 , ext. 6520</u>				
Study Area Code of Reporting Carrier	220381	Filing Due Date for this form (mm/dd/yyyy)	3/31/2018	
<small>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.</small>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RINGGOLD TEL. CO.</u>					
Signature of authorized officer or employee <b>Celeste Weaver</b>				Digitally signed by Celeste Weaver DN:cn=Celeste Weaver,email=cweaver@rtctel.com,O=ringgold tel. co.,l=Ringgold GA 30736, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Celeste Weaver</u>					
Title or position of authorized officer or employee: <u>Assistant Vice President</u>					
Telephone number of authorized officer or employee: <u>706-965-1261</u>					
Study Area Code of Reporting Carrier	<u>220382</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRENTON TEL. CO.</u>					
Signature of authorized officer or employee <u>Adam Austin</u>				Digitally signed by Adam Austin DN:cn=Adam Austin,email=adam@tvn.net,O=trenton tel. co.,l=Trenton GA 30752, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Adam Austin</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>706-398-2900</u>					
Study Area Code of Reporting Carrier	<u>220389</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WAVERLY HALL TELEPHONE, LLC</u>					
Signature of authorized officer or employe <b>Deborah Rand</b>				Digitally signed by Deborah Rand DN:cn=Deborah Rand,email=drand@usch.com,O=waverly hall telephone, llc,l=Livingston TX 77351, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Deborah Rand</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>603-472-9786</u>					
Study Area Code of Reporting Carrier	<u>220392</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WILKES TEL. &amp; ELECTRIC CO.</u>					
Signature of authorized officer or employe <u>April Dyson</u>				Digitally signed by April Dyson DN:cn=April Dyson,email=aprilwtec@nu-z.net,O=wilkes tel. & electric co.,l=Washington GA 30673, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>April Dyson</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>706-678-9527</u>					
Study Area Code of Reporting Carrier	<u>220394</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ATLANTIC TEL. MEMB. CORP.</u>					
Signature of authorized officer or employee <b>Laura Graff</b>				<small>Digitally signed by Laura Graff DN:cn=Laura Graff,email=lgraff@atmc.com,O=atlantic tel. memb. corp.,l=Shallotte NC 28459, Date:3/19/2018</small> Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Laura Graff</u>					
Title or position of authorized officer or employee: <u>Director of Regulatory and Finance</u>					
Telephone number of authorized officer or employee: <u>910-755-1782</u>					
Study Area Code of Reporting Carrier	<u>230468</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BARNARDSVILLE TEL. CO.</u>					
Signature of authorized officer or employee <b>Tim Tribble</b>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@wilkestmc.net,O=barnardsville tel. co.,l=Wilkesboro NC 28697, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Tim Tribble</u>					
Title or position of authorized officer or employee: <u>Regulatory and Reporting Administrator</u>					
Telephone number of authorized officer or employee: <u>336-973-6164</u>					
Study Area Code of Reporting Carrier	<u>230469</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CITIZENS TEL. CO.-NC</u>					
Signature of authorized officer or employee <b>Tara Thomas</b>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=citizens tel. co.-nc,l=Rock Hill SC 29730, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Tara Thomas</u>					
Title or position of authorized officer or employee: <u>Associate Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>803-326-6501</u>					
Study Area Code of Reporting Carrier	<u>230473</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Ellerbe Telephone Company</u>			
Signature of authorized officer or employee <u>Jeffrey W. Long</u>			Date <u>3-26-18</u>
Printed name of authorized officer or employee <u>Jeffrey W Long</u>			
Title or position of authorized officer or employee <u>Vice President</u>			
Telephone number of authorized officer or employee: ( 910 ) 652 - 2221 , ext.			
Study Area Code of Reporting Carrier	<u>230478</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
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EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>North State Telephone Company dba North State Communication</b>			
Signature of authorized officer or employee 			Date <b>03/26/2018</b>
Printed name of authorized officer or employee <b>Lynn B. Welborn</b>			
Title or position of authorized officer or employee <b>Executive Vice President and CAO</b>			
Telephone number of authorized officer or employee: ( 336 ) 821 - 8766 , ext.			
Study Area Code of Reporting Carrier	230491	Filing Due Date for this form (mm/dd/yyyy)	3/31/2018
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RANDOLPH TEL. MEMB. CORP. DBA RANDOLPH COMM.</u>					
Signature of authorized officer or employee <b>Brenda Hardee</b>				<small>Digitally signed by Brenda Hardee DN:cn=Brenda Hardee,email=bhardee@rtmc.coop,O=randolph tel. memb. corp. dba randolph comm.,l=Asheboro NC 27203. Date:3/22/2018</small>	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Brenda Hardee</u>					
Title or position of authorized officer or employee: <u>Revenue Assurance Specialist</u>					
Telephone number of authorized officer or employee: <u>336-879-7946</u>					
Study Area Code of Reporting Carrier	<u>230496</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SURRY TELEPHONE MEMBERSHIP CORPORATION</u>					
Signature of authorized officer or employee <u>Amy Hanson</u>				Digitally signed by Amy Hanson DN:cn=Amy Hanson,email=hansona@surrytel.com,O=surry telephone membership corporation,l=Dobson NC 27017 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Amy Hanson</u>					
Title or position of authorized officer or employee: <u>Chief Operating Officer</u>					
Telephone number of authorized officer or employee: <u>336-374-5021</u>					
Study Area Code of Reporting Carrier	<u>230497</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SALUDA MOUNTAIN TEL. CO.</u>					
Signature of authorized officer or employee <b>Tim Tribble</b>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@wilkestmc.net,O=saluda mountain tel. co.,l=Wilkesboro NC 28697, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Tim Tribble</u>					
Title or position of authorized officer or employee: <u>Regulatory and Reporting Administrator</u>					
Telephone number of authorized officer or employee: <u>336-973-6164</u>					
Study Area Code of Reporting Carrier	<u>230498</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SERVICE TEL. CO.</u>					
Signature of authorized officer or employee <b>Tim Tribble</b>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@wilkestmc.net,O=service tel. co.,l=Wilkesboro NC 28697, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Tim Tribble</u>					
Title or position of authorized officer or employee: <u>Regulatory and Reporting Administrator</u>					
Telephone number of authorized officer or employee: <u>336-973-6164</u>					
Study Area Code of Reporting Carrier	<u>230500</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:


<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SKYLINE TEL. MEMB. CORP.</u>					
Signature of authorized officer or employee <b>Steven Hardin</b>				<div style="font-size: small;">Digitally signed by Steven Hardin DN:cn=Steven Hardin,email=steven.hardin@skyline.org,O=skyline tel. memb. corp.,l=West Jefferson NC 28694, Date:3/26/2018</div> Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Steven Hardin</u>					
Title or position of authorized officer or employee: <u>Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>336-877-1350</u>					
Study Area Code of Reporting Carrier	<u>230501</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Star Telephone Membership Corporation</u>			
Signature of authorized officer or employee 			Date <u>03/26/2018</u>
Printed name of authorized officer or employee <u>Jeffrey A. Nethercutt</u>			
Title or position of authorized officer or employee <u>Executive Vice President and General Manager</u>			
Telephone number of authorized officer or employee: ( <u>910</u> ) <u>564</u> - <u>7827</u> , ext.			
Study Area Code of Reporting Carrier	<u>230502</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SURRY TELEPHONE MEMBERSHIP CORPORATION</u>					
Signature of authorized officer or employee <u>Amy Hanson</u>				Digitally signed by Amy Hanson DN:cn=Amy Hanson,email=hansona@surrytel.com,O=surry telephone membership corporation,l=Dobson NC 27017 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Amy Hanson</u>					
Title or position of authorized officer or employee: <u>Chief Operating Officer</u>					
Telephone number of authorized officer or employee: <u>336-374-5021</u>					
Study Area Code of Reporting Carrier	<u>230503</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRI-COUNTY TEL. MEMB. CORP.-NC</u>					
Signature of authorized officer or employee <b>Melinda Jackson</b>				<small>Digitally signed by Melinda Jackson DN:cn=Melinda Jackson,email=melindajackson@gotricounty.com,O=tri-county tel. memb. corp.-nc,l=Bellhaven NC 27810, Date:3/26/2018</small>	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Melinda Jackson</u>					
Title or position of authorized officer or employee: <u>Commercial Manager</u>					
Telephone number of authorized officer or employee: <u>252-964-8025</u>					
Study Area Code of Reporting Carrier	<u>230505</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WILKES TEL. MEMB. CORP.</u>					
Signature of authorized officer or employee <b>Tim Tribble</b>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@wilkestmc.net,O=wilkes tel. memb. corp.,l=Wilkesboro NC 28697, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Tim Tribble</u>					
Title or position of authorized officer or employee: <u>Regulatory and Reporting Administrator</u>					
Telephone number of authorized officer or employee: <u>336-973-6164</u>					
Study Area Code of Reporting Carrier	<u>230510</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Yadkin Valley Telephone Membership Corporation</u>			
Signature of authorized officer or employee 			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Butch Mabry</u>			
Title or position of authorized officer or employee <u>Regulatory Affairs Analyst</u>			
Telephone number of authorized officer or employee: ( <u>336</u> ) <u>463</u> - <u>5050</u> , ext.			
Study Area Code of Reporting Carrier	<u>230511</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<b>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.</b>			

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Bluffton Telephone Company, Inc.</u>			
Signature of authorized officer or employee 			Date <u>03/27/2018</u>
Printed name of authorized officer or employee <u>Jean Thaxton</u>			
Title or position of authorized officer or employee <u>Sr. Regulatory Manager</u>			
Telephone number of authorized officer or employee: ( <u>843</u> ) <u>686</u> - <u>1258</u> , ext.			
Study Area Code of Reporting Carrier	<u>240512</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHESNEE TEL. CO.</u>					
Signature of authorized officer or employee <b>Steven Hardin</b>				<small>Digitally signed by Steven Hardin DN:cn=Steven Hardin,email=steven.hardin@skyline.org,O=chesnee tel. co.,l=West Jefferson NC 28694, Date:3/28/2018</small> Date: <u>3/28/2018</u>	
Printed name of authorized officer or employee: <u>Steven Hardin</u>					
Title or position of authorized officer or employee: <u>Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>336-877-1350</u>					
Study Area Code of Reporting Carrier	<u>240515</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHESTER TEL. CO.-SC</u>					
Signature of authorized officer or employee <u>Autumn Castles</u>				Digitally signed by Autumn Castles DN:cn=Autumn Castles,email=acastles@truvista.biz,O=chester tel. co.-sc,l=Chester SC 29706, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Autumn Castles</u>					
Title or position of authorized officer or employee: <u>Access Services Manager</u>					
Telephone number of authorized officer or employee: <u>803-581-9148</u>					
Study Area Code of Reporting Carrier	<u>240516</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS TEL. COOP., INC-SC</u>					
Signature of authorized officer or employee <b>Mayme Carsten</b>				Digitally signed by Mayme Carsten DN:cn=Mayme Carsten,email=carstenm@fcc.org,O=farmers tel. coop., inc-sc,l=Kingstree SC 29556, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Mayme Carsten</u>					
Title or position of authorized officer or employee: <u>Revenue Assurance Manager</u>					
Telephone number of authorized officer or employee: <u>843-382-1380</u>					
Study Area Code of Reporting Carrier	<u>240520</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FORT MILL TEL. CO.</u>					
Signature of authorized officer or employee <b>Tara Thomas</b>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=fort mill tel. co.,l=Rock Hill SC 29730, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Tara Thomas</u>					
Title or position of authorized officer or employee: <u>Associate Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>803-326-6501</u>					
Study Area Code of Reporting Carrier	<u>240521</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Hargray Telephone Company, Inc.</u>				
Signature of authorized officer or employee 				Date <u>03/27/2018</u>
Printed name of authorized officer or employee <u>Jean Thaxton</u>				
Title or position of authorized officer or employee <u>Sr. Regulatory Manager</u>				
Telephone number of authorized officer or employee: ( <u>843</u> ) <u>686</u> - <u>1258</u> , ext.				
Study Area Code of Reporting Carrier <u>240523</u>		Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
<small>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.</small>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HORRY TEL. COOP. INC.</u>					
Signature of authorized officer or employee <u>Joni Jordan</u>				Digitally signed by Joni Jordan DN:cn=Joni Jordan,email=joni.jordan@htcinc.net,O=horry tel. coop. inc.,l=Conway SC 29528, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Joni Jordan</u>					
Title or position of authorized officer or employee: <u>Senior Accountant</u>					
Telephone number of authorized officer or employee: <u>843-369-8138</u>					
Study Area Code of Reporting Carrier	<u>240528</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LANCASTER TEL. CO.</u>					
Signature of authorized officer or employee <b>Tara Thomas</b>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=lancaster tel. co.,l=Rock Hill SC 29730, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Tara Thomas</u>					
Title or position of authorized officer or employee: <u>Associate Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>803-326-6501</u>					
Study Area Code of Reporting Carrier	<u>240531</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LOCKHART TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Autumn Castles</b>				Digitally signed by Autumn Castles DN:cn=Autumn Castles,email=acastles@truvista.biz,O=lockhart tel. co., inc.,l=Chester SC 29706, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Autumn Castles</u>					
Title or position of authorized officer or employee: <u>Access Services Manager</u>					
Telephone number of authorized officer or employee: <u>803-581-9148</u>					
Study Area Code of Reporting Carrier	<u>240532</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:


<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PALMETTO RURAL TEL. COOP., INC.</u>					
Signature of authorized officer or employee <u>Jason Dandridge</u>				Digitally signed by Jason Dandridge DN:cn=Jason Dandridge,email=jason.dandridge@prtc.coop,O=palmetto rural tel. coop., inc.,l=Walterboro SC 29488, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jason Dandridge</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>843-538-9090</u>					
Study Area Code of Reporting Carrier	<u>240536</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Palmetto Rural Telephone Cooperative, Inc.**

Signature of authorized officer or employee



Date

**07/06/2018**

Printed name of authorized officer or employee

**Jason J. Dandridge**

Title or position of authorized officer or employee

**Chief Executive Officer**

Telephone number of authorized officer or employee: ( **843** ) **538** - **9090** , ext.

Study Area Code of Reporting Carrier

**240536**

Filing Due Date for this form (mm/dd/yyyy)

**July 2018**

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Piedmont Rural Telephone Cooperative, Inc.</u>			
Signature of authorized officer or employee 			Date <u>03/26/2018</u>
Printed name of authorized officer or employee <u>Kara E. Horner</u>			
Title or position of authorized officer or employee <u>Director of Finance/ Controller</u>			
Telephone number of authorized officer or employee: ( <u>864</u> ) <u>682</u> - <u>3131</u> , ext.			
Study Area Code of Reporting Carrier	<u>240538</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4


TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PBT TELECOM, INC.</u>					
Signature of authorized officer or employee <b>Tara Thomas</b>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=pbt telecom, inc.,l=Rock Hill SC 29730, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Tara Thomas</u>					
Title or position of authorized officer or employee: <u>Associate Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>803-326-6501</u>					
Study Area Code of Reporting Carrier	<u>240539</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **PBT Telecom, Inc.**

Signature of authorized officer or employee 

Date **08/06/2018**

Printed name of authorized officer or employee **L.B. Spearman**

Title or position of authorized officer or employee **Vice President**

Telephone number of authorized officer or employee: ( **803** ) **210** - **5528** , ext.

Study Area Code of Reporting Carrier	<b>240539</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>August 2018</b>
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RIDGEWAY TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Autumn Castles</b>				Digitally signed by Autumn Castles DN:cn=Autumn Castles,email=acastles@truvista.biz,O=ridgeway tel. co., inc.,l=Chester SC 29706, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Autumn Castles</u>					
Title or position of authorized officer or employee: <u>Access Services Manager</u>					
Telephone number of authorized officer or employee: <u>803-581-9148</u>					
Study Area Code of Reporting Carrier	<u>240541</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COMPORIUM, INC.</u>					
Signature of authorized officer or employee <b>Tara Thomas</b>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=comporium, inc.,l=Rock Hill SC 29730, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Tara Thomas</u>					
Title or position of authorized officer or employee: <u>Associate Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>803-326-6501</u>					
Study Area Code of Reporting Carrier	<u>240542</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SANDHILL TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Allen Mills</b>				Digitally signed by Allen Mills DN:cn=Allen Mills,email=allen.mills@shtc.net,O=sandhill tel. coop., inc., Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Allen Mills</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>843-658-6848</u>					
Study Area Code of Reporting Carrier	<u>240546</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Sandhill Telephone Cooperative, Inc.**

Signature of authorized officer or employee *Allen Mills* Date **10/08/2018**

Printed name of authorized officer or employee **Allen Mills**

Title or position of authorized officer or employee **CABS Coordinator**

Telephone number of authorized officer or employee: ( **843** ) **658** - **6848** , ext.

Study Area Code of Reporting Carrier	<b>240546</b>		Filing Due Date for this form (mm/dd/yyyy)	October 2018	
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

2-2

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Castleberry Telephone Co., Inc</u>			
Signature of authorized officer or employee <u>Homer Holland</u>			Date <u>3-20-18</u>
Printed name of authorized officer or employee <u>Homer Holland</u>			
Title or position of authorized officer or employee <u>Sec/Treas</u>			
Telephone number of authorized officer or employee: <u>(251) 966-2115</u>			
Study Area Code of Reporting Carrier <u>250285</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center"><b>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.</b></p>			

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier Farmers Telecommunications Cooperative, Inc.

Signature of authorized officer or employee

*Tyler Pair*

Date

03/21/2018

Printed name of authorized officer or employee

Tyler Pair

Title or position of authorized officer or employee

CFO

Telephone number of authorized officer or employee: ( 256 ) 638 - 2144 , ext. 2010

Study Area Code of Reporting Carrier

250290

Filing Due Date for this form  
(mm/dd/yyyy)

3/31/2018

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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent **National Exchange Carrier Association, Inc.**

Name of Reporting Carrier

Signature of authorized officer or employee

*Dwight P. Caudy*

Date

Printed name of authorized officer or employee

Title or position of authorized officer or employee

Telephone number of authorized officer or employee: (       )       -       , ext.

Study Area Code of Reporting Carrier

Filing Due Date for this form  
(mm/dd/yyyy)

**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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MON-CRE TEL. COOP. INC.</u>					
Signature of authorized officer or employee <b>Teresa Rich</b>				Digitally signed by Teresa Rich DN:cn=Teresa Rich,email=teresa@mon-cre.net,O=mon-cre tel. coop. inc.,l=Ramer AL 36069, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Teresa Rich</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>334-562-3242</u>					
Study Area Code of Reporting Carrier	<u>250305</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MOUNDVILLE TEL. CO.</u>					
Signature of authorized officer or employe <u>R. Taylor</u>				Digitally signed by R. Taylor DN:cn=R. Taylor,email=scott@mound.net,O=moundville tel. co.,l=Moundville AL 35474, Date:3/19/2018	Date: <u>3/19/2018</u>
Printed name of authorized officer or employee: <u>R. Taylor</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>205-371-9011</u>					
Study Area Code of Reporting Carrier	<u>250307</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>New Hope Telephone Cooperative, Inc.</u>			
Signature of authorized officer or employee 			Date <u>3/21/18</u>
Printed name of authorized officer or employee <u>James D Cook</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>256</u> ) <u>723</u> - <u>4211</u> , ext.			
Study Area Code of Reporting Carrier	<u>250308</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PINE BELT TEL. CO.</u>					
Signature of authorized officer or employee <b>John Nettles</b>				Digitally signed by John Nettles DN:cn=John Nettles,email=john@pinebelt.net,O=pine belt tel. co.,l=Arlington AL 36722, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>John Nettles</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>334-385-2106</u>					
Study Area Code of Reporting Carrier	<u>250315</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier			
I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Ragland Telephone Co.</u>			
Signature of authorized officer or employee 			Date <u>03/21/2018</u>
Printed name of authorized officer or employee <u>Matthew Jackson</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>205</u> ) <u>472</u> - <u>2141</u> , ext.			
Study Area Code of Reporting Carrier	<u>250316</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UNION SPRINGS TEL. CO.</u>					
Signature of authorized officer or employe <b>Sandra Huner</b>				Digitally signed by Sandra Huner DN:cn=Sandra Huner,email=swhuner@ustconline.net,O=union springs tel. co.,l=Union Springs AL 36089, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Sandra Huner</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>334-738-4400</u>					
Study Area Code of Reporting Carrier	<u>250322</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BALLARD RURAL TEL. COOP. CORP., INC.</u>					
Signature of authorized officer or employee <b>Randy Grogan</b>				Digitally signed by Randy Grogan DN:cn=Randy Grogan,email=rgrogan@brtc.net,O=ballard rural tel. coop. corp., inc.,l=La Center KY 42056-0209, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Randy Grogan</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>270-665-5186</u>					
Study Area Code of Reporting Carrier	<u>260396</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

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TO BE COMPLETED BY THE REPORTING CARRIER. IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF.

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Brandenburg Telephone Company, Inc.</u>			
Signature of authorized officer or employee <u><i>Randall Bradley</i></u>			Date <u>03/27/2018</u>
Printed name of authorized officer or employee <u>Randall Bradley</u>			
Title or position of authorized officer or employee <u>Controller</u>			
Telephone number of authorized officer or employee: ( <u>270</u> ) <u>422</u> - <u>2121</u> , ext.			
Study Area Code of Reporting Carrier <u>260398</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DUO COUNTY TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Daryl Hammond</b>				Digitally signed by Daryl Hammond DN:cn=Daryl Hammond,email=dhammond@duotel.com,O=duo county tel. coop., inc.,l=Jamestown KY 42629, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Daryl Hammond</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-343-3131</u>					
Study Area Code of Reporting Carrier	<u>260401</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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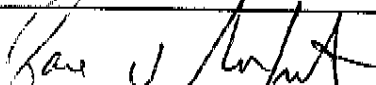
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FOOTHILLS RURAL TEL. COOP. CORP., INC.</u>					
Signature of authorized officer or employee <b>Ruth Conley</b>				Digitally signed by Ruth Conley DN:cn=Ruth Conley,email=ruthc@foothills.coop,O=foothills rural tel. coop. corp., inc.,l=Staffordsville KY 41256, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Ruth Conley</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>606-297-9131</u>					
Study Area Code of Reporting Carrier	<u>260406</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**FCC Form 508**  
**OMB Control No. 3060-0986**  
**VOLUME 1**  
**APPENDIX C**  
**EXHIBIT 4**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Gearheart Communications dba Coalfields Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Paul D Gearheart</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>606</u> ) <u>479</u> - <u>6254</u> , ext. <u>        </u>			
Study Area Code of Reporting Carrier	<u>260408</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LOGAN TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Gregory Hale</b>				<small>Digitally signed by Gregory Hale DN:cn=Gregory Hale,email=ghale@loganphone.com,O=logan tel. coop., inc.,l=Auburn KY 42206-0097, Date:3/23/2018</small> Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Gregory Hale</u>					
Title or position of authorized officer or employee: <u>General Manager/Executive V.P.</u>					
Telephone number of authorized officer or employee: <u>270-542-4121</u>					
Study Area Code of Reporting Carrier	<u>260413</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MOUNTAIN RURAL TEL. COOP. CORP., INC.</u>					
Signature of authorized officer or employee <u>Angela Pennington</u>				Digitally signed by Angela Pennington DN:cn=Angela Pennington,email=apennington@mountaintelephone.com,O=mountain rural tel. coop. corp., inc.,l=West Liberty KY 41472, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Angela Pennington</u>					
Title or position of authorized officer or employee: <u>Business Office Manager</u>					
Telephone number of authorized officer or employee: <u>606-743-3121</u>					
Study Area Code of Reporting Carrier	<u>260414</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PEOPLES RURAL TEL. COOP. CORP.</u>					
Signature of authorized officer or employee <b>Jodi Gabbard</b>				Digitally signed by Jodi Gabbard DN:cn=Jodi Gabbard,email=jodi.gabbard@prtc.org,O=peoples rural tel. coop. corp.,l=McKee KY 40447, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Jodi Gabbard</u>					
Title or position of authorized officer or employee: <u>Accounting Assistant/CABS Coord</u>					
Telephone number of authorized officer or employee: <u>606-287-5405</u>					
Study Area Code of Reporting Carrier	<u>260415</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH CENTRAL RURAL TEL. COOP. CORP., INC.</u>					
Signature of authorized officer or employee <b>Chris Lawrence</b>				Digitally signed by Chris Lawrence DN:cn=Chris Lawrence,email=chris.lawrence@scrtc.net,O=south central rural tel. coop. corp., inc.,l=Glasgow KY 42141 Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Chris Lawrence</u>					
Title or position of authorized officer or employee: <u>Business Director</u>					
Telephone number of authorized officer or employee: <u>270-678-8230</u>					
Study Area Code of Reporting Carrier	<u>260418</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier *South Central Rural Telecommunications Corp. Inc.*

Signature of authorized officer or employee

*Jeff Eaton*

Date

*8/6/18*

Printed name of authorized officer or employee

*Jeff Eaton*

Title or position of authorized officer or employee

*General Manager*

Telephone number of authorized officer or employee: *(270) 678 - 2111*, ext.

Study Area Code of Reporting Carrier

*260418*

Filing Due Date for this form (mm/dd/yyyy)

August 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THACKER/GRIGSBY TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>William Grigsby</b>				Digitally signed by William Grigsby DN:cn=William Grigsby,email=b.grigsby@tgtel.com,O=thacker/grigsby tel. co., inc.,l=Hindman KY 41822, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>William Grigsby</u>					
Title or position of authorized officer or employee: <u>President/General Manager</u>					
Telephone number of authorized officer or employee: <u>606-785-9500</u>					
Study Area Code of Reporting Carrier	<u>260419</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST KY. RURAL TEL. COOP. CORP., INC.</u>					
Signature of authorized officer or employe <b>Karen Jackson-Furman</b>				Digitally signed by Karen Jackson-Furman DN: cn=Karen Jackson-Furman, email=kfurman.wk@wk.net, O=west kv rural tel coop corp inc, l=Mayfield KY 42066 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Karen Jackson-Furman</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-856-9988</u>					
Study Area Code of Reporting Carrier	<u>260421</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CAMERON TEL. CO.-LA</u>					
Signature of authorized officer or employe <b>Bruce Petry</b>				Digitally signed by Bruce Petry DN:cn=Bruce Petry,email=bruce.petry@camtel.com,O=cameron tel. co.-la,l=Sulphur LA 70665, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Bruce Petry</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>337-583-2092</u>					
Study Area Code of Reporting Carrier	<u>270425</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DELCAMBRE TEL. CO.</u>					
Signature of authorized officer or employee <b>Sybil Benoit</b>				Digitally signed by Sybil Benoit DN:cn=Sybil Benoit,email=sbenoit@delcambre.net,O=delcambre tel. co.,l=Delcambre LA 70528, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Sybil Benoit</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>337-685-2311</u>					
Study Area Code of Reporting Carrier	<u>270428</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ELIZABETH TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Bruce Petry</b>				Digitally signed by Bruce Petry DN:cn=Bruce Petry,email=bruce.petry@camtel.com,O=elizabeth tel. co., inc.,l=Sulphur LA 70665, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Bruce Petry</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>337-583-2092</u>					
Study Area Code of Reporting Carrier	<u>270430</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KAPLAN TEL. CO.</u>					
Signature of authorized officer or employee <b>Richard Constantin</b>				<small>Digitally signed by Richard Constantin  DN: cn=Richard Constantin, email=rconstantin@kaptel.net, O=kaplan tel. co. l=Kaplan LA 70548-0369. Date: 3/22/2018</small>	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Richard Constantin</u>					
Title or position of authorized officer or employee: <u>Controller/Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>337-643-4242</u>					
Study Area Code of Reporting Carrier	<u>270432</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHEAST LOUISIANA TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Mike George</b>				Digitally signed by Mike George DN:cn=Mike George,email=mgeorge@ne-tel.com,O=northeast louisiana tel. co., inc.,l=Collinston LA 71229, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Mike George</u>					
Title or position of authorized officer or employee: <u>President / General Manager</u>					
Telephone number of authorized officer or employee: <u>318-874-7011</u>					
Study Area Code of Reporting Carrier	<u>270435</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RESERVE TEL. CO.</u>					
Signature of authorized officer or employee <u>Annette Faircloth</u>				Digitally signed by Annette Faircloth DN:cn=Annette Faircloth,email=afaircloth@reservetele.com,O=reserve tel. co.,l=Reserve LA 70084, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Annette Faircloth</u>					
Title or position of authorized officer or employee: <u>V.P of Finance</u>					
Telephone number of authorized officer or employee: <u>985-536-1271</u>					
Study Area Code of Reporting Carrier	<u>270438</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STAR TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Jeremy Smith</b>				Digitally signed by Jeremy Smith DN:cn=Jeremy Smith,email=jerry@directcom.com,O=star tel. co., inc.,l=Rockland ID 83271, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Jeremy Smith</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>208-548-2345</u>					
Study Area Code of Reporting Carrier	<u>270441</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DECATUR TEL. CO., INC.-MS</u>					
Signature of authorized officer or employe <b>Esther Smith, PhD</b>				Digitally signed by Esther Smith, PhD DN:cn=Esther Smith, PhD,email=esther@decaturtelephone.com,O=decatur tel.co.,inc.-ms,l=Decatur MS 39327 Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Esther Smith, PhD</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>601-635-2251</u>					
Study Area Code of Reporting Carrier	<u>280451</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

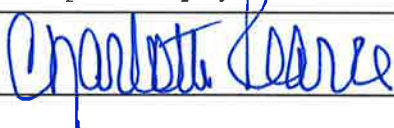
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LAKESIDE TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Robert Sledge Jr.</b>				Digitally signed by Robert Sledge Jr. DN:cn=Robert Sledge Jr.,email=rsledge@deltaland.net,O=lakeside tel. co., inc.,l=Sunflower MS 38778-0068, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Robert Sledge Jr.</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>662-569-3311</u>					
Study Area Code of Reporting Carrier	<u>280457</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>Noxapater Telephone Company</b>			
Signature of authorized officer or employee 		Date <b>3/22/2018</b>	
Printed name of authorized officer or employee <b>Charlotte Pearce</b>			
Title or position of authorized officer or employee <b>Vice-President</b>			
Telephone number of authorized officer or employee: ( <b>601</b> ) <b>764-3171</b> , ext.			
Study Area Code of Reporting Carrier	<b>280461</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SLEDGE TEL. CO., INC.</u>					
Signature of authorized officer or employee <u>Robert Sledge Jr.</u>				Digitally signed by Robert Sledge Jr. DN:cn=Robert Sledge Jr.,email=rsledge@deltaland.net,O=sledge tel. co., inc.,l=Sunflower MS 38778-0068, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Robert Sledge Jr.</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>662-569-3311</u>					
Study Area Code of Reporting Carrier	<u>280466</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ARDMORE TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Karen Jackson-Furman</b> <small>Digitally signed by Karen Jackson-Furman  DN: cn=Karen Jackson-Furman, email=kfurman.wk@wk.net, O=ardmore tel. co., inc. l=Mayfield KY 42066</small>				Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Karen Jackson-Furman</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-856-9988</u>					
Study Area Code of Reporting Carrier	<u>290280</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Ben Lomand Rural Telephone Cooperative, Inc.**

Signature of authorized officer or employee

*Lisa Cope*

Date

**5-24-2018**

Printed name of authorized officer or employee

**Lisa Cope**

Title or position of authorized officer or employee

**General Manager / CEO**

Telephone number of authorized officer or employee: ( 931 ) 668 - 4131 , ext.

Study Area Code of Reporting Carrier

**290553**

Filing Due Date for this  
form (mm/dd/yyyy)

**June 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLED SOE TEL. COOP.</u>					
Signature of authorized officer or employee <b>Robbin Rothwell</b>				<small>Digitally signed by Robbin Rothwell DN:cn=Robbin Rothwell,email=rothwellr@bledsoe.net,O=bledsoe tel. coop.,l=Pikeville TN 37367-0609, Date:3/27/2018</small> Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Robbin Rothwell</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>423-447-2121</u>					
Study Area Code of Reporting Carrier	<u>290554</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>Highland Telephone Cooperative</b>			
Signature of authorized officer or employee 			Date <b>03/27/2018</b>
Printed name of authorized officer or employee <b>David Crawford</b>			
Title or position of authorized officer or employee <b>Access Service Manager</b>			
Telephone number of authorized officer or employee: ( <b>423</b> ) <b>628</b> - <b>2750</b> , ext. <b>280</b>			
Study Area Code of Reporting Carrier	<b>290565</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>
<b>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.</b>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LORETTO TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Desda Hutchins</b>				Digitally signed by Desda Hutchins DN:cn=Desda Hutchins,email=desda@lorettotel.net,O=loretto tel. co., inc.,l=Loretto TN 38469, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Desda Hutchins</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>931-853-4351</u>					
Study Area Code of Reporting Carrier	<u>290570</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MILLINGTON TEL. CO., INC. DBA RITTER COMM.</u>					
Signature of authorized officer or employee <b>John Strode</b>				Digitally signed by John Strode DN:cn=John Strode,email=john.strode@rittercommunications.com,O=millington tel. co., inc. dba ritter comm.,l=Jonesboro AR 72401 Date:3/24/2018	
Date: <u>3/24/2018</u>					
Printed name of authorized officer or employee: <u>John Strode</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>870-336-2345</u>					
Study Area Code of Reporting Carrier	<u>290571</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTH CENTRAL TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Johnny McClanahan</b>				Digitally signed by Johnny McClanahan DN: cn=Johnny McClanahan, email=johnny.mcclanahan@nctc.com, O= north central tel. coop., inc. l=Lafayette TN 37083	
Printed name of authorized officer or employee: <u>Johnny McClanahan</u>				Date: <u>3/24/2018</u>	
Title or position of authorized officer or employee: <u>VP Finance and Adm. Services</u>					
Telephone number of authorized officer or employee: <u>615-666-2151</u>					
Study Area Code of Reporting Carrier	<u>290573</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TWIN LAKES TEL. COOP. CORP.</u>					
Signature of authorized officer or employe <b>Bridget Betcher</b>				Digitally signed by Bridget Betcher DN:cn=Bridget Betcher,email=bbetcher@twilakes.coop,O=twin lakes tel. coop. corp., Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Bridget Betcher</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>931-268-2151</u>					
Study Area Code of Reporting Carrier	<u>290579</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UNITED TEL. CO.-TN DBA UNITED COMMUNICATIONS</u>					
Signature of authorized officer or employee <b>Tommy Welch</b>				Digitally signed by Tommy Welch DN:cn=Tommy Welch,email=twelch@utcoffice.net,O=united tel. co.-tn dba united communications,l=Chapel Hill TN 37034 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Tommy Welch</u>					
Title or position of authorized officer or employee: <u>Director of Finance and Administration</u>					
Telephone number of authorized officer or employee: <u>931-364-4324</u>					
Study Area Code of Reporting Carrier	<u>290581</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST KENTUCKY RURAL TELEPHONE COOP. CORP.-TN</u>					
Signature of authorized officer or employee <b>Karen Jackson-Furman</b> <small>Digitally signed by Karen Jackson-Furman  DN: cn=Karen Jackson-Furman, email=kfurman.wk@wk.net, O=west kentucky rural telephone coop. corp.-tn l=Mayfield</small>				Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Karen Jackson-Furman</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-856-9988</u>					
Study Area Code of Reporting Carrier	<u>290598</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE ARTHUR MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Eric Roughton</b>				Digitally signed by Eric Roughton DN:cn=Eric Roughton,email=artelco@bright.net,O=the arthur mutual tel. co.,l=Defiance OH 43512, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Eric Roughton</u>					
Title or position of authorized officer or employee: <u>General Manager/Sec'y/Treasurer</u>					
Telephone number of authorized officer or employee: <u>419-393-2233</u>					
Study Area Code of Reporting Carrier	<u>300586</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>AYERSVILLE TEL. CO.</u>					
Signature of authorized officer or employee <b>Phil Maag</b>				Digitally signed by Phil Maag DN:cn=Phil Maag,email=pmaag@ayersvilletelco.com,O=ayersville tel. co.,l=Defiance OH 43512, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Phil Maag</u>					
Title or position of authorized officer or employee: <u>Sec./Treas. &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>419-395-2222</u>					
Study Area Code of Reporting Carrier	<u>300588</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BASCOM MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <u>Laura Wise</u>				Digitally signed by Laura Wise DN:cn=Laura Wise,email=law@bascomtelephone.com,O=bascom mutual tel. co.,l=Bascom OH 44809-0316, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Laura Wise</u>					
Title or position of authorized officer or employee: <u>Board Assistant Treasurer</u>					
Telephone number of authorized officer or employee: <u>419-937-2222</u>					
Study Area Code of Reporting Carrier	<u>300589</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BENTON RIDGE TEL. CO.</u>					
Signature of authorized officer or employe <b>Mark Miller</b>				<div style="font-size: small;">Digitally signed by Mark Miller DN:cn=Mark Miller,email=mmiller@watchtv.net,O=benton ridge tel. co.,l=Lima OH 45801-3255, Date:3/26/2018</div> <div style="margin-top: 10px;">Date: <u>3/26/2018</u></div>	
Printed name of authorized officer or employee: <u>Mark Miller</u>					
Title or position of authorized officer or employee: <u>CFO/VP/Treasurer</u>					
Telephone number of authorized officer or employee: <u>419-859-2144</u>					
Study Area Code of Reporting Carrier	<u>300590</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

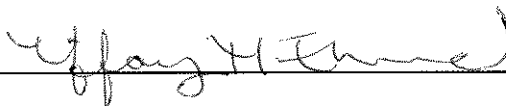
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>BUCKLAND TELEPHONE COMPANY</u>			
Signature of authorized officer or employee 			Date <u>03/27/2018</u>
Printed name of authorized officer or employee <u>DOUGLAS G. PLACE</u>			
Title or position of authorized officer or employee <u>GENERAL MANAGER</u>			
Telephone number of authorized officer or employee: ( <u>419</u> ) <u>657</u> - <u>2222</u> , ext.			
Study Area Code of Reporting Carrier	<u>300591</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE CHAMPAIGN TEL. CO.</u>					
Signature of authorized officer or employe <b>Tiffany Ebersold</b>				Digitally signed by Tiffany Ebersold DN:cn=Tiffany Ebersold,email=tiffany@ctcommunications.com,O=the champaign tel. co.,l=Urbana OH 43078, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Tiffany Ebersold</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>937-653-2263</u>					
Study Area Code of Reporting Carrier	<u>300594</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>The Champaign Telephone Company</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>09/07/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Tiffany M. Ebersold</b></p>				
<p>Title or position of authorized officer or employee <b>CFO</b></p>				
<p>Telephone number of authorized officer or employee: ( 937 ) 653 - 2263 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>300594</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><b>Sept. 2018</b></p>	
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MCCLURE TEL. CO.</u>					
Signature of authorized officer or employee <b>Lance Miller</b>				Digitally signed by Lance Miller DN:cn=Lance Miller,email=lance@mccluretelephone.com,O=mcclure tel. co.,l=McClure OH 43534-0026, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Lance Miller</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>419-748-8032</u>					
Study Area Code of Reporting Carrier	<u>300598</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CONNEAUT TEL. CO.</u>					
Signature of authorized officer or employe <b>Deanna Brown</b>				Digitally signed by Deanna Brown DN:cn=Deanna Brown,email=dbrown@suite224.net,O=conneaut tel. co.,l=Conneaut OH 44030, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Deanna Brown</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>440-593-7138</u>					
Study Area Code of Reporting Carrier	<u>300606</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DOYLESTOWN TEL. CO.</u>					
Signature of authorized officer or employee <b>Thomas Brockman</b>				Digitally signed by Thomas Brockman DN: cn=Thomas Brockman, email=tbrockman@doylestowntelephone.com, O=doylestown tel. co., L=Doylestown OH 44230	
Printed name of authorized officer or employee: <u>Thomas Brockman</u>				Date: <u>3/23/2018</u>	
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>330-658-2121</u>					
Study Area Code of Reporting Carrier	<u>300609</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE FARMERS MUTUAL TEL. CO.-OKOLONA, OH</u>					
Signature of authorized officer or employee		<b><u>Cheryl Bostelman</u></b> <small>Digitally signed by Cheryl Bostelman DN:cn=Cheryl Bostelman,email=cbostelman@fmtc.cc,O=the farmers mutual tel. co.-okolona, oh,l=Okolona OH 43545 Date:3/21/2018</small>		Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Cheryl Bostelman</u>					
Title or position of authorized officer or employee: <u>Secretary/General Manager</u>					
Telephone number of authorized officer or employee: <u>419-758-3303</u>					
Study Area Code of Reporting Carrier	<u>300612</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FORT JENNINGS TEL. CO.</u>					
Signature of authorized officer or employee <b>Michael Metzger</b>				Digitally signed by Michael Metzger DN:cn=Michael Metzger,email=mike@fjtelephone.com,O=fort jennings tel. co.,l=Ft. Jennings OH 45844-0146, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Michael Metzger</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>419-286-2181</u>					
Study Area Code of Reporting Carrier	<u>300614</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GLANDORF TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>David Hunt</b>				<small>Digitally signed by David Hunt DN:cn=David Hunt,email=hunt@bright.net,O=glandorf tel. co., inc.,l=Glandorf OH 45848, Date:3/21/2018</small> Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>David Hunt</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>419-538-6987</u>					
Study Area Code of Reporting Carrier	<u>300619</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KALIDA TEL. CO., INC.</u>					
Signature of authorized officer or employee		<b>Chris Phillips</b> <small>Digitally signed by Chris Phillips DN:cn=Chris Phillips,email=chrisp@kalidatel.com,O=kalida tel. co., inc.,l=Kalida OH 45853, Date:3/21/2018</small>		Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Chris Phillips</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>419-532-3218</u>					
Study Area Code of Reporting Carrier	<u>300625</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MINFORD TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Paula McGraw</b>				Digitally signed by Paula McGraw DN:cn=Paula McGraw,email=pmcgraw@falcon1.net,O=minford tel. co., inc.,l=Minford OH 45653, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Paula McGraw</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>740-820-2151</u>					
Study Area Code of Reporting Carrier	<u>300634</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE NEW KNOXVILLE TEL. CO.</u>					
Signature of authorized officer or employee <u>Susan Quellhorst</u>				Digitally signed by Susan Quellhorst DN:cn=Susan Quellhorst,email=susieq@nktelco.net,O=the new knoxville tel. co.,l=New Knoxville OH 45871-0219, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Susan Quellhorst</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>419-753-2457</u>					
Study Area Code of Reporting Carrier	<u>300639</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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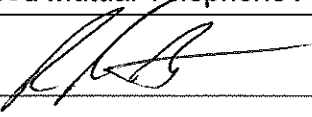
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE OTTOVILLE MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>William Honigford</b>				Digitally signed by William Honigford DN:cn=William Honigford,email=bilh@ottovillemutual.com,O=the ottoville mutual tel. co.,l=Ottoville OH 45876-0427, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>William Honigford</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>419-453-3324</u>					
Study Area Code of Reporting Carrier	<u>300650</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories, 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Sherwood Mutual Telephone Association</u>				
Signature of authorized officer or employee 				Date <u>3-26-18</u>
Printed name of authorized officer or employee <u>Rick Rostorfer</u>				
Title or position of authorized officer or employee <u>General Manager</u>				
Telephone number of authorized officer or employee: ( <u>419</u> ) <u>899</u> - <u>2121</u> , ext.				
Study Area Code of Reporting Carrier	<u>300656</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

Certification-Agent

TRANSMITTAL NO. 1549

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Vaughnsville Telephone Company</u>				
Signature of authorized officer or employee <u>Martha J. Kaplan</u>			Date <u>03/21/2018</u>	
Printed name of authorized officer or employee <u>Martha J. Kaplan</u>				
Title or position of authorized officer or employee <u>Secretary-Treasurer</u>				
Telephone number of authorized officer or employee: ( <u>419</u> ) <u>646</u> - <u>3431</u> , ext.				
Study Area Code of Reporting Carrier <u>300663</u>		Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
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.				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WABASH MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Mike Boley</b>				<small>Digitally signed by Mike Boley DN:cn=Mike Boley,email=mikeb@wabash.com,O=wabash mutual tel. co.,l=Celina OH 45822, Date:3/27/2018</small>	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Mike Boley</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>419-942-1111</u>					
Study Area Code of Reporting Carrier	<u>300664</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALLBAND COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Ron Siegel</b>				Digitally signed by Ron Siegel DN:cn=Ron Siegel,email=ron.siegel@allband.org,O=allband communications cooperative,l=Curran MI 48728-9780, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Ron Siegel</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>989-369-9870</u>					
Study Area Code of Reporting Carrier	<u>310542</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ACE TEL. CO. OF MI, INC. (ALLENDALE)</u>					
Signature of authorized officer or employee <b>Cynthia Sweet</b>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. co. of mi, inc. (allendale),l=Houston MN 55943-0360, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Cynthia Sweet</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>507-896-6211</u>					
Study Area Code of Reporting Carrier	<u>310669</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BARAGA TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Roberta Coppler</b>				Digitally signed by Roberta Coppler DN:cn=Roberta Coppler,email=cabs@baragatelephone.com,O=baraga telephone company,l=Baraga MI 49908, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Roberta Coppler</u>					
Title or position of authorized officer or employee: <u>Accounting</u>					
Telephone number of authorized officer or employee: <u>906-353-6644</u>					
Study Area Code of Reporting Carrier	<u>310675</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BARRY COUNTY TEL. CO.</u>					
Signature of authorized officer or employee <b>David Stoll</b>				<small>Digitally signed by David Stoll DN:cn=David Stoll,email=dstoll@mei.net,O=barry county tel. co.,l=Delton MI 49046, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>David Stoll</u>					
Title or position of authorized officer or employee: <u>GM/CEO</u>					
Telephone number of authorized officer or employee: <u>269-623-9971</u>					
Study Area Code of Reporting Carrier	<u>310676</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLANCHARD TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Betsy Ashbaugh</b>				Digitally signed by Betsy Ashbaugh DN:cn=Betsy Ashbaugh,email=bashbaugh@blanchardtel.com,O=blanchard telephone co.,l=Blanchard MI 49310, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Betsy Ashbaugh</u>					
Title or position of authorized officer or employee: <u>VP/General Manager</u>					
Telephone number of authorized officer or employee: <u>989-561-9932</u>					
Study Area Code of Reporting Carrier	<u>310678</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLOOMINGDALE TEL. CO.</u>					
Signature of authorized officer or employee <b>Steve Shults</b>				Digitally signed by Steve Shults DN:cn=Steve Shults,email=swshults@bloomingtondalecom.net,O=bloomingtondale tel. co.,l=Bloomingtondale MI 49026, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Steve Shults</u>					
Title or position of authorized officer or employee: <u>Assistant Treasurer</u>					
Telephone number of authorized officer or employee: <u>269-521-7313</u>					
Study Area Code of Reporting Carrier	<u>310679</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

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OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CLIMAX TEL. CO.</u>					
Signature of authorized officer or employe <b>Sven-Erik Naesset</b>				Digitally signed by Sven-Erik Naesset DN: cn=Sven-Erik Naesset, email=snaesset@ctstelecom.com, O=climax tel. co. l=Galesburg MI 49053, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Sven-Erik Naesset</u>					
Title or position of authorized officer or employee: <u>Supervisor-CABS &amp; HR</u>					
Telephone number of authorized officer or employee: <u>269-746-3220</u>					
Study Area Code of Reporting Carrier	<u>310688</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DEERFIELD FARMERS TEL. CO.</u>					
Signature of authorized officer or employee <b>Victoria Stevens</b>				Digitally signed by Victoria Stevens DN:cn=Victoria Stevens,email=Victoria.stevens@d-pcomm.com,O=d eerfield farmers tel. co.,l=Petersburg MI 49270, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Victoria Stevens</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>734-279-5535</u>					
Study Area Code of Reporting Carrier	<u>310691</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ACE TEL. CO. OF MI, INC. (DRENTHE)</u>					
Signature of authorized officer or employee <b>Cynthia Sweet</b>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. co. of mi, inc. (drenthe),l=Houston MN 55943-0360, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Cynthia Sweet</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>507-896-6211</u>					
Study Area Code of Reporting Carrier	<u>310692</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS MUT. OF CHAPIN DBA CHAPIN TEL. CO.</u>					
Signature of authorized officer or employee <b>Greg Ringle</b>				Digitally signed by Greg Ringle DN:cn=Greg Ringle,email=chapintel@4cld.net,O=farmers mut. of chapin dba chapin tel. co.,l=Elsie MI 48831, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Greg Ringle</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>989-661-2476</u>					
Study Area Code of Reporting Carrier	<u>310694</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KALEVA TEL. CO.</u>					
Signature of authorized officer or employee <b>Jack Schaefer</b>				Digitally signed by Jack Schaefer DN:cn=Jack Schaefer,email=jcschaefer@kaltelnet.net,O=kaleva tel. co.,l=Kaleva MI 49645-0006, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Jack Schaefer</u>					
Title or position of authorized officer or employee: <u>Comptroller</u>					
Telephone number of authorized officer or employee: <u>231-362-3111</u>					
Study Area Code of Reporting Carrier	<u>310703</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ACE TEL. CO. OF MI, INC.</u>					
Signature of authorized officer or employee <b>Cynthia Sweet</b>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. co. of mi, inc.,l=Houston MN 55943-0360, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Cynthia Sweet</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>507-896-6211</u>					
Study Area Code of Reporting Carrier	<u>310704</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3080-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Lennon Telephone Company</u>			
Signature of authorized officer or employee <u>Jacqueline Bowden</u>			Date <u>03/26/2019</u>
Printed name of authorized officer or employee <u>Jacqueline Bowden</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>810</u> ) <u>621</u> - <u>3301</u> , ext.			
Study Area Code of Reporting Carrier	<u>310708</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>Ogden Telephone Company</u></p>				
<p>Signature of authorized officer or employee <u>Linda K Corie</u></p>				<p>Date <u>3/22/2018</u></p>
<p>Printed name of authorized officer or employee <u>Linda K. Corie</u></p>				
<p>Title or position of authorized officer or employee <u>Secretary-Treasurer</u></p>				
<p>Telephone number of authorized officer or employee: <u>(577) 443-5595</u> ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><u>310714</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>	
<p>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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories, 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Pigeon Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/20/2018</u>
Printed name of authorized officer or employee <u>Neal B. Eichler</u>			
Title or position of authorized officer or employee <u>Vice President</u>			
Telephone number of authorized officer or employee: ( <u>989</u> ) <u>453</u> - <u>4391</u> , ext.			
Study Area Code of Reporting Carrier	<u>310721</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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. §§ 602, 603(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SPRINGPORT TEL. CO.</u>					
Signature of authorized officer or employee <b>Mark Cutler</b>				Digitally signed by Mark Cutler DN:cn=Mark Cutler,email=markc@springcom.com,O=springport tel. co.,l=Springport MI 49284-0208, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Mark Cutler</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>517-857-3100</u>					
Study Area Code of Reporting Carrier	<u>310728</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WALDRON TEL. CO.</u>					
Signature of authorized officer or employee <b>Lucinda Bernath</b>				Digitally signed by Lucinda Bernath DN:cn=Lucinda Bernath,email=cindy@waldrontel.com,O=waldron tel. co.,l=Waldron MI 49288-0197, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Lucinda Bernath</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>517-286-6211</u>					
Study Area Code of Reporting Carrier	<u>310734</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WINN TEL. CO.</u>					
Signature of authorized officer or employe <b>Mark Graf</b>				Digitally signed by Mark Graf DN:cn=Mark Graf,email=mgraf@winncommunications.net,O=winn tel. co.,l=Winn MI 48896, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Mark Graf</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>989-953-9876</u>					
Study Area Code of Reporting Carrier	<u>310737</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ACE TEL. CO. OF MICHIGAN, INC. (OLD MISSION)</u>					
Signature of authorized officer or employee <b>Cynthia Sweet</b>				<small>Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. co. of michigan, inc. (old mission),l=Houston MN 55943-0360, Date:3/20/2018</small>	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Cynthia Sweet</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>507-896-6211</u>					
Study Area Code of Reporting Carrier	<u>310777</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

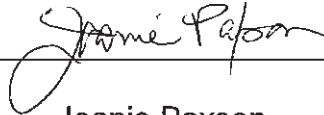
Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier Citizens Telephone Corp

Signature of authorized officer or employee



Date

03/26/2017

Printed name of authorized officer or employee

Joanie Paxson

Title or position of authorized officer or employee

Office Manager

Telephone number of authorized officer or employee: ( 260 ) 375 - 2111 , ext.

Study Area Code of Reporting Carrier

320751

Filing Due Date for this form  
(mm/dd/yyyy)

3/31/2018

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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CLAY CTY. RURAL TEL COOP INC D/B/A ENDEAVOR</u>					
Signature of authorized officer or employee <b>Darin LaCoursiere</b>				Digitally signed by Darin LaCoursiere DN:cn=Darin LaCoursiere,email=darinl@weEndeavor.com,O=clay ct. rural tel coop inc d/b/a endeavor,l=Cloverdale IN 46120-0237, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Darin LaCoursiere</u>					
Title or position of authorized officer or employee: <u>President and CEO</u>					
Telephone number of authorized officer or employee: <u>765-795-4261</u>					
Study Area Code of Reporting Carrier	<u>320753</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CRAIGVILLE TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Lee Von Gunten</b>				<small>Digitally signed by Lee Von Gunten DN:cn=Lee Von Gunten,email=lee@adamswells.com,O=craigville tel. co., inc.,l=Craigville IN 46731, Date:3/19/2018</small> Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Lee Von Gunten</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>260-565-3131</u>					
Study Area Code of Reporting Carrier	<u>320756</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DAVIESS-MARTIN CTY. RURAL TEL. DBA RTC COMM.</u>					
Signature of authorized officer or employee <b>Kirk Lehman</b>				Digitally signed by Kirk Lehman DN:cn=Kirk Lehman,email=klehman@rtccom.com,O=daviess-martin ct. rural tel. dba rtc comm.,l=Montgomery IN 47558. Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Kirk Lehman</u>					
Title or position of authorized officer or employee: <u>CEO/Executive VP</u>					
Telephone number of authorized officer or employee: <u>812-486-3211</u>					
Study Area Code of Reporting Carrier	<u>320759</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GEETINGSVILLE TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Steve Scott</b>				Digitally signed by Steve Scott DN:cn=Steve Scott,email=support@geetel.net,O=geetingsville tel. co., inc.,l=Frankfort IN 46041-7799, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Steve Scott</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>765-258-3111</u>					
Study Area Code of Reporting Carrier	<u>320771</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HANCOCK RURAL TEL. CORP. DBA NINESTAR CONNECT</u>					
Signature of authorized officer or employee <b>Kim Gerard</b>				<small>Digitally signed by Kim Gerard DN:cn=Kim Gerard,email=kgerard@ninstarconnect.com,O=hancock rural tel. corp. dba ninestar connect, =Greenfield IN 46140, Date: 3/23/2018</small>	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Kim Gerard</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>317-323-2105</u>					
Study Area Code of Reporting Carrier	<u>320775</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LIGONIER TEL. CO.</u>					
Signature of authorized officer or employee <b>Randy Mead</b>				Digitally signed by Randy Mead DN:cn=Randy Mead,email=rmead@ligtel.net,O=ligonier tel. co.,l=Ligonier IN 46767, Date:3/27/2018	Date: <u>3/27/2018</u>
Printed name of authorized officer or employee: <u>Randy Mead</u>					
Title or position of authorized officer or employee: <u>Vice President and General Manager</u>					
Telephone number of authorized officer or employee: <u>260-894-7161</u>					
Study Area Code of Reporting Carrier	<u>320783</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MONON TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Bruce Hanway</b>				Digitally signed by Bruce Hanway DN:cn=Bruce Hanway,email=bruceh@urhere.net,O=monon tel. co., inc.,I=Monon IN 47959, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Bruce Hanway</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>219-253-6601</u>					
Study Area Code of Reporting Carrier	<u>320790</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MULBERRY COOP. TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Randy Maish</b>				Digitally signed by Randy Maish DN:cn=Randy Maish,email=randy@mintel.net,O=mulberry coop. tel. co., inc.,l=Mulberry IN 46058, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Randy Maish</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>765-296-2885</u>					
Study Area Code of Reporting Carrier	<u>320792</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEW LISBON TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>John Greene</b>				Digitally signed by John Greene DN:cn=John Greene,email=john.greene@nlbc.com,O=new lisbon tel. co., inc.,l=New Lisbon IN 47366, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>John Greene</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>765-332-2413</u>					
Study Area Code of Reporting Carrier	<u>320796</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEW PARIS TEL., INC.</u>					
Signature of authorized officer or employee <b>Paul Penrose</b>				Digitally signed by Paul Penrose DN:cn=Paul Penrose,email=ppenrose@nptel.com,O=new paris tel., inc.,l=New Paris IN 46553-0047, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Paul Penrose</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>574-831-7115</u>					
Study Area Code of Reporting Carrier	<u>320797</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHWESTERN INDIANA TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Sharon McKay</b>				Digitally signed by Sharon McKay DN:cn=Sharon McKay,email=smckay@nitco.com,O=northwestern indiana tel. co., inc.,l=Hebron IN 46341, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Sharon McKay</u>					
Title or position of authorized officer or employee: <u>Business Office/Regulatory Mgr</u>					
Telephone number of authorized officer or employee: <u>219-996-2981</u>					
Study Area Code of Reporting Carrier	<u>320800</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PERRY-SPENCER RURAL TEL. COOP., INC. DBA PSC</u>					
Signature of authorized officer or employee <b>James Dauby</b>				Digitally signed by James Dauby DN:cn=James Dauby,email=jdauby@psci.net,O=perry-spencer rural tel. coop., inc. dba psc,l=St. Meinrad IN 47577, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>James Dauby</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>812-357-2123</u>					
Study Area Code of Reporting Carrier	<u>320807</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PULASKI-WHITE RURAL TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Brent Gillum</b>				Digitally signed by Brent Gillum DN:cn=Brent Gillum,email=bgillum@pwrtc.net,O=pulaski-white rural tel. coop., inc.,l=Buffalo IN 47925, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Brent Gillum</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>574-278-7121</u>					
Study Area Code of Reporting Carrier	<u>320813</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ROCHESTER TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Greta Lynch</b>				Digitally signed by Greta Lynch DN:cn=Greta Lynch,email=greta.lynych@rtc1.com,O=rochester tel. co., inc.,l=Rochester IN 46975-1509, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Greta Lynch</u>					
Title or position of authorized officer or employee: <u>VP-Finance</u>					
Telephone number of authorized officer or employee: <u>574-223-0238</u>					
Study Area Code of Reporting Carrier	<u>320815</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Southeastern Indiana Rural Telephone Cooperative, Inc.</u>				
Signature of authorized officer or employee 				Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>Anthony Clark</u>				
Title or position of authorized officer or employee <u>General Manager</u>				
Telephone number of authorized officer or employee: ( <u>812</u> ) <u>667</u> - <u>5100</u> , ext. <u>240</u>				
Study Area Code of Reporting Carrier	<u>320819</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SUNMAN TELECOMMUNICATIONS CORPORATION</u>					
Signature of authorized officer or employee <b>Michael Alig</b>				<small>Digitally signed by Michael Alig DN:cn=Michael Alig,email=malig@etc1.net,O=sunman telecommunications corporation,l=Sunman IN 47041, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Michael Alig</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>812-623-2122</u>					
Study Area Code of Reporting Carrier	<u>320825</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SWAYZEE TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Audra Hicks</b>				Digitally signed by Audra Hicks DN:cn=Audra Hicks,email=swayzee@swayzee.com,O=swayzee tel. co., inc.,l=Swayzee IN 46986, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Audra Hicks</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>765-922-7916</u>					
Study Area Code of Reporting Carrier	<u>320826</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SWEETSER RURAL TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Lynn Hess</b>				Digitally signed by Lynn Hess DN:cn=Lynn Hess,email=lynnhess@comteck.com,O=sweetser rural tel. co., inc.,l=Sweetser IN 46987, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Lynn Hess</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>765-384-4311</u>					
Study Area Code of Reporting Carrier	<u>320827</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Washington County Rural Telephone Cooperative, Inc</u>				
Signature of authorized officer or employee 				Date <u>03/26/2018</u>
Printed name of authorized officer or employee <u>Michael K Harian</u>				
Title or position of authorized officer or employee <u>General Manager</u>				
Telephone number of authorized officer or employee: ( <u>812</u> ) <u>967</u> - <u>5550</u> , ext.				
Study Area Code of Reporting Carrier <u>320834</u>		Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
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.				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>YEOMAN TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>David Blacker</b>				Digitally signed by David Blacker DN:cn=David Blacker,email=dblacke@ytci.com,O=yeoman tel. co., inc.,l=Yeoman IN 47997, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>David Blacker</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>574-965-2100</u>					
Study Area Code of Reporting Carrier	<u>320839</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>AMHERST TEL. CO.</u>					
Signature of authorized officer or employe <b>Carl Bohman</b>				Digitally signed by Carl Bohman DN:cn=Carl Bohman,email=carlb@tvalleycom.com,O=amherst tel. co.,l=Amherst WI 54406, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Carl Bohman</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>715-824-5529</u>					
Study Area Code of Reporting Carrier	<u>330843</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

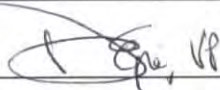
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BALDWIN TELCOM., INC.</u>					
Signature of authorized officer or employee <b>Ruth Brenne</b>				Digitally signed by Ruth Brenne DN:cn=Ruth Brenne,email=ruth.brenne@baldwin-telecom.net,O=baldwin telecom., inc.,l=Baldwin WI 54002, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Ruth Brenne</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>715-684-3346</u>					
Study Area Code of Reporting Carrier	<u>330846</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Belmont Telephone Co., Inc.**

Signature of authorized officer or employee



Date

**05/21/2018**

Printed name of authorized officer or employee

**D. Egli**

Title or position of authorized officer or employee

**VP**

Telephone number of authorized officer or employee: ( 608 ) 744 - 3500 , ext.

Study Area Code of Reporting Carrier

**330847**

Filing Due Date for this  
form (mm/dd/yyyy)

**June 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BERGEN TEL. CO.</u>					
Signature of authorized officer or employe <b>Brad Ellefson</b>				<div style="font-size: small;">Digitally signed by Brad Ellefson DN:cn=Brad Ellefson,email=brad@sharontelephone.com,O=bergen tel. co.,l=Sharon WI 53585, Date:3/20/2018</div> <div style="float: right;">Date: <u>3/20/2018</u></div>	
Printed name of authorized officer or employee: <u>Brad Ellefson</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>262-736-9981</u>					
Study Area Code of Reporting Carrier	<u>330848</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLOOMER TEL. CO.</u>					
Signature of authorized officer or employee <b>Kent Klima</b>				<small>Digitally signed by Kent Klima DN:cn=Kent Klima,email=kent.klima@bloomer.net,O=bloomer tel. co.,l=Bloomer WI 54724-1697, Date:3/20/2018</small> Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Kent Klima</u>					
Title or position of authorized officer or employee: <u>Vice President &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>715-568-4830</u>					
Study Area Code of Reporting Carrier	<u>330850</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHEQUAMEGON COMMUNICATIONS COOPERATIVE, INC.</u>					
Signature of authorized officer or employee <b>Robert Thompson</b>				Digitally signed by Robert Thompson DN:cn=Robert Thompson,email=rthompson@norvado.com,O=chequamegon communications cooperative, inc.,l=Cable WI 54821 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Robert Thompson</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>715-798-3303</u>					
Study Area Code of Reporting Carrier	<u>330860</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHIBARDUN TEL. COOP., INC.</u>					
Signature of authorized officer or employe <b>N. Scott Behn</b>				Digitally signed by N. Scott Behn DN:cn=N. Scott Behn,email=sbehn@mosaictelcom.com,O=chibardun tel. coop., inc.,l=Cameron WI 54822-0664, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>N. Scott Behn</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>715-458-5400</u>					
Study Area Code of Reporting Carrier	<u>330861</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:


<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CITIZENS TEL. COOP., INC.-WI</u>					
Signature of authorized officer or employee <b>Dennis Bachman</b>				Digitally signed by Dennis Bachman DN:cn=Dennis Bachman,email=dbachman@citizens-connected.com,O=citizens tel. coop., inc.-wi,l=New Auburn WI 54757-0127, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Bachman</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>715-237-2605</u>					
Study Area Code of Reporting Carrier	<u>330863</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COCHRANE COOP. TEL. CO.</u>					
Signature of authorized officer or employe <b>Gina Tomlinson</b>				Digitally signed by Gina Tomlinson DN:cn=Gina Tomlinson,email=ginat@mw.t.net,O=cochrane coop.tel. co.,l=Cochrane WI 54622-0189, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Gina Tomlinson</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>608-248-2323</u>					
Study Area Code of Reporting Carrier	<u>330866</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>			
<p>Name of Reporting Carrier <b>Cuba City telephone Exchange Co., Inc.</b></p>			
<p>Signature of authorized officer or employee  VP</p>			<p>Date <b>05/21/2018</b></p>
<p>Printed name of authorized officer or employee <b>D. Egli</b></p>			
<p>Title or position of authorized officer or employee <b>VP</b></p>			
<p>Telephone number of authorized officer or employee: ( 608 ) 744 - 3500 , ext.</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><b>330872</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>June 2018</p>
<p><b>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</b></p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HAGER TELECOM, INC.</u>					
Signature of authorized officer or employee <b>Gloria Pederson</b>				Digitally signed by Gloria Pederson DN:cn=Gloria Pederson,email=gpederson@bevcomm.com,O=hager telecom, inc.,I=Blue Earth MN 56013, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Gloria Pederson</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>507-526-3252</u>					
Study Area Code of Reporting Carrier	<u>330889</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LAKEFIELD TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Robert Webb</b>				Digitally signed by Robert Webb DN:cn=Robert Webb,email=bob.webb@nsight.com,O=Lakefield telephone company,l=De Pere WI 54115, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Robert Webb</u>					
Title or position of authorized officer or employee: <u>Vice President/COO</u>					
Telephone number of authorized officer or employee: <u>920-617-7351</u>					
Study Area Code of Reporting Carrier	<u>330896</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>La Valle Telephone Cooperative, Inc</u>			
Signature of authorized officer or employee 			Date <u>03/26/2018</u>
Printed name of authorized officer or employee <u>John Bartz</u>			
Title or position of authorized officer or employee <u>CEO/GM</u>			
Telephone number of authorized officer or employee: ( <u>608</u> ) <u>985</u> - <u>7201</u> , ext.			
Study Area Code of Reporting Carrier	<u>330899</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LEMONWEIR VALLEY TEL. CO.</u>					
Signature of authorized officer or employee <b>Donna Rezin</b>				Digitally signed by Donna Rezin DN:cn=Donna Rezin,email=Donna.Rezin@getlynxx.com,O=lemonweir valley tel. co.,l=Camp Douglas WI 54618, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Donna Rezin</u>					
Title or position of authorized officer or employee: <u>Treasurer</u>					
Telephone number of authorized officer or employee: <u>608-427-6515</u>					
Study Area Code of Reporting Carrier	<u>330900</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LAKELAND COMMUNICATIONS GROUP, LLC-LUCK</u>					
Signature of authorized officer or employee <b>Crystal Morley</b>				<small>Digitally signed by Crystal Morley DN:cn=Crystal Morley,email=crystalm@lakeland.ws,O=lakeland communications group, llc-luck,l=Milltown WI 54858, Date:3/20/2018</small> Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Crystal Morley</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>715-825-5105</u>					
Study Area Code of Reporting Carrier	<u>330902</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MARQUETTE-ADAMS TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Jerry Schneider</b>				Digitally signed by Jerry Schneider DN:cn=Jerry Schneider,email=jschneider@maadtelco.com,O=marquette-adams tel. coop., inc.,l=Oxford WI 53952, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Jerry Schneider</u>					
Title or position of authorized officer or employee: <u>CEO &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>608-586-4111</u>					
Study Area Code of Reporting Carrier	<u>330908</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LAKELAND COMMUNICATIONS GROUP, LLC-MILLTOWN</u>					
Signature of authorized officer or employee <b>Crystal Morley</b>				Digitally signed by Crystal Morley DN:cn=Crystal Morley,email=crystalm@lakeland.ws,O=lakeland communications group, llc-milltown,l=Milltown WI 54858, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Crystal Morley</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>715-825-5105</u>					
Study Area Code of Reporting Carrier	<u>330910</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NELSON COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Christy Berger</b>				Digitally signed by Christy Berger DN:cn=Christy Berger,email=christy@ntec.net,O=nelson communications cooperative,l=Durand WI 54736-0228, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Christy Berger</u>					
Title or position of authorized officer or employee: <u>Executive Vice President</u>					
Telephone number of authorized officer or employee: <u>715-672-4204</u>					
Study Area Code of Reporting Carrier	<u>330918</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NIAGARA TELEPHONE COMPANY</u>					
Signature of authorized officer or employe <b>Robert Webb</b>				Digitally signed by Robert Webb DN:cn=Robert Webb,email=bob.webb@nsight.com,O=niagara telephone company,l=De Pere WI 54115, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Robert Webb</u>					
Title or position of authorized officer or employee: <u>Vice President/COO</u>					
Telephone number of authorized officer or employee: <u>920-617-7351</u>					
Study Area Code of Reporting Carrier	<u>330920</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BAYLAND TELEPHONE, LLC</u>					
Signature of authorized officer or employee <b>Robert Webb</b>				Digitally signed by Robert Webb DN:cn=Robert Webb,email=bob.webb@nsight.com,O=bayland telephone, llc,l=De Pere WI 54115, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Robert Webb</u>					
Title or position of authorized officer or employee: <u>Vice President/COO</u>					
Telephone number of authorized officer or employee: <u>920-617-7351</u>					
Study Area Code of Reporting Carrier	<u>330925</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>INDIANHEAD TEL. CO.</u>					
Signature of authorized officer or employe <b>Gloria Pederson</b>				Digitally signed by Gloria Pederson DN:cn=Gloria Pederson,email=gpederson@bevcomm.com,O=indian head tel. co.,l=Blue Earth MN 56013, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Gloria Pederson</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>507-526-3252</u>					
Study Area Code of Reporting Carrier	<u>330936</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PRICE COUNTY TEL. CO.</u>					
Signature of authorized officer or employee <b>Catherine Mess</b>				<small>Digitally signed by Catherine Mess DN:cn=Catherine Mess,email=messc@pctcnet.net,O=price county tel. co.,l=Phillips WI 54555-0108, Date:3/23/2018</small> Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Catherine Mess</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>715-339-2151</u>					
Study Area Code of Reporting Carrier	<u>330937</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHEAST TEL. CO.</u>					
Signature of authorized officer or employe <b>Robert Webb</b>				Digitally signed by Robert Webb DN:cn=Robert Webb,email=bob.webb@nsight.com,O=northeast tel. co.,l=De Pere WI 54115, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Robert Webb</u>					
Title or position of authorized officer or employee: <u>Vice President/COO</u>					
Telephone number of authorized officer or employee: <u>920-617-7351</u>					
Study Area Code of Reporting Carrier	<u>330938</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RICHLAND-GRANT TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>John Bartz</b>				Digitally signed by John Bartz DN:cn=John Bartz,email=jbartz@mw.t.net,O=richland-grant tel. coop., inc.,l=Blue River WI 53518, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>John Bartz</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>608-537-2461</u>					
Study Area Code of Reporting Carrier	<u>330942</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SHARON TEL. CO.</u>					
Signature of authorized officer or employe <b>Brad Ellefson</b>				Digitally signed by Brad Ellefson DN:cn=Brad Ellefson,email=brad@sharontelephone.com,O=sharon tel. co.,l=Sharon WI 53585, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Brad Ellefson</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>262-736-9981</u>					
Study Area Code of Reporting Carrier	<u>330946</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SIREN TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Sid Sherstad</b>				Digitally signed by Sid Sherstad DN:cn=Sid Sherstad,email=sherstad@sirentel.net,O=siren tel. co., inc.,l=Siren WI 54872-0426, Date:3/26/2018	
Printed name of authorized officer or employee: <u>Sid Sherstad</u>				Date: <u>3/26/2018</u>	
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>715-349-2224</u>					
Study Area Code of Reporting Carrier	<u>330949</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SPRING VALLEY TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Carol Anderson</b>				Digitally signed by Carol Anderson DN:cn=Carol Anderson,email=svtel@svtel.net,O=spring valley tel. co., inc.,l=Spring Valley WI 54767, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Carol Anderson</u>					
Title or position of authorized officer or employee: <u>Assistant Manager/Assistant Secretary</u>					
Telephone number of authorized officer or employee: <u>715-778-4433</u>					
Study Area Code of Reporting Carrier	<u>330953</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRI-COUNTY COMMUNICATIONS COOPERATIVE, INC.</u>					
Signature of authorized officer or employee <b><u>Cheryl Rue</u></b>				Digitally signed by Cheryl Rue DN:cn=Cheryl Rue,email=crue@tccpro.net,O=tri-county communications cooperative, inc.,l=Strum WI 54770, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Cheryl Rue</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>715-695-2691</u>					
Study Area Code of Reporting Carrier	<u>330960</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VERNON COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Rodney Olson</b>				Digitally signed by Rodney Olson DN:cn=Rodney Olson,email=rolson@vernoncom.coop,O=vernon communications cooperative,l=Westby WI 54667, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Rodney Olson</u>					
Title or position of authorized officer or employee: <u>CEO &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>608-634-7421</u>					
Study Area Code of Reporting Carrier	<u>330966</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST WISCONSIN TELCOM COOP., INC.</u>					
Signature of authorized officer or employee <b>Mark Stenseth</b>				Digitally signed by Mark Stenseth DN:cn=Mark Stenseth,email=stenseth@wwt.coop,O=west wisconsin telcom coop., inc.,l=Downsville WI 54735, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Mark Stenseth</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>715-664-8311</u>					
Study Area Code of Reporting Carrier	<u>330971</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Wood County Telephone Company</u>			
Signature of authorized officer or employee <u><i>Greg Krings</i></u>			Date <u>3-21-18</u>
Printed name of authorized officer or employee <u>Greg Krings</u>			
Title or position of authorized officer or employee <u>Asst Secretary / Treasurer</u>			
Telephone number of authorized officer or employee: ( <u>715</u> ) <u>421</u> - <u>8129</u> , ext.			
Study Area Code of Reporting Carrier	<u>330974</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALHAMBRA - GRANTFORK TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Kevin Osterbur</b>				<small>Digitally signed by Kevin Osterbur DN:cn=Kevin Osterbur,email=kevino@agtelco.com,O=alhambra - grantfork telephone company,l=Alhambra IL 62001-0207, Date:3/26/2018</small>	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Kevin Osterbur</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>618-488-2165</u>					
Study Area Code of Reporting Carrier	<u>340978</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Cambridge Telephone Co.-IL</u>				
Signature of authorized officer or employee 				Date <u>03/20/2018</u>
Printed name of authorized officer or employee <u>Scott D Rubins</u>				
Title or position of authorized officer or employee <u>President and CEO</u>				
Telephone number of authorized officer or employee: ( <u>309</u> ) <u>944</u> - <u>2103</u> . ext. <u>        </u>				
Study Area Code of Reporting Carrier	<u>340983</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/27/2018</u>
<p align="center">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.</p>				

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier

CLARKSVILLE MUTUAL TELEPHONE COMPANY

Signature of authorized officer or employee

Patricia Rhoads

Date

3/22/18

Printed name of authorized officer or employee

PATRICIA RHOADS

Title or position of authorized officer or employee

SECRETARY - TREASURER

Telephone number of authorized officer or employee

(217) 889-3822

Study Area Code of Reporting Carrier

340990

Filing Due Date for this form  
(mm/dd/yyyy)

3/31/2018

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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>EGYPTIAN TEL. COOP. ASSN.</u>					
Signature of authorized officer or employe <b>Kevin Jacobsen</b>				Digitally signed by Kevin Jacobsen DN:cn=Kevin Jacobsen,email=kjacobsen@egyptian.net,O=egyptian tel. coop. assn.,l=Steeleville IL 62288-0158, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Kevin Jacobsen</u>					
Title or position of authorized officer or employee: <u>Executive Vice President</u>					
Telephone number of authorized officer or employee: <u>618-774-1000</u>					
Study Area Code of Reporting Carrier	<u>341003</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier

*Egyptian Telephone Cooperative Association*

Signature of authorized officer or employee

*Kevin J. Jacobson*

Date

*10/6/2018*

Printed name of authorized officer or employee

*Kevin J. Jacobson*

Title or position of authorized officer or employee

*CEO*

Telephone number of authorized officer or employee: *(618) 774 - 1000*, ext.

Study Area Code of Reporting Carrier

*341007*

*10/06/2018*  
Filing Due Date for this  
form (mm/dd/yyyy)

October 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRAFTON TEL. CO.</u>					
Signature of authorized officer or employee <u>Leigh Sickinger</u>				Digitally signed by Leigh Sickinger DN:cn=Leigh Sickinger,email=lsickinger@gtec.net,O=grifton tel. co.,l=Grafton IL 62037, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Leigh Sickinger</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>618-786-3400</u>					
Study Area Code of Reporting Carrier	<u>341020</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE GRANDVIEW MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Angela Tate</b>				Digitally signed by Angela Tate DN:cn=Angela Tate,email=gmtc@joink.com,O=the grandview mutual tel. co.,l=Paris IL 61944, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Angela Tate</u>					
Title or position of authorized officer or employee: <u>Treasurer</u>					
Telephone number of authorized officer or employee: <u>217-946-4101</u>					
Study Area Code of Reporting Carrier	<u>341021</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRIDLEY TEL. CO.</u>					
Signature of authorized officer or employe <b>Herb Flesher</b>				Digitally signed by Herb Flesher DN:cn=Herb Flesher,email=hflesher@gridtel.com,O=gridley tel. co.,l=Gridley IL 61744-0129, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Herb Flesher</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>309-747-3780</u>					
Study Area Code of Reporting Carrier	<u>341023</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Gridley Telephone Co.**

Signature of authorized officer or employee *Herbert L. Flesher* Date *10/5/2018*

Printed name of authorized officer or employee **Herbert L. Flesher**

Title or position of authorized officer or employee **Vice President**

Telephone number of authorized officer or employee: ( 309 ) 747 - 2221 , ext.

Study Area Code of Reporting Carrier	341023		Filing Due Date for this form (mm/dd/yyyy)	October 08, 2018	
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Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SHAWNEE TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Michael Guffy</b>				Digitally signed by Michael Guffy DN:cn=Michael Guffy,email=mguffy@shawneetel.com,O=shawnee telephone company,l=Equality IL 62934, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Michael Guffy</u>					
Title or position of authorized officer or employee: <u>VP - Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>618-276-3309</u>					
Study Area Code of Reporting Carrier	<u>341025</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HARRISONVILLE TEL. CO.</u>					
Signature of authorized officer or employe <b>Lee Whitcher</b>				Digitally signed by Lee Whitcher DN:cn=Lee Whitcher,email=htclhw@htc.net,O=harrisonville tel. co.,l=Waterloo IL 62298-0149, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Lee Whitcher</u>					
Title or position of authorized officer or employee: <u>Vice President of Regulatory Compliance</u>					
Telephone number of authorized officer or employee: <u>618-939-9252</u>					
Study Area Code of Reporting Carrier	<u>341026</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>					
Name of Reporting Carrier <u>Home Telephone Co.</u>					
Signature of authorized officer or employee 				Date <u>3/23/18</u>	
Printed name of authorized officer or employee <u>Eric Schmidt</u>					
Title or position of authorized officer or employee <u>President</u>					
Telephone number of authorized officer or employee: ( <u>618</u> ) <u>644</u> - <u>2111</u> , ext. _____					
Study Area Code of Reporting Carrier		<u>341032</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KINSMAN MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Michelle Baudino</b>				Digitally signed by Michelle Baudino DN:cn=Michelle Baudino,email=kinstel@mtco.com,O=kinsman mutual tel. co.,l=Kinsman IL 60437, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Michelle Baudino</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>815-392-4210</u>					
Study Area Code of Reporting Carrier	<u>341041</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LA HARPE TEL. CO.</u>					
Signature of authorized officer or employee <b>Todd Irish</b>				Digitally signed by Todd Irish DN:cn=Todd Irish,email=todd@laharpetelephone.com,O=la harpe tel. co.,l=La Harpe IL 61450, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Todd Irish</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>217-659-7721</u>					
Study Area Code of Reporting Carrier	<u>341043</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LEAF RIVER TEL. CO.</u>					
Signature of authorized officer or employee <b>Aaron Palmer</b>				Digitally signed by Aaron Palmer DN:cn=Aaron Palmer,email=apalmer@lnet1.com,O=leaf river tel. co.,l=Leaf River IL 61047, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Aaron Palmer</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>815-738-2216</u>					
Study Area Code of Reporting Carrier	<u>341045</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LEONORE MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Donna Naas</b>				Digitally signed by Donna Naas DN:cn=Donna Naas,email=lmtc@lmtc.net,O=leonore mutual tel. co.,l=Leonore IL 61332, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Donna Naas</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>815-856-3164</u>					
Study Area Code of Reporting Carrier	<u>341046</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MCDONOUGH TELEPHONE COOPERATIVE</u>					
Signature of authorized officer or employee <b>Jay Griswold</b>				Digitally signed by Jay Griswold DN:cn=Jay Griswold,email=jgriswold@mdtc.net,O=mcdonough telephone cooperative, =Colchester IL 62326, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Jay Griswold</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>309-776-3211</u>					
Study Area Code of Reporting Carrier	<u>341047</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MADISON TEL. CO.</u>					
Signature of authorized officer or employee <b>Dave Beier</b>				Digitally signed by Dave Beier DN:cn=Dave Beier,email=dbeier@madison.telco., Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Dave Beier</u>					
Title or position of authorized officer or employee: <u>Director of Regulatory and Finance</u>					
Telephone number of authorized officer or employee: <u>618-635-1000</u>					
Study Area Code of Reporting Carrier	<u>341049</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier

MAISON TELEPHONE COMPANY

Signature of authorized officer or employee

*Mary Schwartz Westerholz*

Date

8/6/18

Printed name of authorized officer or employee

MARY SCHWARTZ WESTERHOLZ

Title or position of authorized officer or employee

VP / CFO

Telephone number of authorized officer or employee: (

618) 635 - 1000 ext. 248

Study Area Code of Reporting Carrier

34-1049

Filing Due Date for this form (mm/dd/yyyy)

August 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MARSEILLES TEL. CO. OF MARS.</u>					
Signature of authorized officer or employee <b>Ann Dickerson</b>				Digitally signed by Ann Dickerson DN:cn=Ann Dickerson,email=ann@mtco.com,O=marseilles tel. co. of mars.,l=Metamora IL 61548-0800, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Ann Dickerson</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>309-367-4197</u>					
Study Area Code of Reporting Carrier	<u>341050</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>METAMORA TEL. CO.</u>					
Signature of authorized officer or employee <b>Ann Dickerson</b>				Digitally signed by Ann Dickerson DN:cn=Ann Dickerson,email=ann@mtco.com,O=metamora tel. co.,l=Metamora IL 61548-0800, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Ann Dickerson</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>309-367-4197</u>					
Study Area Code of Reporting Carrier	<u>341053</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MONTROSE MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>George Tays</b>				Digitally signed by George Tays DN:cn=George Tays,email=geot@mmtcnet.com,O=montrose mutual tel. co.,l=Dieterich IL 62424, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>George Tays</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer/General Manager</u>					
Telephone number of authorized officer or employee: <u>217-925-5242</u>					
Study Area Code of Reporting Carrier	<u>341058</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MOULTRIE INDEPENDENT TEL. CO.</u>					
Signature of authorized officer or employe <b>Michael Guffy</b>				Digitally signed by Michael Guffy DN:cn=Michael Guffy,email=mguffy@shawneetel.com,O=moultrie independent tel. co.,l=Equality IL 62934, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Michael Guffy</u>					
Title or position of authorized officer or employee: <u>VP - Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>618-276-3309</u>					
Study Area Code of Reporting Carrier	<u>341060</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEW WINDSOR TEL. CO.</u>					
Signature of authorized officer or employee <b>Troy Nimrick</b>				Digitally signed by Troy Nimrick DN:cn=Troy Nimrick,email=troy@nwtelephone.com,O=new windsor tel. co.,l=New Windsor IL 61465-0488, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Troy Nimrick</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>309-667-2255</u>					
Study Area Code of Reporting Carrier	<u>341062</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ONEIDA TEL. EXCHANGE</u>					
Signature of authorized officer or employee <u>Lori McCarthy</u>				Digitally signed by Lori McCarthy DN:cn=Lori McCarthy,email=wins5@otelmail.com,O=oneida tel. exchange,lc=Oneida IL 61467, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Lori McCarthy</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>309-483-3111</u>					
Study Area Code of Reporting Carrier	<u>341066</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VIOLA HOME TEL. CO.</u>					
Signature of authorized officer or employe <b>Jay Barton</b>				Digitally signed by Jay Barton DN:cn=Jay Barton,email=jay@violatel.com,O=viola home tel. co.,l=Viola IL 61486, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Jay Barton</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>309-596-2222</u>					
Study Area Code of Reporting Carrier	<u>341087</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WABASH TEL COOP, INC. DBA WABASH COMM CO-OP</u>					
Signature of authorized officer or employee <b>Barry Adair</b>				Digitally signed by Barry Adair DN:cn=Barry Adair,email=barryadair@wabash.net,O=wabash tel coop, inc. dba wabash comm co-op,l=Louisville IL 62858. Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Barry Adair</u>					
Title or position of authorized officer or employee: <u>EVP General Manager</u>					
Telephone number of authorized officer or employee: <u>618-665-3311</u>					
Study Area Code of Reporting Carrier	<u>341088</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WOODHULL TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Philip Wirt</b>				Digitally signed by Philip Wirt DN:cn=Philip Wirt,email=pwirtwtc@divcominc.net,O=woodhull telephone company,l=Woodhull IL 61490-0117, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Philip Wirt</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>309-334-2150</u>					
Study Area Code of Reporting Carrier	<u>341091</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>REASNOR TELEPHONE COMPANY, LLC</u>					
Signature of authorized officer or employee <b>Christopher Ulmer</b>				Digitally signed by Christopher Ulmer DN: cn=Christopher Ulmer, email=culmer@icorellc.com, O=reasnor telephone company, llc, l=Emmaus PA 18049	
				Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Christopher Ulmer</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>610-928-3903</u>					
Study Area Code of Reporting Carrier	<u>350739</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

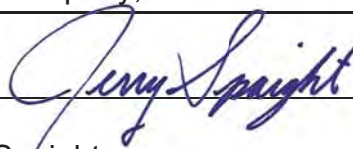
<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Arcadia Telephone</u>			
Signature of authorized officer or employee <u>Mark Slechta</u>			Date <u>3-22-18</u>
Printed name of authorized officer or employee <u>Mark Slechta</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: <u>712 689 2238 ext.</u>			
Study Area Code of Reporting Carrier	<u>351098</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Atkins Telephone Company, Inc.**

Signature of authorized officer or employee



Date

**05/16/2018**

Printed name of authorized officer or employee

**Jerry Spaight**

Title or position of authorized officer or employee

**General Manager**

Telephone number of authorized officer or employee: ( **319** ) **446** - **7331** , ext.

Study Area Code of Reporting Carrier

**351101**

Filing Due Date for this form (mm/dd/yyyy)

**June 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALPINE COMMUNICATIONS, L.C.</u>					
Signature of authorized officer or employee <b>Chris Hopp</b>				Digitally signed by Chris Hopp DN:cn=Chris Hopp,email=chopp@alpinecom.net,O=alpine communications, l.c.,l=Elkader IA 52043, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Chris Hopp</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>563-245-4480</u>					
Study Area Code of Reporting Carrier	<u>351106</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BALDWIN-NASHVILLE TEL. CO., INC.</u>					
Signature of authorized officer or employe <b>Brian Rickels</b>				Digitally signed by Brian Rickels DN:cn=Brian Rickels,email=bntc@netins.net,O=baldwin-nashville tel. co., inc.,l=Baldwin IA 52207-0050, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Brian Rickels</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>563-673-6001</u>					
Study Area Code of Reporting Carrier	<u>351107</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BERNARD TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Kyle Manders</b>				Digitally signed by Kyle Manders DN:cn=Kyle Manders,email=kyle@bernardtel.net,O=bernard tel. co., inc.,l=Bernard IA 52032-0068, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Kyle Manders</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>563-879-3203</u>					
Study Area Code of Reporting Carrier	<u>351110</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Brooklyn Mutual Telecommunications Cooperative</u>			
Signature of authorized officer or employee <u>Tim Atkinson</u>			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>Tim Atkinson</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>641</u> ) <u>522</u> - <u>9211</u> , ext.			
Study Area Code of Reporting Carrier <u>351113</u>		Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CASCADE COMMUNICATIONS COMPANY</u>					
Signature of authorized officer or employee <b>David Gibson</b>				Digitally signed by David Gibson DN:cn=David Gibson,email=dave@cascadecomm.com,O=cascade communications company,l=Cascade IA 52033-0250, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>David Gibson</u>					
Title or position of authorized officer or employee: <u>General Manager/Compliance Officer</u>					
Telephone number of authorized officer or employee: <u>563-852-3710</u>					
Study Area Code of Reporting Carrier	<u>351118</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CITIZENS MUTUAL TELEPHONE COOPERATIVE</u>					
Signature of authorized officer or employee <u>Lynn Clark</u>				Digitally signed by Lynn Clark DN:cn=Lynn Clark,email=lclark@cmtel.com,O=citizens mutual telephone cooperative,lc=Bloomfield IA 52537, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Lynn Clark</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>641-664-2074</u>					
Study Area Code of Reporting Carrier	<u>351129</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CLARENCE TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Mark Harvey</b>				Digitally signed by Mark Harvey DN:cn=Mark Harvey,email=ctcmanager@netins.net,O=clarence tel. co., inc.,l=Dysart IA 52224-0280, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Mark Harvey</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>319-476-7800</u>					
Study Area Code of Reporting Carrier	<u>351130</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CLEAR LAKE INDP. TEL. CO.</u>					
Signature of authorized officer or employee <b>Sarah McChesney</b>				Digitally signed by Sarah McChesney DN:cn=Sarah McChesney,email=SarahMcChesney@cltel.com,O=clear lake indp. tel. co.,l=Clear Lake IA 50428, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Sarah McChesney</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>641-357-2111</u>					
Study Area Code of Reporting Carrier	<u>351132</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent: <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier: <u>C-M-L Telephone Cooperative Association</u>			
Signature of authorized officer or employee: 			Date: <u>03/22/2018</u>
Printed name of authorized officer or employee: <u>Bruce Johnson</u>			
Title or position of authorized officer or employee: <u>GM/CEO</u>			
Telephone number of authorized officer or employee: ( <u>712</u> ) <u>443</u> - <u>8222</u> , ext. _____			
Study Area Code of Reporting Carrier	<u>351133</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p>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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COLO TEL. CO.</u>					
Signature of authorized officer or employee <u>Larry Springer</u>				Digitally signed by Larry Springer DN:cn=Larry Springer,email=larrycolo@netins.net,O=colo tel. co.,l=Colo IA 50056-0315, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Larry Springer</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>641-377-2202</u>					
Study Area Code of Reporting Carrier	<u>351134</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Corn Belt Telephone Company**

Signature of authorized officer or employee

*Lee Wuebker*

Date **5-18-18**

Printed name of authorized officer or employee **Lee Wuebker**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( **712** ) **664** - **2221** , ext.

Study Area Code of Reporting Carrier

**351141**

Filing Due Date for this form (mm/dd/yyyy)

**June 2018**

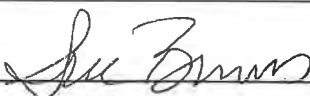
**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DUMONT TEL. CO.</u>					
Signature of authorized officer or employe <b>Roger Kregel</b>				Digitally signed by Roger Kregel DN:cn=Roger Kregel,email=rogerkr@netins.net,O=dumont tel. co.,l=Dumont IA 50625-0349, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Roger Kregel</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>641-857-3211</u>					
Study Area Code of Reporting Carrier	<u>351152</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Dunkerton Telephone Cooperative</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>05/17/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Sue Bruns</b></p>				
<p>Title or position of authorized officer or employee <b>CEO</b></p>				
<p>Telephone number of authorized officer or employee: ( 319 ) 822 - 4512 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>351153</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>June 2018</p>	
<p><b>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</b></p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ELLSWORTH COOP. TEL. ASSN.</u>					
Signature of authorized officer or employee <u>Joshua Angove</u>				Digitally signed by Joshua Angove DN:cn=Joshua Angove,email=jangove@netins.net,O=ellsworth coop. tel. assn.,l=Ellsworth IA 50075-0458, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Joshua Angove</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>515-836-4431</u>					
Study Area Code of Reporting Carrier	<u>351157</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MINBURN TELECOMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Debra Lucht</b>				Digitally signed by Debra Lucht DN:cn=Debra Lucht,email=debl@minburncomm.com,O=minburn telecommunications, inc.,l=Minburn IA 50167, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Debra Lucht</u>					
Title or position of authorized officer or employee: <u>General Manager/Assistant Secretary</u>					
Telephone number of authorized officer or employee: <u>515-677-2264</u>					
Study Area Code of Reporting Carrier	<u>351158</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>			
<p>Name of Reporting Carrier <u>F&amp;B Communications, Inc.</u></p>			
<p>Signature of authorized officer or employee <u>Brenda K. Kay</u></p>			<p>Date <u>03/22/2018</u></p>
<p>Printed name of authorized officer or employee <u>Brenda Kay</u></p>			
<p>Title or position of authorized officer or employee <u>Secretary/Treasurer</u></p>			
<p>Telephone number of authorized officer or employee: ( <u>563</u> ) <u>374</u> - <u>1236</u> , ext. _____</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><u>351160</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>
<p align="center">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.</p>			

Certification-Agent

TRANSMITTAL NO. 1549

VOLUME 1  
APPENDIX C  
EXHIBIT 4

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Farmers Cooperative Telephone Company**

Signature of authorized officer or employee

Date

**6/1/2018**

Printed name of authorized officer or employee

**Mark Harvey**

Title or position of authorized officer or employee

**General Manager**

Telephone number of authorized officer or employee: ( 319 ) 476 7800 ext.

Study Area Code of Reporting Carrier

**351162**

Filing Due Date for this  
form (mm/dd/yyyy)

**June 2018**

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

TRANSMITTAL NO. 1549

06/01/2018 10:50AM (GMT-04:00)

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **FARMERS & MERCHANTS MUTUAL TELEPHONE**

Signature of authorized officer or employee  Date **05/16/2018**

Printed name of authorized officer or employee **SUSIE STALDER**

Title or position of authorized officer or employee **DAILY OPERATIONS MGR**

Telephone number of authorized officer or employee: ( 319 ) 256 - 2736 , ext.

Study Area Code of Reporting Carrier	<b>351166</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>June 2018</b>
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS MUTUAL COOP. TEL. CO.-MOULTON</u>					
Signature of authorized officer or employee <b>Tammy Wheeler</b>				Digitally signed by Tammy Wheeler DN:cn=Tammy Wheeler,email=twheeler@netins.net,O=farmers mutual coop. tel. co.-moulton,l=Moulton IA 52572, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Tammy Wheeler</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>641-642-3249</u>					
Study Area Code of Reporting Carrier	<u>351169</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Farmers Mutual Cooperative Telephone Company**

Signature of authorized officer or employee *Tammy S. Wheeler*

Date **07/09/2018**

Printed name of authorized officer or employee **Tammy S. Wheeler**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( **641** ) **642** - **3249** , ext.

Study Area Code of Reporting Carrier

**351169**

Filing Due Date for this form (mm/dd/yyyy)

**July 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS MUTUAL TEL. CO.-NORA SPRINGS</u>					
Signature of authorized officer or employee		<b>Debra Ward</b> <small>Digitally signed by Debra Ward DN:cn=Debra Ward,email=dward@omnitel.biz,O=farmers mutual tel. co.-nora springs,l=Nora Springs IA 50458, Date:3/19/2018</small>		Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Debra Ward</u>					
Title or position of authorized officer or employee: <u>Director of Corporate Operations</u>					
Telephone number of authorized officer or employee: <u>641-749-2531</u>					
Study Area Code of Reporting Carrier	<u>351172</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS MUTUAL TEL. COOP.-SHELLSBURG</u>					
Signature of authorized officer or employe <b>Curtis Eldred</b>				Digitally signed by Curtis Eldred DN:cn=Curtis Eldred,email=celdred@fmtcs.com,O=farmers mutual tel. coop.-shellsburg,l=Shellsburg IA 52332-0438, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Curtis Eldred</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>319-436-2224</u>					
Study Area Code of Reporting Carrier	<u>351173</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Farmers Mutual Telephone Company of Stanton, Iowa</u>				
Signature of authorized officer or employee 				Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Kevin T. Cabbage</u>				
Title or position of authorized officer or employee <u>General Manager/CEO</u>				
Telephone number of authorized officer or employee: ( <u>712</u> ) <u>829</u> - <u>2111</u> , ext.				
Study Area Code of Reporting Carrier	<u>351174</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4


TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS TEL. CO.-BATAVIA</u>					
Signature of authorized officer or employe <u>Joe Snyder</u>				<small>Digitally signed by Joe Snyder DN:cn=Joe Snyder,email=jsnyder@cmtel.com,O=farmers tel. co.-batavia,l=Bloomfield IA 52537, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Joe Snyder</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>641-664-2074</u>					
Study Area Code of Reporting Carrier	<u>351175</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Farmers Telephone Company**

Signature of authorized officer or employee  Date **10/05/2018**

Printed name of authorized officer or employee **Joe Snyder**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( 641 ) 664 - 2074 , ext.

Study Area Code of Reporting Carrier **351175**

Filing Due Date for this form (mm/dd/yyyy)

October 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS TEL. CO.-RICEVILLE</u>					
Signature of authorized officer or employee <b>Debra Ward</b>				Digitally signed by Debra Ward DN:cn=Debra Ward,email=dward@omnitel.biz,O=farmers tel. co.-riceville,j=Nora Springs IA 50458, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Debra Ward</u>					
Title or position of authorized officer or employee: <u>Director of Corporate Operations</u>					
Telephone number of authorized officer or employee: <u>641-749-2531</u>					
Study Area Code of Reporting Carrier	<u>351177</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>			
<p>Name of Reporting Carrier <u>Goldfield Telephone Company</u></p>			
<p>Signature of authorized officer or employee </p>			<p>Date <u>03/22/2018</u></p>
<p>Printed name of authorized officer or employee <u>Jared Johnson</u></p>			
<p>Title or position of authorized officer or employee <u>General Manager</u></p>			
<p>Telephone number of authorized officer or employee: ( <u>515</u> ) <u>825</u> - <u>3766</u> , ext. _____</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><u>351188</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>
<p align="center">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.</p>			

Certification-Agent

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

**I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.**

Name of Reporting Carrier **River Valley Telecommunications Coop**

Signature of authorized officer or employee



**5/16/18**

Date

Printed name of authorized officer or employee

**Ivan Dalen**

Title or position of authorized officer or employee

**GM**

Telephone number of authorized officer or employee: ( 712 ) 859 - 3300 , ext.


Study Area Code of Reporting Carrier

**351189**

Filing Due Date for this form (mm/dd/yyyy)

**June 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>River Valley Telecommunications Coop</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>7/10/18</b></p>	
<p>Printed name of authorized officer or employee <b>Ivan Dalen</b></p>				
<p>Title or position of authorized officer or employee <b>GM</b></p>				
<p>Telephone number of authorized officer or employee: ( 712 ) 859 - 3300 , ext.</p>				
<p>Study Area Code of Reporting Carrier <b>351189</b></p>		<p>Filing Due Date for this form (mm/dd/yyyy) <b>July 2018</b></p>		
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRAND MOUND COOP. TEL. ASSN.</u>					
Signature of authorized officer or employee <b>Terri Bumann</b>				Digitally signed by Terri Bumann DN:cn=Terri Bumann,email=tbumann@gmcta.coop,O=grand mound coop. tel. assn.,l=Grand Mound IA 52751-0316, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Terri Bumann</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>563-847-3000</u>					
Study Area Code of Reporting Carrier	<u>351191</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRISWOLD COOP. TEL. CO.</u>					
Signature of authorized officer or employee <u>Amy McLaren</u>				Digitally signed by Amy McLaren DN:cn=Amy McLaren,email=amym_gctc@netins.net,O=griswold coop. tel. co.,l=Griswold IA 51535-0640, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Amy McLaren</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>712-778-2121</u>					
Study Area Code of Reporting Carrier	<u>351195</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HAWKEYE TEL. CO.</u>					
Signature of authorized officer or employee <b>Alex Soderquist</b>				Digitally signed by Alex Soderquist DN:cn=Alex Soderquist,email=manager@hawkeyetelephone.com,O=hawkeye tel. co.,l=Hawkeye IA 52147-0250, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Alex Soderquist</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>563-427-3222</u>					
Study Area Code of Reporting Carrier	<u>351199</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HOSPERS TEL. EXCHANGE, INC.</u>					
Signature of authorized officer or employe <b>Michelle Van Heuvelen</b>				Digitally signed by Michelle Van Heuvelen DN: cn=Michelle Van Heuvelen, email=hospertel@hospertel.com, O=hospers tel. exchange, inc. l=Hospers JA 51238 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Michelle Van Heuvelen</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>712-752-8100</u>					
Study Area Code of Reporting Carrier	<u>351202</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HUBBARD COOP. TEL. ASSN.</u>					
Signature of authorized officer or employee <b>David Lowe</b>				<small>Digitally signed by David Lowe DN:cn=David Lowe,email=hubbard1@netins.net,O=hubbard coop. tel. assn.,l=Hubbard IA 50122-0428, Date:3/19/2018</small> Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>David Lowe</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>641-864-2216</u>					
Study Area Code of Reporting Carrier	<u>351203</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HUXLEY COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Gary Clark</b>				Digitally signed by Gary Clark DN:cn=Gary Clark,email=garyc@huxleycommunications.net,O=huxley communications cooperative,I=Huxley IA 50124-0036, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Gary Clark</u>					
Title or position of authorized officer or employee: <u>General Manager and Executive VP</u>					
Telephone number of authorized officer or employee: <u>515-597-2281</u>					
Study Area Code of Reporting Carrier	<u>351205</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>IAMO TEL. CO.-IA</u>					
Signature of authorized officer or employee <u>Jillinda Thornton</u>				Digitally signed by Jillinda Thornton DN:cn=Jillinda Thornton,email=jthornton@iamotelephone.com,O=iam o tel. co.-ia,I=Coin IA 51636-0368, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jillinda Thornton</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>712-583-3232</u>					
Study Area Code of Reporting Carrier	<u>351206</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FMTC-I35, INC.</u>					
Signature of authorized officer or employee <b>Debra Ward</b>				Digitally signed by Debra Ward DN:cn=Debra Ward,email=dward@omnitel.biz,O=fmtc-i35, inc.,l=Nora Springs IA 50458, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Debra Ward</u>					
Title or position of authorized officer or employee: <u>Director of Corporate Operations</u>					
Telephone number of authorized officer or employee: <u>641-749-2531</u>					
Study Area Code of Reporting Carrier	<u>351209</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KALONA COOP. TEL. CO.</u>					
Signature of authorized officer or employee <b>Casey Peck</b>				Digitally signed by Casey Peck DN:cn=Casey Peck,email=casey.peck@kctc.net,O=kalona coop. tel. co.,l=Kalona IA 52247-1208, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Casey Peck</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>319-656-3668</u>					
Study Area Code of Reporting Carrier	<u>351214</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

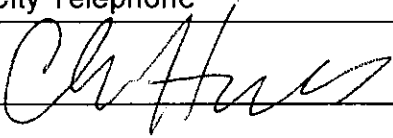
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KEYSTONE FRMS. COOP. TEL. CO.</u>					
Signature of authorized officer or employee <b>Byran Kimm</b>				Digitally signed by Byran Kimm DN:cn=Byran Kimm,email=keystone@netins.net,O=keystone frms. coop. tel. co.,i=Keystone IA 52249-0277, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Byran Kimm</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>319-442-3241</u>					
Study Area Code of Reporting Carrier	<u>351217</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LA PORTE CITY TEL. CO.</u>					
Signature of authorized officer or employee <b>Chris Hopp</b>				<small>Digitally signed by Chris Hopp DN:cn=Chris Hopp,email=chopp@alpinecom.net,O=la porte city tel. co.,l=Elkader IA 52043, Date:3/21/2018</small> Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Chris Hopp</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>563-245-4480</u>					
Study Area Code of Reporting Carrier	<u>351220</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>La Porte City Telephone</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>07/05/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Chris Hopp</b></p>				
<p>Title or position of authorized officer or employee <b>Executive Secretary</b></p>				
<p>Telephone number of authorized officer or employee: ( 563 ) 245 - 4480 , ext.</p>				
<p>Study Area Code of Reporting Carrier <b>351220</b></p>		<p>Filing Due Date for this form (mm/dd/yyyy) <b>July 2018</b></p>		
<p><b>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</b></p>				

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

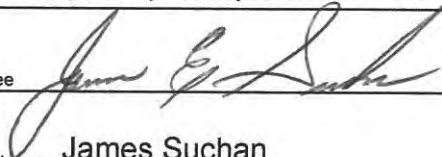
<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Lehigh Valley Coop. Tel. Assn</u>				
Signature of authorized officer or employee 				Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>James Suchan</u>				
Title or position of authorized officer or employee <u>Chief Executive Officer</u>				
Telephone number of authorized officer or employee: ( <u>515</u> ) <u>359</u> - <u>2211</u> , ext.				
Study Area Code of Reporting Carrier	<u>351225</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Lehigh Valley Coop Telephone Association**

Signature of authorized officer or employee



Date

**07/05/2018**

Printed name of authorized officer or employee

**James Suchan**

Title or position of authorized officer or employee

**CEO**

Telephone number of authorized officer or employee: ( 515 ) 359 - 2211 , ext.

Study Area Code of Reporting Carrier

**351225**

Filing Due Date for this form (mm/dd/yyyy)

**July 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LOST NATION-ELWOOD TEL. CO.</u>					
Signature of authorized officer or employee <u>Jody Holtz</u>				Digitally signed by Jody Holtz DN:cn=Jody Holtz,email=jody@lnecomm.com,O=lost nation-elwood tel. co.,l=Lost Nation IA 52254, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Jody Holtz</u>					
Title or position of authorized officer or employee: <u>Office Manager/Accountant</u>					
Telephone number of authorized officer or employee: <u>563-678-2470</u>					
Study Area Code of Reporting Carrier	<u>351229</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LYNNVILLE TELEPHONE COMPANY</u>					
Signature of authorized officer or employe <b>Christopher Ulmer</b>				Digitally signed by Christopher Ulmer DN: cn=Christopher Ulmer, email=culmer@icorellc.com, O=lynnville telephone company, l=Emmaus PA 18049	
				Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Christopher Ulmer</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>610-928-3903</u>					
Study Area Code of Reporting Carrier	<u>351232</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MARNE &amp; ELK HORN TEL. CO.</u>					
Signature of authorized officer or employee <u>Janell Hansen</u>				Digitally signed by Janell Hansen DN:cn=Janell Hansen,email=janell@metc.net,O=marne & elk horn tel. co.,l=Elk Horn IA 51531, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Janell Hansen</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>712-764-6161</u>					
Study Area Code of Reporting Carrier	<u>351237</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MILES COOP. TEL. ASSN.</u>					
Signature of authorized officer or employee <b>Debra Chrest</b>				Digitally signed by Debra Chrest DN:cn=Debra Chrest,email=milestele@netins.net,O=miles coop. tel. assn.,l=Miles IA 52064-0280, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Debra Chrest</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>563-682-7111</u>					
Study Area Code of Reporting Carrier	<u>351242</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MINBURN TEL. CO.</u>					
Signature of authorized officer or employe <b>Debra Lucht</b>				<small>Digitally signed by Debra Lucht DN:cn=Debra Lucht,email=debl@minburncomm.com,O=minburn tel. co.,l=Minburn IA 50167, Date:3/26/2018</small> Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Debra Lucht</u>					
Title or position of authorized officer or employee: <u>General Manager/Assistant Secretary</u>					
Telephone number of authorized officer or employee: <u>515-677-2264</u>					
Study Area Code of Reporting Carrier	<u>351245</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Minerva Valley Telephone Company, Inc.**

Signature of authorized officer or employee  Date **05/30/2018**

Printed name of authorized officer or employee **Levi Bappe**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( 641 ) 487 - 7399 , ext.

Study Area Code of Reporting Carrier

**351246**

Filing Due Date for this  
form (mm/dd/yyyy)

**June 2018**

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission.  
Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MEDIAPOLIS TEL. CO.</u>					
Signature of authorized officer or employe <b>Angie Rupe</b>				<div style="font-size: small;">Digitally signed by Angie Rupe DN:cn=Angie Rupe,email=arupe@mepotelco.net,O=mediapolis tel. co.,l=Mediapolis IA 52637, Date:3/27/2018</div> <div style="float: right;">Date: <u>3/27/2018</u></div>	
Printed name of authorized officer or employee: <u>Angie Rupe</u>					
Title or position of authorized officer or employee: <u>Office Manager &amp; CFO</u>					
Telephone number of authorized officer or employee: <u>319-394-3456</u>					
Study Area Code of Reporting Carrier	<u>351251</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Ryan Boone</b>				Digitally signed by Ryan Boone DN:cn=Ryan Boone,email=rboone@mypremieronline.com,O=mutua I tel. co.,l=Sioux Center IA 51250, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Ryan Boone</u>					
Title or position of authorized officer or employee: <u>COO</u>					
Telephone number of authorized officer or employee: <u>712-722-3451</u>					
Study Area Code of Reporting Carrier	<u>351252</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHERN IOWA TEL. CO.</u>					
Signature of authorized officer or employee <b>Ryan Boone</b>				Digitally signed by Ryan Boone DN:cn=Ryan Boone,email=rboone@mypremieronline.com,O=northern iowa tel. co.,l=Sioux Center IA 51250, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Ryan Boone</u>					
Title or position of authorized officer or employee: <u>COO</u>					
Telephone number of authorized officer or employee: <u>712-722-3451</u>					
Study Area Code of Reporting Carrier	<u>351259</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COMMUNICATIONS 1 NETWORK, INC.</u>					
Signature of authorized officer or employee <b>Randy Yeakel</b>				Digitally signed by Randy Yeakel DN:cn=Randy Yeakel,email=ryeakel@comm1net.net,O=communications 1 network, inc.,l=Kanawha IA 50447, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Randy Yeakel</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>641-762-3772</u>					
Study Area Code of Reporting Carrier	<u>351262</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OGDEN TEL. CO.-IA</u>					
Signature of authorized officer or employee <b>James Heckman</b>				<small>Digitally signed by James Heckman DN:cn=James Heckman,email=ogdenteljim@netins.net,O=ogden tel. co.-ia,I=Ogden IA 50212, Date:3/21/2018</small> Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>James Heckman</u>					
Title or position of authorized officer or employee: <u>General Manager / Executive VP</u>					
Telephone number of authorized officer or employee: <u>515-275-2050</u>					
Study Area Code of Reporting Carrier	<u>351263</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PALO COOPERATIVE TELEPHONE ASSOCIATION</u>					
Signature of authorized officer or employee <b>Mark Harvey</b>				Digitally signed by Mark Harvey DN:cn=Mark Harvey,email=ctcmanager@netins.net,O=palo cooperative telephone association,l=Dysart IA 52224-0280, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Mark Harvey</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>319-476-7800</u>					
Study Area Code of Reporting Carrier	<u>351269</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>					
<p>Name of Reporting Carrier <b>Palmer Mutual Telephone Company</b></p>					
<p>Signature of authorized officer or employee <i>Steve Trimble</i></p>				<p>Date <b>05/16/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Steve Trimble</b></p>					
<p>Title or position of authorized officer or employee <b>General Manager/Compliance Officer</b></p>					
<p>Telephone number of authorized officer or employee: ( 712 ) 359 - 2411 , ext.</p>					
<p>Study Area Code of Reporting Carrier</p>		<p><b>351270</b></p>		<p>Filing Due Date for this form (mm/dd/yyyy) <b>June 2018</b></p>	
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PANORA COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Andrew Randol</b>				Digitally signed by Andrew Randol DN:cn=Andrew Randol,email=andrewrandol@panoratelco.com,O=panora communications cooperative,l=Panora IA 50216, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Andrew Randol</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>641-755-2424</u>					
Study Area Code of Reporting Carrier	<u>351271</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Prairieburg Telephone Company, Inc</b></p>				
<p>Signature of authorized officer or employee <i>LaRae Reichenauer</i></p>			<p>Date <b>05/17/2018</b></p>	
<p>Printed name of authorized officer or employee <b>LaRae Reichenauer</b></p>				
<p>Title or position of authorized officer or employee <b>Secretary/Treasurer</b></p>				
<p>Telephone number of authorized officer or employee: ( 319 ) 437 - 3611 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>351275</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><b>June 2018</b></p>	<p></p>
<p><b>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</b></p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PRESTON TEL. CO.</u>					
Signature of authorized officer or employe <b>Roger Kilburg</b>				Digitally signed by Roger Kilburg DN:cn=Roger Kilburg,email=rogerak@prestonel.com,O=preston tel. co.,l=Preston IA 52069-0167, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Roger Kilburg</u>					
Title or position of authorized officer or employee: <u>Manager/Secretary-Treasurer</u>					
Telephone number of authorized officer or employee: <u>563-689-3811</u>					
Study Area Code of Reporting Carrier	<u>351276</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RADCLIFFE TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Edwin Drake</b>				Digitally signed by Edwin Drake DN:cn=Edwin Drake,email=edrake@radcliffetelephone.com,O=radcliffe tel. co., inc.,l=Radcliffe IA 50230-0140, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Edwin Drake</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>515-899-2341</u>					
Study Area Code of Reporting Carrier	<u>351277</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>READLYN TEL. CO.</u>					
Signature of authorized officer or employee <b>Sharon Huck</b>				Digitally signed by Sharon Huck DN:cn=Sharon Huck,email=readlyn@netins.net,O=readlyn tel. co.,I=Readlyn IA 50668-0159, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Sharon Huck</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>319-279-3375</u>					
Study Area Code of Reporting Carrier	<u>351278</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **READLYN TELEPHONE COMPANY**

Signature of authorized officer or employee *Sharon K Huck* Date **09/07/2018**

Printed name of authorized officer or employee **Sharon K Huck**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( 319 ) 279 - 3375 , ext.

Study Area Code of Reporting Carrier	<b>351278</b>	Filing Due Date for this form (mm/dd/yyyy)	Sept. 2018
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Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RINGSTED TEL. CO.</u>					
Signature of authorized officer or employee <b>Aaron McCartan</b>				Digitally signed by Aaron McCartan DN:cn=Aaron McCartan,email=aaron@ringstelco.com,O=ringsted tel. co.,l=Ringsted IA 50578, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Aaron McCartan</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>712-866-8000</u>					
Study Area Code of Reporting Carrier	<u>351280</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ROYAL TEL. CO.</u>					
Signature of authorized officer or employee <u>John Noah</u>				Digitally signed by John Noah DN:cn=John Noah,email=jnoah@royaltelco.com,O=royal tel. co.,l=Royal IA 51357, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>John Noah</u>					
Title or position of authorized officer or employee: <u>General Manager/CCO</u>					
Telephone number of authorized officer or employee: <u>712-933-1350</u>					
Study Area Code of Reporting Carrier	<u>351283</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

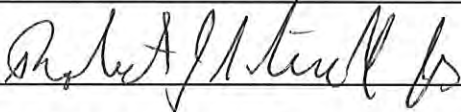
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>River Valley Telecommunications Coop</u>			
Signature of authorized officer or employee 			Date <u>03/21/18</u>
Printed name of authorized officer or employee <u>Ivan Dalen</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>712</u> ) <u>859</u> - <u>3300</u> , ext.			
Study Area Code of Reporting Carrier	<u>351284</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SEARSBORO TEL. CO.</u>					
Signature of authorized officer or employe <b>Christopher Ulmer</b>				Digitally signed by Christopher Ulmer DN: cn=Christopher Ulmer, email=culmer@icorellc.com, O=searsboro tel. co., I=Emmaus PA 18049, Date: 3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Christopher Ulmer</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>610-928-3903</u>					
Study Area Code of Reporting Carrier	<u>351292</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Sharon Telephone Company</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>05/30/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Robert J Schneider Jr</b></p>				
<p>Title or position of authorized officer or employee <b>COO</b></p>				
<p>Telephone number of authorized officer or employee: ( 319 ) 679 - 2211 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>351293</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><b>June 2018</b></p>	
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HEART OF IOWA COMMUNICATIONS COOP.</u>					
Signature of authorized officer or employe <b>Bryan Amundson</b>				Digitally signed by Bryan Amundson DN:cn=Bryan Amundson,email=bamundson@heartofiowa.coop,O=heart of iowa communications coop.,l=Union IA 50258-0130, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Bryan Amundson</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>641-486-2211</u>					
Study Area Code of Reporting Carrier	<u>351297</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH SLOPE COOP. TEL. CO.</u>					
Signature of authorized officer or employee <b>Chuck Deisbeck</b>				Digitally signed by Chuck Deisbeck DN:cn=Chuck Deisbeck,email=chuck.deisbeck@southslope.com,O=south slope coop. tel. co.,l=North Liberty IA 52317, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Chuck Deisbeck</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>319-626-2211</u>					
Study Area Code of Reporting Carrier	<u>351298</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FMTC-I35, INC. (SWT)</u>					
Signature of authorized officer or employee <b>Debra Ward</b>				Digitally signed by Debra Ward DN:cn=Debra Ward,email=dward@omnitel.biz,O=fmtc-i35, inc. (swt),l=Nora Springs IA 50458, Date:3/22/2018 Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Debra Ward</u>					
Title or position of authorized officer or employee: <u>Director of Corporate Operations</u>					
Telephone number of authorized officer or employee: <u>641-749-2531</u>					
Study Area Code of Reporting Carrier	<u>351301</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SPRINGVILLE COOP. TEL. ASSN.</u>					
Signature of authorized officer or employee <u>Jean Schilling</u>				Digitally signed by Jean Schilling DN:cn=Jean Schilling,email=springvl@netins.net,O=springville coop. tel. assn.,l=Springville IA 52336-0009, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Jean Schilling</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>319-854-6107</u>					
Study Area Code of Reporting Carrier	<u>351302</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COOPERATIVE TEL. EXCHANGE</u>					
Signature of authorized officer or employee <u>Roger Anderson</u>				Digitally signed by Roger Anderson DN:cn=Roger Anderson,email=cooptelx@netins.net,O=cooperative tel. exchange,l=Stanhope IA 50246-0095, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Roger Anderson</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>515-826-3206</u>					
Study Area Code of Reporting Carrier	<u>351303</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH SLOPE COOP TEL CO-SWISHER</u>					
Signature of authorized officer or employee <b>Chuck Deisbeck</b>				Digitally signed by Chuck Deisbeck DN:cn=Chuck Deisbeck,email=chuck.deisbeck@southslope.com,O=south slope coop tel co-swisher, North Liberty IA 52317 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Chuck Deisbeck</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>319-626-2211</u>					
Study Area Code of Reporting Carrier	<u>351304</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STRATFORD MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Jen Frank</b>				Digitally signed by Jen Frank DN:cn=Jen Frank,email=jfrank@stratfordtelephone.com,O=stratford mutual tel. co.,l=Stratford IA 50249, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Jen Frank</u>					
Title or position of authorized officer or employee: <u>Assistant Secretary/Office Manager</u>					
Telephone number of authorized officer or employee: <u>515-838-2390</u>					
Study Area Code of Reporting Carrier	<u>351305</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SULLY TEL. ASSOC.</u>					
Signature of authorized officer or employee <b>Earl "Jack" De Angelo</b>				Digitally signed by Earl "Jack" De Angelo DN:cn=Earl "Jack" De Angelo,email=jackd@sullytel.com,O=sully tel. assoc.,l=Sully IA 50251, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Earl "Jack" De Angelo</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>641-594-2905</u>					
Study Area Code of Reporting Carrier	<u>351306</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>					
Name of Reporting Carrier <b>United Farmers Telephone Co.</b>					
Signature of authorized officer or employee <i>Roxanne White</i>					Date <b>03/22/2018</b>
Printed name of authorized officer or employee <b>Roxanne White</b>					
Title or position of authorized officer or employee <b>Executive Vice President</b>					
Telephone number of authorized officer or employee: ( 712 ) 834 - 2211 , ext. 0220					
Study Area Code of Reporting Carrier	<b>351316</b>		Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VAN HORNE COOP. TEL. CO.</u>					
Signature of authorized officer or employee <b>Kerry Less</b>				<small>Digitally signed by Kerry Less DN:cn=Kerry Less,email=canary@netins.net,O=van home coop. tel. co.,l=Van Horne IA 52346-0096, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Kerry Less</u>					
Title or position of authorized officer or employee: <u>CFO - Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>319-228-8791</u>					
Study Area Code of Reporting Carrier	<u>351320</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VENTURA TEL. CO., INC.</u>					
Signature of authorized officer or employee <b>Sarah McChesney</b>				Digitally signed by Sarah McChesney DN:cn=Sarah McChesney,email=SarahMcChesney@ctel.com,O=v entura tel. co., inc.,l=Clear Lake IA 50428, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Sarah McChesney</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>641-357-2111</u>					
Study Area Code of Reporting Carrier	<u>351322</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent: <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier: <u>Farmers Mutual Telephone Company of Stanton, Iowa</u>			
Signature of authorized officer or employee: 			Date: <u>03/26/2018</u>
Printed name of authorized officer or employee: <u>Kevin T. Cabbage</u>			
Title or position of authorized officer or employee: <u>General Manager/CEO</u>			
Telephone number of authorized officer or employee: ( <u>712</u> ) <u>829</u> - <u>2111</u> , ext.			
Study Area Code of Reporting Carrier: <u>351324</u>	Filing Due Date for this form (mm/dd/yyyy): <u>3/31/2018</u>		
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WALNUT TEL. CO.</u>					
Signature of authorized officer or employee <u>Janell Hansen</u>				<small>Digitally signed by Janell Hansen DN:cn=Janell Hansen,email=janell@metc.net,O=walnut tel. co.,l=Walnut IA 51577, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Janell Hansen</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>712-784-2211</u>					
Study Area Code of Reporting Carrier	<u>351326</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEBB-DICKENS TEL. CORP.</u>					
Signature of authorized officer or employee <b>Ryan Boone</b>				Digitally signed by Ryan Boone DN:cn=Ryan Boone,email=rboone@mypremieronline.com,O=webb-dickens tel. corp.,l=Sioux Center IA 51250, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Ryan Boone</u>					
Title or position of authorized officer or employee: <u>COO</u>					
Telephone number of authorized officer or employee: <u>712-722-3451</u>					
Study Area Code of Reporting Carrier	<u>351327</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEBSTER-CALHOUN COOP. TEL. ASSN.</u>					
Signature of authorized officer or employe <b>Daryl Carlson</b>				Digitally signed by Daryl Carlson DN:cn=Daryl Carlson,email=darylc@wccta.com,O=webster-calhoun coop. tel. assn.,l=Gowrie IA 50543-0475, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Daryl Carlson</u>					
Title or position of authorized officer or employee: <u>Executive Vice President/General Manager</u>					
Telephone number of authorized officer or employee: <u>515-352-3151</u>					
Study Area Code of Reporting Carrier	<u>351328</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WELLMAN COOP. TEL. ASSN.</u>					
Signature of authorized officer or employe <b>Jayne Hochstedler</b>				Digitally signed by Jayne Hochstedler DN:cn=Jayne Hochstedler,email=wellman@netins.net,O=wellman coop. tel. assn.,l=Wellman IA 52356-0170, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Jayne Hochstedler</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>319-646-6075</u>					
Study Area Code of Reporting Carrier	<u>351329</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST IOWA TEL. CO.</u>					
Signature of authorized officer or employee <b>Robert Gannon</b>				Digitally signed by Robert Gannon DN:cn=Robert Gannon,email=bgannon@westelsystems.com,O=west iowa tel. co.,l=Remsen IA 51050-0330, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Robert Gannon</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>712-786-5572</u>					
Study Area Code of Reporting Carrier	<u>351331</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST LIBERTY TEL. CO.</u>					
Signature of authorized officer or employee <b>Lane Bailey</b>				Digitally signed by Lane Bailey DN:cn=Lane Bailey,email=bailey@corp.lcom.net,O=west liberty tel. co.,l=West Liberty IA 52776, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Lane Bailey</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>319-627-2145</u>					
Study Area Code of Reporting Carrier	<u>351332</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WILTON TEL. CO.</u>					
Signature of authorized officer or employee <b>Stacie Harris</b>				Digitally signed by Stacie Harris DN:cn=Stacie Harris,email=stacie@wtccommunications.com,O=wilt on tel. co.,l=Wilton IA 52778-0970, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Stacie Harris</u>					
Title or position of authorized officer or employee: <u>General Manager/CFO</u>					
Telephone number of authorized officer or employee: <u>563-732-3000</u>					
Study Area Code of Reporting Carrier	<u>351336</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Winnebago Cooperative Telecom Association</u>			
Signature of authorized officer or employee 			Date <u>3/25/18</u>
Printed name of authorized officer or employee <u>Mark Thoma</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>641</u> ) <u>592</u> - <u>6105</u> , ext.			
Study Area Code of Reporting Carrier	<u>351337</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center"><small>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.</small></p>			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ACE TEL. ASSN.-IA</u>					
Signature of authorized officer or employee <b>Cynthia Sweet</b>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. assn.-ia,l=Houston MN 55943-0360, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Cynthia Sweet</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>507-896-6211</u>					
Study Area Code of Reporting Carrier	<u>351346</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALLIANCE COMM. COOPERATIVE, INC.-HILLS IA</u>					
Signature of authorized officer or employee <b>Linda Bieber</b>				Digitally signed by Linda Bieber DN:cn=Linda Bieber,email=linda@alliancecom.net,O=alliance comm. cooperative, inc.-hills ia,=Garretson SD 57030 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Linda Bieber</u>					
Title or position of authorized officer or employee: <u>Accounting Assistant</u>					
Telephone number of authorized officer or employee: <u>605-594-3411</u>					
Study Area Code of Reporting Carrier	<u>351405</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KILLDUFF TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Christopher Ulmer</b>				Digitally signed by Christopher Ulmer DN: cn=Christopher Ulmer, email=culmer@icorellc.com, O=killduff telephone company, l=Emmaus PA 18049	
				Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Christopher Ulmer</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>610-928-3903</u>					
Study Area Code of Reporting Carrier	<u>351407</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>				
Name of Reporting Carrier <b>Grand River Mutual Telephone Corporation</b>				
Signature of authorized officer or employee <i>Mark Yungeberg</i>				Date <b>3-26-18</b>
Printed name of authorized officer or employee <b>Mark Yungeberg</b>				
Title or position of authorized officer or employee <b>Vice President</b>				
Telephone number of authorized officer or employee: ( 660 ) 748 - 3231 , ext.				
Study Area Code of Reporting Carrier	<b>351888</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

Certification-Agent

TRANSMITTAL NO. 1549

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>			
<p>Name of Reporting Carrier <u>Winnebago Cooperative Telecom Association</u></p>			
<p>Signature of authorized officer or employee <u>Mark Thoma</u></p>			<p>Date <u>3/25/18</u></p>
<p>Printed name of authorized officer or employee <u>Mark Thoma</u></p>			
<p>Title or position of authorized officer or employee <u>General Manager</u></p>			
<p>Telephone number of authorized officer or employee: ( <u>641</u> ) <u>592</u> . <u>6105</u> . ext</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><u>361337</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>
<p align="center">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.</p>			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ACE TEL. ASSN.-MN</u>					
Signature of authorized officer or employee <b>Cynthia Sweet</b>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel. assn.-mn,l=Houston MN 55943-0360, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Cynthia Sweet</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>507-896-6211</u>					
Study Area Code of Reporting Carrier	<u>361346</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

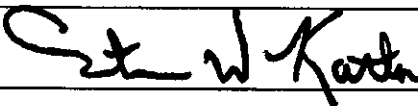
FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Albany Mutual Telephone Association</u>			
Signature of authorized officer or employee 			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Steven Katka</u>			
Title or position of authorized officer or employee <u>CEO/General Manager</u>			
Telephone number of authorized officer or employee: ( <u>320</u> ) <u>845</u> - <u>2101</u> , ext.			
Study Area Code of Reporting Carrier	<u>361347</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

TRANSMITTAL NO. 1549

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Albany Mutual Telephone Association</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>07/09/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Steven W. Katka</b></p>				
<p>Title or position of authorized officer or employee <b>CEO/General Manager</b></p>				
<p>Telephone number of authorized officer or employee: ( 320 ) 845 - 2101 , ext.</p>				
<p>Study Area Code of Reporting Carrier <b>361347</b></p>		<p>Filing Due Date for this form (mm/dd/yyyy) <b>July 2018</b></p>		
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CITY OF BARNESVILLE TEL. CO.</u>					
Signature of authorized officer or employee <b>Guy Swenson</b>				Digitally signed by Guy Swenson DN:cn=Guy Swenson,email=gswenson@bvillemn.net,O=city of barnesville tel. co.,l=Barnesville MN 56514, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Guy Swenson</u>					
Title or position of authorized officer or employee: <u>TEC Manager</u>					
Telephone number of authorized officer or employee: <u>218-354-2292</u>					
Study Area Code of Reporting Carrier	<u>361353</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BENTON COOP. TEL. CO.</u>					
Signature of authorized officer or employee <b><u>Cheryl Scapanski</u></b>				Digitally signed by Cheryl Scapanski DN:cn=Cheryl Scapanski,email=cscapanski@bctelco.net,O=benton coop. tel. co.,l=Rice MN 56367-9701, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Cheryl Scapanski</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>320-393-2115</u>					
Study Area Code of Reporting Carrier	<u>361356</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986


**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>CONSOLIDATED TELEPHONE COMPANY</u>			
Signature of authorized officer or employee 			Date <u>03/21/2018</u>
Printed name of authorized officer or employee <u>MARK N ROACH</u>			
Title or position of authorized officer or employee <u>CFO</u>			
Telephone number of authorized officer or employee: ( <u>218</u> ) <u>454</u> - <u>1104</u> , ext.			
Study Area Code of Reporting Carrier	<u>361373</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986


TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:


<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>Emily Coop Tel Co</u></p>				
<p>Signature of authorized officer or employee </p>				<p>Date <u>03/23/2018</u></p>
<p>Printed name of authorized officer or employee <u>Josh Netland</u></p>				
<p>Title or position of authorized officer or employee <u>General Manager</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>218</u> ) <u>763</u> - <u>3000</u> ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><u>361387</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>	
<p>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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972


**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Farmers Mutual Telephone Company</u>				
Signature of authorized officer or employee 				Date <u>3-22-18</u>
Printed name of authorized officer or employee <u>Kevin Beyer</u>				
Title or position of authorized officer or employee <u>CEO</u>				
Telephone number of authorized officer or employee: ( <u>320</u> ) <u>324</u> - <u>7111</u> , ext.				
Study Area Code of Reporting Carrier	<u>361389</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.				

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Federated Telephone Cooperative</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>5/12/18</b></p>	
<p>Printed name of authorized officer or employee <b>Kevin Beyer</b></p>				
<p>Title or position of authorized officer or employee <b>General Manager</b></p>				
<p>Telephone number of authorized officer or employee: ( 320 ) 324 - 7111 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>361390</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>June 2018</p>	
<p><b>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</b></p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Garden Valley Telephone Company</u>				
Signature of authorized officer or employee 				Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Tim Brinkman</u>				
Title or position of authorized officer or employee <u>CEO/GM</u>				
Telephone number of authorized officer or employee: ( <u>218</u> ) <u>687</u> - <u>240</u> , ext. <u>200</u>				
Study Area Code of Reporting Carrier	<u>361395</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>				

**FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Gardonyville Cooperative Telephone Association</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>David Wolf</u>			
Title or position of authorized officer or employee <u>CEO/General Manager</u>			
Telephone number of authorized officer or employee: ( <u>320</u> ) <u>524</u> - <u>2211</u> , ext.			
Study Area Code of Reporting Carrier	<u>361396</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Halstad Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Mark Forseth</u>			
Title or position of authorized officer or employee <u>CEO</u>			
Telephone number of authorized officer or employee: ( <u>218</u> ) <u>456</u> - <u>2125</u> , ext.			
Study Area Code of Reporting Carrier	<u>361401</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or Imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Federated Telephone Cooperative**

Signature of authorized officer or employee



Date

**5/17/18**

Printed name of authorized officer or employee

**Kevin Beyer**

Title or position of authorized officer or employee

**General Manager**

Telephone number of authorized officer or employee: ( 320 ) 324 - 7111 , ext.

Study Area Code of Reporting Carrier

**361403**

Filing Due Date for this form (mm/dd/yyyy)

**June 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HARMONY TEL. CO.</u>					
Signature of authorized officer or employee <u>Jill Fishbaugher</u>				Digitally signed by Jill Fishbaugher DN:cn=Jill Fishbaugher,email=jill@harmonytel.com,O=harmony tel. co.,l=Harmony MN 55939-0308, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Jill Fishbaugher</u>					
Title or position of authorized officer or employee: <u>VP of Operations</u>					
Telephone number of authorized officer or employee: <u>507-886-2525</u>					
Study Area Code of Reporting Carrier	<u>361404</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALLIANCE COMM. COOPERATIVE, INC.-HILLS MN</u>					
Signature of authorized officer or employee <b>Linda Biever</b>				Digitally signed by Linda Biever DN:cn=Linda Biever,email=linda@alliancecom.net,O=alliance comm. cooperative, inc.-hills mn,j=Garretson SD 57030 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Linda Biever</u>					
Title or position of authorized officer or employee: <u>Accounting Assistant</u>					
Telephone number of authorized officer or employee: <u>605-594-3411</u>					
Study Area Code of Reporting Carrier	<u>361405</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>JOHNSON TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>Donna Gunderson</u>				Digitally signed by Donna Gunderson DN:cn=Donna Gunderson,email=jtcbusiness@jtc-co.net,O=johnson telephone company,l=Remer MN 56672, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Donna Gunderson</u>					
Title or position of authorized officer or employee: <u>Corporate Secretary</u>					
Telephone number of authorized officer or employee: <u>218-566-2302</u>					
Study Area Code of Reporting Carrier	<u>361410</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KASSON &amp; MANTORVILLE TEL. CO.</u>					
Signature of authorized officer or employee <b>Beth Tollefson</b>				Digitally signed by Beth Tollefson DN:cn=Beth Tollefson,email=btollefson@kmtel.com,O=kasson & mantorville tel. co.,l=Kasson MN 55944-1491, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Beth Tollefson</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>507-634-2511</u>					
Study Area Code of Reporting Carrier	<u>361412</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LISMORE COOPERATIVE TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Bill Loonan</b>				Digitally signed by Bill Loonan DN:cn=Bill Loonan,email=bloonan@lismoretel.com,O=lismore cooperative telephone co.,l=Lismore MN 56155-0127, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Bill Loonan</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>507-472-8748</u>					
Study Area Code of Reporting Carrier	<u>361419</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>			
<p>Name of Reporting Carrier <u>Lonsdale Telephone Company</u></p>			
<p>Signature of authorized officer or employee <u>Bonnie Simon</u></p>			<p>Date <u>03/23/2018</u></p>
<p>Printed name of authorized officer or employee <u>Bonnie Simon</u></p>			
<p>Title or position of authorized officer or employee <u>Secretary</u></p>			
<p>Telephone number of authorized officer or employee: ( <u>507</u> ) <u>744</u> - <u>2311</u> , ext.</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><u>361422</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>
<p align="center">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.</p>			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Runestone Telephone Association</u>			
Signature of authorized officer or employee <u>John m Kapphahn</u>			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>John Kapphahn</u>			
Title or position of authorized officer or employee <u>Secretary/Treasurer</u>			
Telephone number of authorized officer or employee: ( <u>320</u> ) <u>986</u> - <u>2013</u> , ext.			
Study Area Code of Reporting Carrier	<u>361423</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MANCHESTER-HARTLAND TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Cory Hoerler</b>				Digitally signed by Cory Hoerler DN:cn=Cory Hoerler,email=choerler@mhtele.com,O=manchester-hartland telephone co.,l=Manchester MN 56007, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Cory Hoerler</u>					
Title or position of authorized officer or employee: <u>Operations Manager</u>					
Telephone number of authorized officer or employee: <u>507-826-3212</u>					
Study Area Code of Reporting Carrier	<u>361426</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Paul Bunyan Rural Tel Coop</u>			
Signature of authorized officer or employee <u><i>Dave Schultz</i></u>			Date <u>03/23/2018</u>
Printed name of authorized officer or employee <u>Dave Schultz</u>			
Title or position of authorized officer or employee <u>Chief Financial Officer</u>			
Telephone number of authorized officer or employee: ( <u>218</u> ) <u>444</u> - <u>1141</u> , ext.			
Study Area Code of Reporting Carrier <u>361451</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
<p align="center"><b>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.</b></p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier Runestone Telephone Association,

Signature of authorized officer or employee

*John M. Kapphahn*

Date

03/23/2018

Printed name of authorized officer or employee

John Kapphahn

Title or position of authorized officer or employee

Secretary/Treasurer

Telephone number of authorized officer or employee: ( 320 ) 986 - 2013 , ext.

Study Area Code of Reporting Carrier

361475

Filing Due Date for this form  
(mm/dd/yyyy)

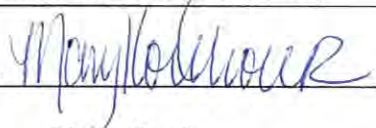
3/31/2018

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.

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0972

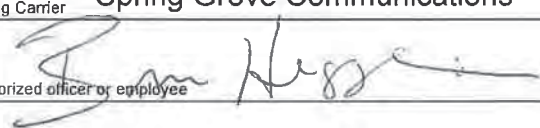
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

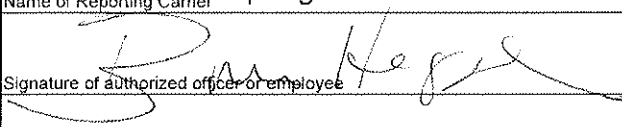
<p><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Scott Rice Telephone Company</u>				
Signature of authorized officer or employee 			Date <u>3/23/18</u>	
Printed name of authorized officer or employee <u>Mary Korthour</u>				
Title or position of authorized officer or employee <u>VP General Manager</u>				
Telephone number of authorized officer or employee: ( <u>952</u> ) <u>226</u> - <u>9766</u> , ext.				
Study Area Code of Reporting Carrier		<u>361479</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Spring Grove Communications</u>				
Signature of authorized officer or employee 				Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>Bruce Hegge</u>				
Title or position of authorized officer or employee <u>Acting GM</u>				
Telephone number of authorized officer or employee: ( <u>507</u> ) <u>498</u> - <u>3456</u> , ext.				
Study Area Code of Reporting Carrier	<u>361485</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.				

<p align="center"><b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b></p> <p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>				
<p>Name of Reporting Carrier <b>Spring Grove Communications</b></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <b>07/05/2018</b></p>	
<p>Printed name of authorized officer or employee <b>Bruce Hegge</b></p>				
<p>Title or position of authorized officer or employee <b>General Manager</b></p>				
<p>Telephone number of authorized officer or employee: ( 507 ) 498 - 3456 , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><b>361485</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><b>July 2018</b></p>	
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UPSALA COOPERATIVE TELEPHONE ASSN.</u>					
Signature of authorized officer or employee <b>Melissa Tschida</b>				Digitally signed by Melissa Tschida DN:cn=Melissa Tschida,email=mtschida@sytekcom.com,O=upsala cooperative telephone assn.,l=Upsala MN 56384, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Melissa Tschida</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>320-573-1390</u>					
Study Area Code of Reporting Carrier	<u>361494</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRI-CO TECHNOLOGIES, LLC DBA CROSSLAKE COMM.</u>					
Signature of authorized officer or employee <b>Josh Netland</b>				Digitally signed by Josh Netland DN:cn=Josh Netland,email=jnetland@emily.net,O=tri-co technologies, llc dba crosslake comm.,l=Emily MN 56447 Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Josh Netland</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>218-763-3000</u>					
Study Area Code of Reporting Carrier	<u>361499</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>				
Name of Reporting Carrier <b>West Central Telephone Assn.</b>				
Signature of authorized officer or employee 				Date <b>03/23/2018</b>
Printed name of authorized officer or employee <b>Chad Bullock</b>				
Title or position of authorized officer or employee <b>CEO-GM</b>				
Telephone number of authorized officer or employee: ( <b>218</b> ) <b>837</b> - <b>5151</b> , ext.				
Study Area Code of Reporting Carrier	<b>361501</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>	
<p align="center"><b>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.</b></p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WOODSTOCK TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Terry Nelson</b>				Digitally signed by Terry Nelson DN:cn=Terry Nelson,email=terry.nelson@woodstocktel.net,O=woodstock telephone company,l=Ruthon MN 56170, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Terry Nelson</u>					
Title or position of authorized officer or employee: <u>Operations Manager</u>					
Telephone number of authorized officer or employee: <u>507-658-3830</u>					
Study Area Code of Reporting Carrier	<u>361510</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Wolverton Telephone Co</u>				
Signature of authorized officer or employee 				Date <u>03/21/2018</u>
Printed name of authorized officer or employee <u>Karl Blake</u>				
Title or position of authorized officer or employee <u>Executive Vice President</u>				
Telephone number of authorized officer or employee: ( <u>701</u> ) <u>284</u> - <u>7221</u> , ext.				
Study Area Code of Reporting Carrier	<u>361512</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ARAPAHOE TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>John Koller</u>				Digitally signed by John Koller DN:cn=John Koller,email=jkoller@atcjet.net,O=arapahoe telephone company,l=Arapahoe NE 68922, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>John Koller</u>					
Title or position of authorized officer or employee: <u>VP Operations</u>					
Telephone number of authorized officer or employee: <u>308-962-7298</u>					
Study Area Code of Reporting Carrier	<u>371516</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THREE RIVER TELCO</u>					
Signature of authorized officer or employee <b>Neil Classen</b>				Digitally signed by Neil Classen DN:cn=Neil Classen,email=neil@threeriver.net,O=three river telco,l=Lynch NE 68746-0066, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Neil Classen</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>402-569-2666</u>					
Study Area Code of Reporting Carrier	<u>371525</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Cambridge Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>J. Thomas Shoemaker</u>			
Title or position of authorized officer or employee <u>Executive Vice President</u>			
Telephone number of authorized officer or employee: ( <u>308</u> ) <u>697</u> - <u>3333</u> , ext.			
Study Area Code of Reporting Carrier	<u>371526</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CLARKS TELECOMMUNICATIONS CO.</u>					
Signature of authorized officer or employee <b>Patrick McElroy</b>				Digitally signed by Patrick McElroy DN:cn=Patrick McElroy,email=pmcelroy@nntc.net,O=clarks telecommunications co.,l=Jackson NE 68743, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Patrick McElroy</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>402-632-4321</u>					
Study Area Code of Reporting Carrier	<u>371531</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COZAD TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Marcus Young</b>				Digitally signed by Marcus Young DN:cn=Marcus Young,email=myoung.ctc@cozadtel.net,O=cozad telephone company,l=Cozad NE 69130, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Marcus Young</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>308-784-4044</u>					
Study Area Code of Reporting Carrier	<u>371534</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DILLER TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>Loren Duerksen</u>				Digitally signed by Loren Duerksen DN:cn=Loren Duerksen,email=lorend@diodecom.net,O=diller telephone company,l=Diller NE 68343, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Loren Duerksen</u>					
Title or position of authorized officer or employee: <u>General Manager/Director of Operations</u>					
Telephone number of authorized officer or employee: <u>402-793-5330</u>					
Study Area Code of Reporting Carrier	<u>371540</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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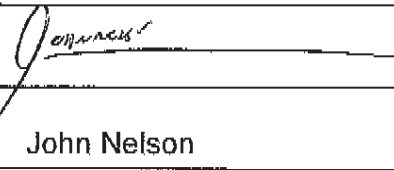
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GLENWOOD TELEPHONE MEMBERSHIP CORP.</u>					
Signature of authorized officer or employee <b>Stanley Rouse</b>				<small>Digitally signed by Stanley Rouse DN:cn=Stanley Rouse,email=manager@glenwoodtelco.net,O=glenwood telephone membership corp.,l=Blue Hill NE 68930, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>Stanley Rouse</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>402-756-3131</u>					
Study Area Code of Reporting Carrier	<u>371553</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories, 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Hamilton Telephone Company</u>				
Signature of authorized officer or employee 				Date <u>03/21/2018</u>
Printed name of authorized officer or employee <u>John Nelson</u>				
Title or position of authorized officer or employee <u>First Vice President</u>				
Telephone number of authorized officer or employee: ( <u>402</u> ) <u>694</u> - <u>5101</u> , ext.				
Study Area Code of Reporting Carrier	<u>371555</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<p align="center">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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HARTINGTON TELECOMMUNICATIONS CO., INC.</u>					
Signature of authorized officer or employee <b>Mike Becker</b>				Digitally signed by Mike Becker DN:cn=Mike Becker,email=mbecker@hartel.net,O=hartington telecommunications co., inc.,l=Hartington NE 68739-0157 Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Mike Becker</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>402-254-3901</u>					
Study Area Code of Reporting Carrier	<u>371556</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HARTMAN TELEPHONE EXCHANGES INC.</u>					
Signature of authorized officer or employee <b>Linda McKain</b>				Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=hartman telephone exchanges inc.,I=Benkelman NE 69021, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Linda McKain</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>308-423-5607</u>					
Study Area Code of Reporting Carrier	<u>371557</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HEMINGFORD COOP. TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Tonya Mayer</b>				Digitally signed by Tonya Mayer DN:cn=Tonya Mayer,email=tonya@bbc.net,O=hemingford coop. telephone company,l=Hemingford NE 69348-0246, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Tonya Mayer</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>308-487-3311</u>					
Study Area Code of Reporting Carrier	<u>371558</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HENDERSON CO-OP TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Matt Friesen</b>				Digitally signed by Matt Friesen DN:cn=Matt Friesen,email=mrfriesen@mainstaycomm.net,O=henderson co-op telephone company,l=Henderson NE 68371 Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Matt Friesen</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>402-723-4448</u>					
Study Area Code of Reporting Carrier	<u>371559</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HERSHEY COOPERATIVE TELEPHONE CO</u>					
Signature of authorized officer or employee <b>Rex Woolley</b>				Digitally signed by Rex Woolley DN:cn=Rex Woolley,email=rwoolley@hersheytel.net,O=hershey cooperative telephone co,l=Hershey NE 69143, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Rex Woolley</u>					
Title or position of authorized officer or employee: <u>General Manager &amp; CEO</u>					
Telephone number of authorized officer or employee: <u>308-368-5561</u>					
Study Area Code of Reporting Carrier	<u>371561</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GLENWOOD NETWORK SERVICES, INC.</u>					
Signature of authorized officer or employee <b>Stanley Rouse</b>				<small>Digitally signed by Stanley Rouse DN:cn=Stanley Rouse,email=manager@glenwoodtelco.net,O=glenwood network services, inc.,I=Blue Hill NE 68930, Date:3/26/2018</small> Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Stanley Rouse</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>402-756-3131</u>					
Study Area Code of Reporting Carrier	<u>371567</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHEAST NEBRASKA TELEPHONE COMPANY</u>					
Signature of authorized officer or employe <u>Patrick McElroy</u>				Digitally signed by Patrick McElroy DN:cn=Patrick McElroy,email=pmcelroy@nntc.net,O=northeast nebraska telephone company,l=Jackson NE 68743, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Patrick McElroy</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>402-632-4321</u>					
Study Area Code of Reporting Carrier		<u>371576</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PLAINVIEW TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Grant Dummer</b>				Digitally signed by Grant Dummer DN:cn=Grant Dummer,email=gdummer@plvwtelco.net,O=plainview telephone company inc.,l=Plainview NE 68769-0117, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Grant Dummer</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>402-582-4242</u>					
Study Area Code of Reporting Carrier	<u>371582</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Sodtoun Telephone Company</u>				
Signature of authorized officer or employee 				Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>Michael Plautz</u>				
Title or position of authorized officer or employee <u>Secretary</u>				
Telephone number of authorized officer or employee: ( <u>308</u> ) <u>467</u> - <u>2310</u> , ext.				
Study Area Code of Reporting Carrier	<u>371590</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTHEAST NEBRASKA COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <u>Ray Joy</u>				Digitally signed by Ray Joy DN:cn=Ray Joy,email=ray@sentco.net,O=southeast nebraska communications, inc.,l=Falls City NE 68355, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Ray Joy</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>402-245-4451</u>					
Study Area Code of Reporting Carrier	<u>371591</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STANTON TELECOM INC.</u>					
Signature of authorized officer or employe <b>Robert Paden</b>				Digitally signed by Robert Paden DN:cn=Robert Paden,email=rjpaden@stanton.net,O=stanton telecom inc.,l=Stanton NE 68779, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Robert Paden</u>					
Title or position of authorized officer or employee: <u>Vice President/General Manager</u>					
Telephone number of authorized officer or employee: <u>402-439-2264</u>					
Study Area Code of Reporting Carrier	<u>371592</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WAUNETA TEL. CO.</u>					
Signature of authorized officer or employee <b>Linda McKain</b>				Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=wauneta tel. co.,l=Benkelman NE 69021, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Linda McKain</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>308-423-5607</u>					
Study Area Code of Reporting Carrier	<u>371597</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BENKELMAN TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Linda McKain</b>				Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=benkelman telephone company inc.,l=Benkelman NE 69021, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Linda McKain</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>308-423-5607</u>					
Study Area Code of Reporting Carrier	<u>372455</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTH DAKOTA TELEPHONE COMPANY</u>					
Signature of authorized officer or employe <b>Shawna Senger</b>				Digitally signed by Shawna Senger DN:cn=Shawna Senger,email=shawnas@ndtel.com,O=north dakota telephone company,l=Devils Lake ND 58301, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Shawna Senger</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>701-662-6428</u>					
Study Area Code of Reporting Carrier	<u>381447</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Wolverton Telephone Co</u>				
Signature of authorized officer or employee 				Date <u>03/21/2018</u>
Printed name of authorized officer or employee <u>Karl Blake</u>				
Title or position of authorized officer or employee <u>Executive Vice President</u>				
Telephone number of authorized officer or employee: ( <u>701</u> ) <u>284</u> - <u>7221</u> , ext.				
Study Area Code of Reporting Carrier	<u>381509</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.				

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>BEK Communications Cooperative</u></p>				
<p>Signature of authorized officer or employee </p>			<p>Date <u>03/21/2018</u></p>	
<p>Printed name of authorized officer or employee <u>Derrick F Bulawa</u></p>				
<p>Title or position of authorized officer or employee <u>CEO / General Manager</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>701</u> ) <u>475</u> - <u>1220</u> , ext.</p>				
<p>Study Area Code of Reporting Carrier <u>381604</u></p>		<p>Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u></p>		
<p align="center">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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CONSOLIDATED TELCOM</u>					
Signature of authorized officer or employee <b>Ken Weisenberger</b>				Digitally signed by Ken Weisenberger DN:cn=Ken Weisenberger,email=ken@consolidatedTelcom.com,O=consolidated telcom,I=Dickinson ND 58601, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Ken Weisenberger</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>701-483-7376</u>					
Study Area Code of Reporting Carrier	<u>381607</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DAKOTA CENTRAL TELECOMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Holly Utke</b>				<small>Digitally signed by Holly Utke DN:cn=Holly Utke,email=hollyu@daktel.net,O=dakota central telecommunications cooperative,l=Carrington ND 58421 Date:3/26/2018</small>	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Holly Utke</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>701-652-6134</u>					
Study Area Code of Reporting Carrier	<u>381610</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DICKEY RURAL TEL COOP.</u>					
Signature of authorized officer or employee <b>Troy Radermacher</b>				Digitally signed by Troy Radermacher DN:cn=Troy Radermacher,email=tradermacher@drtel.com,O=dick ey rural tel coop.,l=Ellendale ND 58436-0069, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Troy Radermacher</u>					
Title or position of authorized officer or employee: <u>Accountant Supervisor</u>					
Telephone number of authorized officer or employee: <u>701-344-6061</u>					
Study Area Code of Reporting Carrier	<u>381611</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>Polar Communications Mutual Aid Corp</u></p>				
<p>Signature of authorized officer or employee </p>				<p>Date <u>03/21/2018</u></p>
<p>Printed name of authorized officer or employee <u>Karl Blake</u></p>				
<p>Title or position of authorized officer or employee <u>GM/CEO</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>701</u> ) <u>284</u> - <u>7221</u> , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><u>381614</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>	
<p align="center">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.</p>				

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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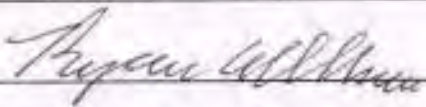
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRIGGS COUNTY TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Tyler Kilde</b>				Digitally signed by Tyler Kilde DN:cn=Tyler Kilde,email=tyler.kilde@mlgc.net,O=griggs county telephone company,l=Enderlin ND 58027-0066, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Tyler Kilde</u>					
Title or position of authorized officer or employee: <u>VP/GM</u>					
Telephone number of authorized officer or employee: <u>701-437-3417</u>					
Study Area Code of Reporting Carrier	<u>381615</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent: <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier: <u>Midstate Telephone Company</u></p>				
<p>Signature of authorized officer or employee: </p>				<p>Date: <u>03/23/2018</u></p>
<p>Printed name of authorized officer or employee: <u>Ryan Wilhelm</u></p>				
<p>Title or position of authorized officer or employee: <u>General Manger</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>701</u> ) - <u>628</u> - <u>2522</u> ext. _____</p>				
<p>Study Area Code of Reporting Carrier: <u>381617</u></p>		<p>Filing Due Date for this form (mm/dd/yyyy): <u>3/31/2018</u></p>		
<p align="center">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.</p>				

Certification Agent:

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRIGGS COUNTY TEL. CO. (MOORE&amp;LIBERTY)</u>					
Signature of authorized officer or employee <b>Tyler Kilde</b>				Digitally signed by Tyler Kilde DN:cn=Tyler Kilde,email=tyler.kilde@mlgc.net,O=griggs county tel. co. (moore&liberty),l=Enderlin ND 58027-0066, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Tyler Kilde</u>					
Title or position of authorized officer or employee: <u>VP/GM</u>					
Telephone number of authorized officer or employee: <u>701-437-3417</u>					
Study Area Code of Reporting Carrier	<u>381622</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

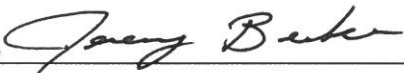
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHWEST COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Tanya Weflen</b>				Digitally signed by Tanya Weflen DN:cn=Tanya Weflen,email=tanyaw@nccray.com,O=northwest communications cooperative,l=Ray ND 58849, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Tanya Weflen</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>701-568-8116</u>					
Study Area Code of Reporting Carrier	<u>381625</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier Northwest Communications Cooperative

Signature of authorized officer or employee  Date 9/6/2018

Printed name of authorized officer or employee Jeremy Becker

Title or position of authorized officer or employee GM/CEO

Telephone number of authorized officer or employee: ( 701 ) 568 - 3331 , ext. 8111

Study Area Code of Reporting Carrier	381625		Filing Due Date for this form (mm/dd/yyyy)	Sept. 2018	
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Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>Polar Communications Mutual Aid Corp</u></p>				
<p>Signature of authorized officer or employee </p>				<p>Date <u>03/21/2018</u></p>
<p>Printed name of authorized officer or employee <u>Karl Blake</u></p>				
<p>Title or position of authorized officer or employee <u>GM/CEO</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>701</u> ) <u>284</u> - <u>7221</u> , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><u>381630</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>	
<p>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.</p>				

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

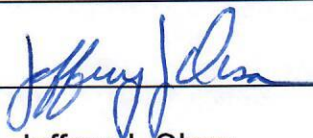
<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>Red River Rural Tel Assn DBA Red River Comm</u></p>				
<p>Signature of authorized officer or employee </p>				<p>Date <u>03/23/2018</u></p>
<p>Printed name of authorized officer or employee <u>Jeffrey J. Olson</u></p>				
<p>Title or position of authorized officer or employee <u>General Manager/ CEO</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>701</u> ) <u>553</u> - <u>8309</u> , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><u>381631</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>	
<p>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.</p>				

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Red River Communications**

Signature of authorized officer or employee



Date

**09/06/2018**

Printed name of authorized officer or employee

**Jeffrey J. Olson**

Title or position of authorized officer or employee

**General Manager/CEO**

Telephone number of authorized officer or employee: ( 701 ) 553 - 8309 , ext.

Study Area Code of Reporting Carrier

**381631**

Filing Due Date for this  
form (mm/dd/yyyy)

**Sept. 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>RESERVATION TELEPHONE COOPERATIVE</u>				
Signature of authorized officer or employee <u></u>				Date <u>3/26/18</u>
Printed name of authorized officer or employee <u>SHANE D HART</u>				
Title or position of authorized officer or employee <u>CEO/GM</u>				
Telephone number of authorized officer or employee: ( <u>701</u> ) <u>862</u> - <u>5229</u> , ext.				
Study Area Code of Reporting Carrier	<u>381632</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **RESERVATION TELEPHONE COOPERATIVE**

Signature of authorized officer or employee *Shane D Hart* Date *9-6-18*

Printed name of authorized officer or employee **SHANE D HART**

Title or position of authorized officer or employee **CEO/GM**

Telephone number of authorized officer or employee: ( 701 ) 862 - 5229 , ext.

Study Area Code of Reporting Carrier	381632	Filing Due Date for this form (mm/dd/yyyy)	Sept. 2018
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Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UNITED TELEPHONE MUTUAL AID CORP.</u>					
Signature of authorized officer or employee <b>Perry Oster</b>				Digitally signed by Perry Oster DN:cn=Perry Oster,email=poster@utma.com,O=united telephone mutual aid corp.,l=Langdon ND 58249-0729, Date:3/26/2018	Date: <u>3/26/2018</u>
Printed name of authorized officer or employee: <u>Perry Oster</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>701-256-5156</u>					
Study Area Code of Reporting Carrier	<u>381636</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

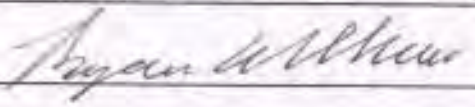
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST RIVER TELECOMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <b>Troy Schilling</b>				Digitally signed by Troy Schilling DN:cn=Troy Schilling,email=troys@wrwc.com,O=west river telecommunications cooperative,l=Hazen ND 58545, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Troy Schilling</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>701-748-2211</u>					
Study Area Code of Reporting Carrier	<u>381637</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p> <p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent: National Exchange Carrier Association, Inc.				
Name of Reporting Carrier: Midstate Communications Inc				
Signature of authorized officer or employee: 			Date: 03/23/2018	
Printed name of authorized officer or employee: Ryan Wilhelmi				
Title or position of authorized officer or employee: General Manger				
Telephone number of authorized officer or employee: 701 628 2522 ext.				
Study Area Code of Reporting Carrier: 381638		Filing Due Date for this form (mm/dd/yyyy): 3/31/2018		
<p align="center">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. 602, 502(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1501.</p>				

Certification Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEMONT TELEPHONE COOPERATIVE - ND</u>					
Signature of authorized officer or employee <b>Remi Sun</b>				Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=nemont telephone cooperative - nd,l=Scobey MT 59263-0600, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Remi Sun</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>406-783-2358</u>					
Study Area Code of Reporting Carrier	<u>382247</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SRT COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Julie Lizotte</b>				Digitally signed by Julie Lizotte DN:cn=Julie Lizotte,email=julieel@srttel.com,O=srt communications, inc.,l=Minot ND 58702-2027, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Julie Lizotte</u>					
Title or position of authorized officer or employee: <u>Director of Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>701-858-5233</u>					
Study Area Code of Reporting Carrier	<u>383303</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALLIANCE COMM. COOPERATIVE, INC.-HILLS SD</u>					
Signature of authorized officer or employee <b>Linda Biever</b>				Digitally signed by Linda Biever DN:cn=Linda Biever,email=linda@alliancecom.net,O=alliance comm. cooperative, inc.-hills sd,l=Garretson SD 57030 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Linda Biever</u>					
Title or position of authorized officer or employee: <u>Accounting Assistant</u>					
Telephone number of authorized officer or employee: <u>605-594-3411</u>					
Study Area Code of Reporting Carrier	<u>391405</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN WEST TELECOM COOP (ARMOUR)</u>					
Signature of authorized officer or employee <b>Dennis Law</b>				<small>Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (armour),l=Wall SD 57790-0411, Date:3/26/2018</small>	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Law</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-279-2161</u>					
Study Area Code of Reporting Carrier	<u>391640</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALLIANCE COMM. COOPERATIVE, INC.-BAL TIC</u>					
Signature of authorized officer or employe <b>Linda Biever</b>				Digitally signed by Linda Biever DN:cn=Linda Biever,email=linda@alliancecom.net,O=alliance comm. cooperative, inc.-baltic, =Garretson SD 57030 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Linda Biever</u>					
Title or position of authorized officer or employee: <u>Accounting Assistant</u>					
Telephone number of authorized officer or employee: <u>605-594-3411</u>					
Study Area Code of Reporting Carrier	<u>391642</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHEYENNE RIVER SIOUX TRIBAL TEL AUTH</u>					
Signature of authorized officer or employe <b>Mona Thompson</b>				Digitally signed by Mona Thompson DN:cn=Mona Thompson,email=monat@lakotanetwork.com,O=cheyenne river sioux tribal tel auth,l=Eagle Butte SD 57625 Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Mona Thompson</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>605-964-2600</u>					
Study Area Code of Reporting Carrier	<u>391647</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Cheyenne River Sioux Tribe Telephone Authority**

Signature of authorized officer or employee  Date **8/3/2018**

Printed name of authorized officer or employee **Mona L. Thompson**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( 605 ) 964 - 2600 , ext. 252

Study Area Code of Reporting Carrier	<b>391647</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>August 2018</b>
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Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

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FCC Form 508  
OMB Control No. 3060-0986

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Beresford Municipal Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/26/2018</u>
Printed name of authorized officer or employee <u>Todd Hansen</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( <u>605</u> ) <u>763</u> . <u>2500</u> , ext.			
Study Area Code of Reporting Carrier	<u>391649</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CITY OF BROOKINGS MUNICIPAL TEL. DEPT.</u>					
Signature of authorized officer or employee <u>Laura Julius</u>				Digitally signed by Laura Julius DN:cn=Laura Julius,email=ljulius@swiftel-bmu.com,O=city of brookings municipal tel. dept.,l=Brookings SD 57006, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Laura Julius</u>					
Title or position of authorized officer or employee: <u>Finance &amp; Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>605-692-6325</u>					
Study Area Code of Reporting Carrier	<u>391650</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
 OMB Control No. 3060-0986

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
 Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).

Name of Authorized Agent National Exchange Carrier Association, Inc.

Name of Reporting Carrier City of Faith Municipal Telephone Company

Signature of authorized officer or employee Debbie Brown Date 3-19-18

Printed name of authorized officer or employee Debbie Brown

Title or position of authorized officer or employee Finance Officer

Telephone number of authorized officer or employee: ( 605 ) 967 - 2261 , ext.

Study Area Code of Reporting Carrier	<u>391653</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>INTERSTATE TELECOMMUNICATIONS COOP., INC.</u>					
Signature of authorized officer or employee <b>Tracy Bandemer</b>				Digitally signed by Tracy Bandemer DN:cn=Tracy Bandemer,email=bandemer@itctel.com,O=interstate telecommunications coop., inc.,l=Clear Lake SD 57226-0920, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Tracy Bandemer</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>605-874-2181</u>					
Study Area Code of Reporting Carrier	<u>391654</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALLIANCE COMM. COOPERATIVE, INC.-SPLITROCK</u>					
Signature of authorized officer or employee <u>Linda Biever</u>				Digitally signed by Linda Biever DN:cn=Linda Biever,email=linda@alliancecom.net,O=alliance comm. cooperative, inc.-splitrock,l=Garretson SD 57030 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Linda Biever</u>					
Title or position of authorized officer or employee: <u>Accounting Assistant</u>					
Telephone number of authorized officer or employee: <u>605-594-3411</u>					
Study Area Code of Reporting Carrier	<u>391657</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN WEST TELECOM. COOP, INC.</u>					
Signature of authorized officer or employee <b>Dennis Law</b>				Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom. coop, inc.,l=Wall SD 57790-0411, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Law</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-279-2161</u>					
Study Area Code of Reporting Carrier	<u>391659</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>				
<p>Name of Reporting Carrier <u>Jefferson Telephone Company</u></p>				
<p>Signature of authorized officer or employee </p>				<p>Date <u>03/22/2018</u></p>
<p>Printed name of authorized officer or employee <u>Paul Bergmann</u></p>				
<p>Title or position of authorized officer or employee <u>CFO</u></p>				
<p>Telephone number of authorized officer or employee: ( <u>712</u> ) <u>271</u> - <u>5535</u> , ext.</p>				
<p>Study Area Code of Reporting Carrier</p>	<p><u>391666</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>	
<p align="center">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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN WEST TELECOM COOP (KADOKA)</u>					
Signature of authorized officer or employee <b>Dennis Law</b>				Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (kadoka),l=Wall SD 57790-0411, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Law</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-279-2161</u>					
Study Area Code of Reporting Carrier	<u>391667</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KENNEBEC TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Rod Bowar</b>				Digitally signed by Rod Bowar DN:cn=Rod Bowar,email=knbctel@kennebectelephone.com,O=kennebec telephone company,I=Kennebec SD 57544, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Rod Bowar</u>					
Title or position of authorized officer or employee: <u>President/Manager</u>					
Telephone number of authorized officer or employee: <u>605-869-2220</u>					
Study Area Code of Reporting Carrier	<u>391668</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRIOTEL COMMUNICATIONS, INC. (MCCOOK)</u>					
Signature of authorized officer or employee <b>Bryan Roth</b>				Digitally signed by Bryan Roth DN:cn=Bryan Roth,email=bkroth@triotel.com,O=triotel communications, inc. (mccook),l=Salem SD 57058-0630, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Bryan Roth</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>605-425-2238</u>					
Study Area Code of Reporting Carrier	<u>391669</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MIDSTATE COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Kathy Taylor</b>				Digitally signed by Kathy Taylor DN:cn=Kathy Taylor,email=kathy@midstaff.net,O=midstate communications, inc.,l=Kimball SD 57355, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Kathy Taylor</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>605-778-6221</u>					
Study Area Code of Reporting Carrier	<u>391670</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST RIVER TELECOMMUNICATIONS COOP.(MOBRIDGE)</u>					
Signature of authorized officer or employee <b>Troy Schilling</b>				Digitally signed by Troy Schilling DN:cn=Troy Schilling,email=troys@wrtc.com,O=west river telecommunications coop.(mobridge),l=Hazen ND 58545 Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Troy Schilling</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>701-748-2211</u>					
Study Area Code of Reporting Carrier	<u>391671</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>RC Technologies</u>			
Signature of authorized officer or employee <u>Robin Thoreson</u>			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>Robin Thoreson</u>			
Title or position of authorized officer or employee <u>Accounting Dept Manager</u>			
Telephone number of authorized officer or employee: ( <u>605</u> ) <u>637</u> - <u>5211</u> , ext.			
Study Area Code of Reporting Carrier	<u>391674</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SANTEL COMMUNICATIONS COOPERATIVE, INC.</u>					
Signature of authorized officer or employee <b>Ryan Thompson</b>				Digitally signed by Ryan Thompson DN:cn=Ryan Thompson,email=rthompson@santel.coop,O=santel communications cooperative, inc.,l=Woonsocket SD 57385-0067, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Ryan Thompson</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>605-796-8143</u>					
Study Area Code of Reporting Carrier	<u>391676</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Santel Communications Cooperative, Inc.**

Signature of authorized officer or employee

Date **07/05/2018**

Printed name of authorized officer or employee **Ryan Thompson**

Title or position of authorized officer or employee **General Manager/CEO**

Telephone number of authorized officer or employee: ( **605** ) **796** - **8143** , ext.

Study Area Code of Reporting Carrier

**391676**

Filing Due Date for this form (mm/dd/yyyy)

**July 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN WEST TELECOM COOP (SIOUX VALLEY)</u>					
Signature of authorized officer or employee <b>Dennis Law</b>				Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (sioux valley),l=Wall SD 57790-0411, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Dennis Law</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-279-2161</u>					
Study Area Code of Reporting Carrier	<u>391677</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>INTERSTATE TELECOMMUNICATIONS COOP., INC.-SST</u>					
Signature of authorized officer or employee <b>Tracy Bandemer</b>				Digitally signed by Tracy Bandemer DN:cn=Tracy Bandemer,email=bandemer@itctel.com,O=interstate telecommunications coop., inc.-sst,l=Clear Lake SD 57226-0920, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Tracy Bandemer</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>605-874-2181</u>					
Study Area Code of Reporting Carrier	<u>391679</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VENTURE COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <u>Janelle Jessen</u>				Digitally signed by Janelle Jessen DN:cn=Janelle Jessen,email=janellej@venturecomm.net,O=venture communications cooperative, Highmore SD 57345-0157 Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Janelle Jessen</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>605-852-2224</u>					
Study Area Code of Reporting Carrier	<u>391680</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRIOTEL COMMUNICATIONS, INC. (TRI-COUNTY)</u>					
Signature of authorized officer or employee <b>Bryan Roth</b>				Digitally signed by Bryan Roth DN:cn=Bryan Roth,email=bkroth@triotel.com,O=triotel communications, inc. (tri-county),l=Salem SD 57058-0630, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Bryan Roth</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>605-425-2238</u>					
Study Area Code of Reporting Carrier	<u>391682</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN WEST TELECOM COOP (UNION)</u>					
Signature of authorized officer or employee <b>Dennis Law</b>				Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (union),l=Wall SD 57790-0411, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Law</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-279-2161</u>					
Study Area Code of Reporting Carrier	<u>391684</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VALLEY TELECOMM. COOP. ASSN.,INC.</u>					
Signature of authorized officer or employee <b>Jeff Symens</b>				Digitally signed by Jeff Symens DN:cn=Jeff Symens,email=jsymens@valleytel.net,O=valley telecomm. coop. assn.,inc.,l=Herreid SD 57632-0007, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Jeff Symens</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-437-2615</u>					
Study Area Code of Reporting Carrier	<u>391685</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN WEST TELECOM COOP (VIVIAN)</u>					
Signature of authorized officer or employee <b>Dennis Law</b>				Digitally signed by Dennis Law DN:cn=Dennis Law,email=dennylaw@goldenwest.com,O=golden west telecom coop (vivian),l=Wall SD 57790-0411, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Law</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>605-279-2161</u>					
Study Area Code of Reporting Carrier	<u>391686</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VENTURE COMMUNICATIONS COOPERATIVE</u>					
Signature of authorized officer or employee <u>Janelle Jessen</u>				Digitally signed by Janelle Jessen DN:cn=Janelle Jessen,email=janellej@venturecomm.net,O=venture communications cooperative, Highmore SD 57345-0157 Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Janelle Jessen</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>605-852-2224</u>					
Study Area Code of Reporting Carrier	<u>391688</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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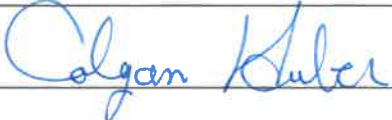
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WEST RIVER COOPERATIVE TEL. CO.</u>					
Signature of authorized officer or employee <b>Colgan Huber</b>				Digitally signed by Colgan Huber DN:cn=Colgan Huber,email=chuber@wrctc.coop,O=west river cooperative tel. co.,l=Bison SD 57620, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Colgan Huber</u>					
Title or position of authorized officer or employee: <u>Assistant General Manager</u>					
Telephone number of authorized officer or employee: <u>605-244-5213</u>					
Study Area Code of Reporting Carrier	<u>391689</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **West River Cooperative Telephone Company**

Signature of authorized officer or employee  Date **09/06/2018**

Printed name of authorized officer or employee **Colgan Huber**

Title or position of authorized officer or employee **Assistant General Manager**

Telephone number of authorized officer or employee: ( 605 ) 244 - 5213 , ext.

Study Area Code of Reporting Carrier	<b>391689</b>	Filing Due Date for this form (mm/dd/yyyy)	Sept. 2018
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CENTRAL ARKANSAS TEL. COOP INC.</u>					
Signature of authorized officer or employee <b>Larry Frazier</b>				Digitally signed by Larry Frazier DN:cn=Larry Frazier,email=larryf@catc.net,O=central arkansas tel. coop inc.,l=Bismarck AR 71929, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Larry Frazier</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>501-865-7008</u>					
Study Area Code of Reporting Carrier	<u>401697</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Central Arkansas Tel**

Signature of authorized officer or employee

Date **08/07/2018**

Printed name of authorized officer or employee **Larry Frazier**

Title or position of authorized officer or employee **General Manager**

Telephone number of authorized officer or employee: ( **501** ) **865** - **7008** , ext.

Study Area Code of Reporting Carrier

**401697**

Filing Due Date for this form (mm/dd/yyyy)

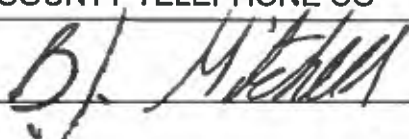
**August 2018**

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>CLEVELAND COUNTY TELEPHONE CO</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>BJ MITCHELL</u>			
Title or position of authorized officer or employee <u>PRESIDENT</u>			
Telephone number of authorized officer or employee: ( <u>417</u> ) <u>776</u> - <u>2247</u> , ext.			
Study Area Code of Reporting Carrier	<div style="border: 1px solid red; padding: 2px; display: inline-block;"><b>401698</b></div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>DECATUR TELEPHONE CO</b>			
Signature of authorized officer or employee 			Date <b>03/22/2018</b>
Printed name of authorized officer or employee <b>BJ MITCHELL</b>			
Title or position of authorized officer or employee <b>PRESIDENT</b>			
Telephone number of authorized officer or employee: ( 417 ) 776 - 2247 , ext.			
Study Area Code of Reporting Carrier	<div style="border: 2px solid red; padding: 2px; display: inline-block;">401699</div>	Filing Due Date for this form (mm/dd/yyyy)	3/31/2018
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH ARKANSAS TEL. CO.,INC.</u>					
Signature of authorized officer or employee <b>Paula Gresham</b>				Digitally signed by Paula Gresham DN:cn=Paula Gresham,email=paula@satco.biz,O=south arkansas tel. co.,inc.,l=Sheridan AR 72150, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Paula Gresham</u>					
Title or position of authorized officer or employee: <u>Asst. Controller</u>					
Telephone number of authorized officer or employee: <u>870-942-4344</u>					
Study Area Code of Reporting Carrier	<u>401702</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LAVACA TELEPHONE-AR</u>					
Signature of authorized officer or employee <b>Keith Gibson</b>				Digitally signed by Keith Gibson DN:cn=Keith Gibson,email=keithg@pinncom.com,O=lavaca telephone-ar,j=Lavaca AR 72941-0230, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Keith Gibson</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>479-674-2211</u>					
Study Area Code of Reporting Carrier	<u>401704</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MADISON COUNTY TEL. CO. INC.</u>					
Signature of authorized officer or employee <b>Tom Shrum</b>				Digitally signed by Tom Shrum DN:cn=Tom Shrum,email=tomshrum@madisoncounty.net,O=madison county tel. co. inc.,l=Huntsville AR 72740, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Tom Shrum</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>479-738-2121</u>					
Study Area Code of Reporting Carrier	<u>401709</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MAGAZINE TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Kathy Stone</b>				Digitally signed by Kathy Stone DN:cn=Kathy Stone,email=magtel@magtel.com,O=magazine telephone company,l=Booneville AR 72927, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Kathy Stone</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>479-969-2211</u>					
Study Area Code of Reporting Carrier	<u>401710</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHERN ARKANSAS TEL. CO.,INC.</u>					
Signature of authorized officer or employe <b>Steven Sanders, Jr.</b>				Digitally signed by Steven Sanders, Jr. DN: cn=Steven Sanders, Jr., email=steven@natconet.com, O=northern arkansas tel. co. inc. l=Elinpin AR 72634-0209	
				Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Steven Sanders, Jr.</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>870-453-9273</u>					
Study Area Code of Reporting Carrier	<u>401713</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

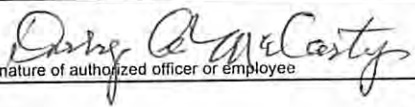
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PRAIRIE GROVE TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Rick Reed</b>				Digitally signed by Rick Reed DN:cn=Rick Reed,email=treed@pgtc.com,O=prairie grove telephone company,l=Prairie Grove AR 72753-1010, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Rick Reed</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>479-846-7200</u>					
Study Area Code of Reporting Carrier	<u>401718</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>				
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>				
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>				
Name of Reporting Carrier <u>Rice Belt Telephone Company Inc.</u>				
Signature of authorized officer or employee 				Date <u>3/26/2018</u>
Printed name of authorized officer or employee <u>Darby A. McCarty</u>				
Title or position of authorized officer or employee <u>President</u>				
Telephone number of authorized officer or employee: ( <u>812</u> ) <u>876</u> - <u>2211</u> , ext.				
Study Area Code of Reporting Carrier <u>401721</u>		Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u>		
<small>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.</small>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTHWEST ARKANSAS TEL. COOP. INC.</u>					
Signature of authorized officer or employee <b>Tina Moore</b>				Digitally signed by Tina Moore DN:cn=Tina Moore,email=tinam@swatco.com,O=southwest arkansas tel. coop. inc.,l=Texarkana AR 71854-8073, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Tina Moore</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>870-653-8222</u>					
Study Area Code of Reporting Carrier	<u>401724</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ARKWEST COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <u>P. Sanders</u>				Digitally signed by P. Sanders DN:cn=P. Sanders,email=ptjr@arkwest.com,O=arkwest communications, inc.,l=Danville AR 72833, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>P. Sanders</u>					
Title or position of authorized officer or employee: <u>President &amp; GM</u>					
Telephone number of authorized officer or employee: <u>479-495-4242</u>					
Study Area Code of Reporting Carrier	<u>401734</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLUE VALLEY TELE-COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Candace Wright</b>				Digitally signed by Candace Wright DN:cn=Candace Wright,email=cwright@bluevalleyinc.net,O=blue valley tele-communications, inc.,l=Home KS 66438, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Candace Wright</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>785-799-3657</u>					
Study Area Code of Reporting Carrier	<u>411746</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COUNCIL GROVE TEL. CO.</u>					
Signature of authorized officer or employee <b>Dale Jones</b>				Digitally signed by Dale Jones DN:cn=Dale Jones,email=djones@tctainc.net,O=council grove tel. co.,l=Council Grove KS 66846-0299, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Dale Jones</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>620-767-5153</u>					
Study Area Code of Reporting Carrier	<u>411758</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CUNNINGHAM TELEPHONE CO. INC.</u>					
Signature of authorized officer or employee <b>Brent Cunningham</b>				Digitally signed by Brent Cunningham DN:cn=Brent Cunningham,email=brent@ctctelephony.tv,O=cunningham telephone co. inc.,l=Glen Elder KS 67446-0108, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Brent Cunningham</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>785-545-3215</u>					
Study Area Code of Reporting Carrier	<u>411761</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ELKHART TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Trenton Boaldin</b>				Digitally signed by Trenton Boaldin DN:cn=Trenton Boaldin,email=tdboaldin@epictouch.com,O=elkhart telephone company inc.,l=Elkhart KS 67950, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Trenton Boaldin</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>620-697-2111</u>					
Study Area Code of Reporting Carrier	<u>411764</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GOLDEN BELT TELEPHONE ASSN. INC.</u>					
Signature of authorized officer or employe <b>Beau Rebel</b>				Digitally signed by Beau Rebel DN:cn=Beau Rebel,email=brebel@gbtlive.com,O=golden belt telephone assn. inc.,l=Rush Center KS 67575, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Beau Rebel</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>785-372-4236</u>					
Study Area Code of Reporting Carrier	<u>411777</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GORHAM TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Tonya Murphy</b>				Digitally signed by Tonya Murphy DN:cn=Tonya Murphy,email=tmurphy@gorhamtel.com,O=gorham telephone company inc.,l=Gorham KS 67640-0235, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Tonya Murphy</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>785-637-5300</u>					
Study Area Code of Reporting Carrier	<u>411778</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>H &amp; B COMMUNICATIONS INC.</u>					
Signature of authorized officer or employee <b>Robert Koch</b>				Digitally signed by Robert Koch DN:cn=Robert Koch,email=robkoch@hbcomm.net,O=h & b communications inc.,l=Holyrood KS 67450, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Robert Koch</u>					
Title or position of authorized officer or employee: <u>President and General Manager</u>					
Telephone number of authorized officer or employee: <u>785-252-4000</u>					
Study Area Code of Reporting Carrier	<u>411781</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

**I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.**

Name of Reporting Carrier **H&B Communications, Inc**

Signature of authorized officer or employee

Date

**08/06/2018**

Printed name of authorized officer or employee

**Robert Koch**

Title or position of authorized officer or employee

**President / GM**

Telephone number of authorized officer or employee: ( **785** ) **252** - **4000** , ext.

Study Area Code of Reporting Carrier

**411781**

Filing Due Date for this form (mm/dd/yyyy)

**August 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HOME TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Tina Anderson</b>				Digitally signed by Tina Anderson DN:cn=Tina Anderson,email=tanderson@hci-ks.com,O=home telephone company inc.,l=Galva KS 67443, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Tina Anderson</u>					
Title or position of authorized officer or employee: <u>Customer Acct &amp; Billing Mgr/Secretary</u>					
Telephone number of authorized officer or employee: <u>620-654-3381</u>					
Study Area Code of Reporting Carrier	<u>411782</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KANOKLA TELEPHONE ASSOCIATION - KS</u>					
Signature of authorized officer or employee <u>Jill Kuehny</u>				Digitally signed by Jill Kuehny DN:cn=Jill Kuehny,email=jkuehny@kanokla.com,O=kanokla telephone association - ks,l=Caldwell KS 67022-0111, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jill Kuehny</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>620-845-5682</u>					
Study Area Code of Reporting Carrier	<u>411788</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MADISON TELEPHONE, LLC</u>					
Signature of authorized officer or employee <b>Shana Rains</b>				Digitally signed by Shana Rains DN:cn=Shana Rains,email=mtn.shana@gmail.com,O=madison telephone, llc,l=Madison KS 66860, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Shana Rains</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>620-437-2356</u>					
Study Area Code of Reporting Carrier	<u>411801</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MOKAN DIAL, INC.- KS</u>					
Signature of authorized officer or employee <u>Amanda Molina</u>				Digitally signed by Amanda Molina DN:cn=Amanda Molina,email=amolina@townes.net,O=mokan dial, inc. - ks,l=Merritt Island FL 32952, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Amanda Molina</u>					
Title or position of authorized officer or employee: <u>Vice President of External Relations</u>					
Telephone number of authorized officer or employee: <u>904-259-0029</u>					
Study Area Code of Reporting Carrier	<u>411807</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MUTUAL TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>John Tietjens</u>				Digitally signed by John Tietjens DN:cn=John Tietjens,email=jtietjens@mtc4me.com,O=mutual telephone company,l=Little River KS 67457, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>John Tietjens</u>					
Title or position of authorized officer or employee: <u>President &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>620-897-6200</u>					
Study Area Code of Reporting Carrier	<u>411809</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PEOPLES TELECOMMUNICATIONS, LLC</u>					
Signature of authorized officer or employee <b>Kathy Billinger</b>				Digitally signed by Kathy Billinger DN:cn=Kathy Billinger,email=Kathy@peoplestelecom.net,O=peoples telecommunications, llc,l=LaCygne KS 66040, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Kathy Billinger</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>913-757-2500</u>					
Study Area Code of Reporting Carrier	<u>411814</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PIONEER TELEPHONE ASSOCIATION INC.</u>					
Signature of authorized officer or employee <b>Becky Zerr</b>				Digitally signed by Becky Zerr DN:cn=Becky Zerr,email=becky.zerr@pioncomm.net,O=pioneer telephone association inc.,l=Ulysses KS 67880, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Becky Zerr</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>620-356-3211</u>					
Study Area Code of Reporting Carrier	<u>411817</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CRAW-KAN TELEPHONE COOP INC- KS</u>					
Signature of authorized officer or employee <b>Craig Wilbert</b>				Digitally signed by Craig Wilbert DN:cn=Craig Wilbert,email=cwilbert@ckt.net,O=craw-kan telephone coop inc- ks,l=Girard KS 66743-0100, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Craig Wilbert</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>620-724-8235</u>					
Study Area Code of Reporting Carrier	<u>411818</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RAINBOW TELECOMMUNICATIONS ASSOC., INC.</u>					
Signature of authorized officer or employee <b>Kathy Ruoff</b>				Digitally signed by Kathy Ruoff DN:cn=Kathy Ruoff,email=kathy@rainbowtel.com,O=rainbow telecommunications assoc., inc.,l=Everest KS 66424, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Kathy Ruoff</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>785-548-7511</u>					
Study Area Code of Reporting Carrier	<u>411820</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>S &amp; T TEL. COOP. ASSN.</u>					
Signature of authorized officer or employee <b>Christina Hickert</b>				Digitally signed by Christina Hickert DN:cn=Christina Hickert,email=christina.hickert@sttelcom.com,O=s & t tel. coop. assn.,l=Brewster KS 67732, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Christina Hickert</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>256-694-2256</u>					
Study Area Code of Reporting Carrier	<u>411827</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH CENTRAL TEL. ASSN. INC.-KS</u>					
Signature of authorized officer or employee <b>Carla Shearer</b>				Digitally signed by Carla Shearer DN:cn=Carla Shearer,email=cshearer@sctelcom.com,O=south central tel. assn. inc.-ks,l=Medicine Lodge KS 67104, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Carla Shearer</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>620-930-1082</u>					
Study Area Code of Reporting Carrier	<u>411831</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTHERN KANSAS TEL. CO.,INC.</u>					
Signature of authorized officer or employe <b>William McVey</b>				Digitally signed by William McVey DN:cn=William McVey,email=bill@sktc.net,O=southern kansas tel. co.,inc.,l=Clearwater KS 67026-0800, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>William McVey</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>620-584-8337</u>					
Study Area Code of Reporting Carrier	<u>411833</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRI-COUNTY TEL. ASSN. INC.-KS</u>					
Signature of authorized officer or employee <b>Dale Jones</b>				Digitally signed by Dale Jones DN:cn=Dale Jones,email=djones@tctainc.net,O=tri-county tel. assn. inc.-ks,I=Council Grove KS 66846-0299, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Dale Jones</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>620-767-5153</u>					
Study Area Code of Reporting Carrier	<u>411839</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TWIN VALLEY TEL. INC.-KS</u>					
Signature of authorized officer or employee <b>Scott Leitzel</b>				Digitally signed by Scott Leitzel DN:cn=Scott Leitzel,email=scott.leitzel@tvinc.net,O=twin valley tel. inc.-ks,l=Miltonvale KS 67466, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Scott Leitzel</u>					
Title or position of authorized officer or employee: <u>Vice President-Operations</u>					
Telephone number of authorized officer or employee: <u>785-427-9504</u>					
Study Area Code of Reporting Carrier	<u>411840</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>UNITED TELEPHONE ASSOCIATION, INC.</u>					
Signature of authorized officer or employee <b>Todd Houseman</b>				Digitally signed by Todd Houseman DN:cn=Todd Houseman,email=toddh@unitedtelcom.net,O=united telephone association, inc.,l=Dodge City KS 67801, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Todd Houseman</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>620-227-8641</u>					
Study Area Code of Reporting Carrier	<u>411841</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WHEAT STATE TELEPHONE, INC.</u>					
Signature of authorized officer or employee <b>Sherri Harlan</b>				Digitally signed by Sherri Harlan DN:cn=Sherri Harlan,email=sharlan@wheatstate.com,O=wheat state telephone, inc.,l=Udall KS 67146, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Sherri Harlan</u>					
Title or position of authorized officer or employee: <u>Accounting Administrator</u>					
Telephone number of authorized officer or employee: <u>620-782-3341</u>					
Study Area Code of Reporting Carrier	<u>411847</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WILSON TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Brian Boisvert</b>				Digitally signed by Brian Boisvert DN:cn=Brian Boisvert,email=boisvert@wilsoncom.us,O=wilson telephone company inc.,l=Wilson KS 67490-0190, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Brian Boisvert</u>					
Title or position of authorized officer or employee: <u>CEO /General Manager</u>					
Telephone number of authorized officer or employee: <u>785-658-2111</u>					
Study Area Code of Reporting Carrier	<u>411849</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BPS Telephone Company</u>					
Signature of authorized officer or employee <u>Lisa Winberry</u>				Digitally signed by Lisa Winberry DN:cn=Lisa Winberry,email=Winberry@BPSTelephone.com,O=bps telephone company,l=Bernie MO 63822-0550, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Lisa Winberry</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>573-293-2277</u>					
Study Area Code of Reporting Carrier	<u>420463</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>IAMO TELEPHONE COMPANY - MO</u>					
Signature of authorized officer or employee <u>Jillinda Thornton</u>				Digitally signed by Jillinda Thornton DN:cn=Jillinda Thornton,email=jthornton@iamotelephone.com,O=iam o telephone company - mo,l=Coin IA 51636-0368, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jillinda Thornton</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>712-583-3232</u>					
Study Area Code of Reporting Carrier	<u>421206</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CRAW-KAN TELEPHONE COOP INC - MO</u>					
Signature of authorized officer or employee <b>Craig Wilbert</b>				Digitally signed by Craig Wilbert DN:cn=Craig Wilbert,email=cwilbert@ckt.net,O=craw-kan telephone coop inc - mo,l=Girard KS 66743-0100, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Craig Wilbert</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>620-724-8235</u>					
Study Area Code of Reporting Carrier	<u>421759</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MOKAN DIAL, INC.- MO</u>					
Signature of authorized officer or employee <u>Amanda Molina</u>				Digitally signed by Amanda Molina DN:cn=Amanda Molina,email=amolina@townes.net,O=mokan dial, inc. - mo,l=Merritt Island FL 32952, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Amanda Molina</u>					
Title or position of authorized officer or employee: <u>Vice President of External Relations</u>					
Telephone number of authorized officer or employee: <u>904-259-0029</u>					
Study Area Code of Reporting Carrier	<u>421807</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALMA COMMUNICATIONS COMPANY DBA ALMA TEL. CO.</u>					
Signature of authorized officer or employee <b>Tommie Sue Loges</b>				Digitally signed by Tommie Sue Loges DN: cn=Tommie Sue Loges, email=tsloges@almanet.net, O=alma communications company dba alma tel. co. l=Alma Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Tommie Sue Loges</u>					
Title or position of authorized officer or employee: <u>Administrative Assistant</u>					
Telephone number of authorized officer or employee: <u>660-674-2297</u>					
Study Area Code of Reporting Carrier	<u>421860</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHARITON VALLEY TELEPHONE CORPORATION</u>					
Signature of authorized officer or employee <b>Kirby Underberg</b>				Digitally signed by Kirby Underberg DN:cn=Kirby Underberg,email=kunderberg@charitonvalley.com,O=chariton valley telephone corporation,l=Macon MO 63552 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Kirby Underberg</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>660-395-9000</u>					
Study Area Code of Reporting Carrier	<u>421864</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CITIZENS TELEPHONE CO - MISSOURI</u>					
Signature of authorized officer or employee <b>Brian Cornelius</b>				Digitally signed by Brian Cornelius DN:cn=Brian Cornelius,email=blc@ctcis.net,O=citizens telephone co - missouri,l=Higginsville MO 64037-0737, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Brian Cornelius</u>					
Title or position of authorized officer or employee: <u>President &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>660-584-6520</u>					
Study Area Code of Reporting Carrier	<u>421865</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>OZARK TELEPHONE CO</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>BJ MITCHELL</u>			
Title or position of authorized officer or employee <u>VICE-PRESIDENT</u>			
Telephone number of authorized officer or employee: ( <u>417</u> ) <u>776</u> . <u>2247</u> , ext.			
Study Area Code of Reporting Carrier	<div style="border: 2px solid red; padding: 2px; display: inline-block;">421866</div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARBER TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Charles Crow</b>				Digitally signed by Charles Crow DN:cn=Charles Crow,email=ccrow@ftco.net,O=farber telephone company,l=Farber MO 63345, Date:3/16/2018 Date: <u>3/16/2018</u>	
Printed name of authorized officer or employee: <u>Charles Crow</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>573-249-9800</u>					
Study Area Code of Reporting Carrier	<u>421876</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

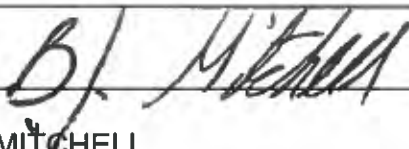
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FIDELITY TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Carla Cooper</b>				Digitally signed by Carla Cooper DN:cn=Carla Cooper,email=carla.cooper@fidelitycommunications.com,O=fidelity telephone company,I=Sullivan MO 63080, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Carla Cooper</u>					
Title or position of authorized officer or employee: <u>VP of Finance</u>					
Telephone number of authorized officer or employee: <u>573-468-1218</u>					
Study Area Code of Reporting Carrier	<u>421882</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>GOODMAN TELEPHONE CO</b>			
Signature of authorized officer or employee 			Date <b>03/22/2018</b>
Printed name of authorized officer or employee <b>BJ MITCHELL</b>			
Title or position of authorized officer or employee <b>PRESIDENT</b>			
Telephone number of authorized officer or employee: ( 417 ) 776 - 2247 , ext			
Study Area Code of Reporting Carrier	<div style="border: 2px solid red; padding: 2px; display: inline-block;">421886</div>	Filing Due Date for this form (mm/dd/yyyy)	3/31/2018
<small>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.</small>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRANBY TEL CO - MISSOURI</u>					
Signature of authorized officer or employee <b>Cheri Johnson</b>				Digitally signed by Cheri Johnson DN:cn=Cheri Johnson,email=cheri@jscomm.net,O=granby tel co - missouri,l=Granby MO 64844, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Cheri Johnson</u>					
Title or position of authorized officer or employee: <u>Corporate Secretary</u>					
Telephone number of authorized officer or employee: <u>417-472-5513</u>					
Study Area Code of Reporting Carrier	<u>421887</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GREEN HILLS TELEPHONE CORP.</u>					
Signature of authorized officer or employee <b>David Adams</b>				Digitally signed by David Adams DN:cn=David Adams,email=dadams@ghc.com,O=green hills telephone corp.,l=Breckenridge MO 64625, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>David Adams</u>					
Title or position of authorized officer or employee: <u>EVP/GM</u>					
Telephone number of authorized officer or employee: <u>660-644-5411</u>					
Study Area Code of Reporting Carrier	<u>421890</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHOCTAW TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>Amanda Molina</u>				Digitally signed by Amanda Molina DN:cn=Amanda Molina,email=amolina@townes.net,O=choctaw telephone company,l=Merritt Island FL 32952, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Amanda Molina</u>					
Title or position of authorized officer or employee: <u>Vice President of External Relations</u>					
Telephone number of authorized officer or employee: <u>904-259-0029</u>					
Study Area Code of Reporting Carrier	<u>421893</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KINGDOM TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Marla McCowan</b>				Digitally signed by Marla McCowan DN:cn=Marla McCowan,email=mmccowan@kingdomtelco.com,O=kingdom telephone company,lc=Auxvasse MO 65231, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Marla McCowan</u>					
Title or position of authorized officer or employee: <u>Assistant Board Secretary</u>					
Telephone number of authorized officer or employee: <u>573-386-2241</u>					
Study Area Code of Reporting Carrier	<u>421901</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MCDONALD COUNTY TELEPHONE CO.</u>					
Signature of authorized officer or employe <b>Ross Babbitt</b>				Digitally signed by Ross Babbitt DN:cn=Ross Babbitt,email=rbabbitt@olemac.net,O=mcdonald county telephone co.,l=Pineville MO 64856-0207, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Ross Babbitt</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>417-223-4313</u>					
Study Area Code of Reporting Carrier	<u>421912</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MILLER TELEPHONE COMPANY - MO</u>					
Signature of authorized officer or employee <u>John Ludenia</u>				Digitally signed by John Ludenia DN:cn=John Ludenia,email=jludenia@westsidetel.com,O=miller telephone company - mo,l=Morgantown WV 26501, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>John Ludenia</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>304-983-8642</u>					
Study Area Code of Reporting Carrier	<u>421920</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHEAST MISSOURI RURAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Michele Gillespie</b>				Digitally signed by Michele Gillespie DN:cn=Michele Gillespie,email=mvan@nemr.net,O=northeast missouri rural tel. co.,l=Green City MO 63545-0098, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Michele Gillespie</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>660-874-4111</u>					
Study Area Code of Reporting Carrier	<u>421931</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OREGON FARMERS MUTUAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Amanda Molina</b>				Digitally signed by Amanda Molina DN:cn=Amanda Molina,email=amolina@townes.net,O=oregon farmers mutual tel. co.,l=Merritt Island FL 32952, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Amanda Molina</u>					
Title or position of authorized officer or employee: <u>Vice President of External Relations</u>					
Telephone number of authorized officer or employee: <u>904-259-0029</u>					
Study Area Code of Reporting Carrier	<u>421935</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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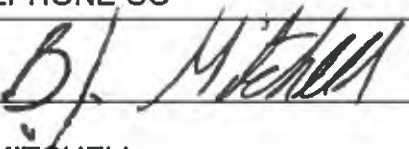
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ROCK PORT TEL. CO.</u>					
Signature of authorized officer or employe <b>Rick Bradley</b>				Digitally signed by Rick Bradley DN:cn=Rick Bradley,email=rbradley@rpt.coop,O=rock port tel. co.,l=Rock Port MO 64482, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Rick Bradley</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>660-744-5311</u>					
Study Area Code of Reporting Carrier	<u>421942</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>SENECA TELEPHONE CO</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>BJ MITCHELL</u>			
Title or position of authorized officer or employee <u>VICE-PRESIDENT</u>			
Telephone number of authorized officer or employee: ( <u>417</u> ) <u>776</u> - <u>2247</u> , ext.			
Study Area Code of Reporting Carrier	<div style="border: 1px solid red; padding: 2px; display: inline-block;">421945</div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STEELVILLE TEL. EXCH. INC.</u>					
Signature of authorized officer or employee <b>Donald Santhuff</b>				Digitally signed by Donald Santhuff DN:cn=Donald Santhuff,email=santhuff@misn.com,O=steelville tel. exch. inc.,l=Steelville MO 65565, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Donald Santhuff</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>573-775-2111</u>					
Study Area Code of Reporting Carrier	<u>421949</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LAVACA TELEPHONE CO.- OK</u>					
Signature of authorized officer or employee <b>Keith Gibson</b>				Digitally signed by Keith Gibson DN:cn=Keith Gibson,email=keithg@pinncom.com,O=lavaca telephone co.- ok,l=Lavaca AR 72941-0230, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Keith Gibson</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>479-674-2211</u>					
Study Area Code of Reporting Carrier	<u>431704</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KANOKLA TELEPHONE ASSOCIATION - OK</u>					
Signature of authorized officer or employee <u>Jill Kuehny</u>				Digitally signed by Jill Kuehny DN:cn=Jill Kuehny,email=jkuehny@kanokla.com,O=kanokla telephone association - ok,l=Caldwell KS 67022-0111, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jill Kuehny</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>620-845-5682</u>					
Study Area Code of Reporting Carrier	<u>431788</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH CENTRAL TEL. ASSN., INC.-OK</u>					
Signature of authorized officer or employee <b>Carla Shearer</b>				Digitally signed by Carla Shearer DN:cn=Carla Shearer,email=cshearer@sctelcom.com,O=south central tel. assn., inc.-ok,l=Medicine Lodge KS 67104, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Carla Shearer</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>620-930-1082</u>					
Study Area Code of Reporting Carrier	<u>431831</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ATLAS TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Barbara Summa</b>				Digitally signed by Barbara Summa DN:cn=Barbara Summa,email=barbaras@junct.com,O=atlas telephone co.,l=Big Cabin OK 74332-0077, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Barbara Summa</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>918-783-5111</u>					
Study Area Code of Reporting Carrier	<u>431966</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BEGGS TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Kay Mount</b>				Digitally signed by Kay Mount DN:cn=Kay Mount,email=staff@beggstelco.net,O=beggs telephone company,l=Beggs OK 74421-0749, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Kay Mount</u>					
Title or position of authorized officer or employee: <u>Pres. &amp; General Manager</u>					
Telephone number of authorized officer or employee: <u>918-267-3636</u>					
Study Area Code of Reporting Carrier	<u>431968</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BIXBY TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Frank Rehbein</b>				Digitally signed by Frank Rehbein DN:cn=Frank Rehbein,email=frehbein@olp.net,O=bixby telephone co.,l=Bixby OK 74008-0098, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Frank Rehbein</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>918-366-8000</u>					
Study Area Code of Reporting Carrier	<u>431969</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CANADIAN VALLEY TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Misty Souther</b>				Digitally signed by Misty Souther DN:cn=Misty Souther,email=msouther@cvok.net,O=canadian valley telephone co.,l=Crowder OK 74430, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Misty Souther</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>918-334-3700</u>					
Study Area Code of Reporting Carrier	<u>431974</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Canadian Valley Telephone Co.**

Signature of authorized officer or employee *Misty Souther* Date **8-7-18**

Printed name of authorized officer or employee **Misty Souther**

Title or position of authorized officer or employee **Office Manager**

Telephone number of authorized officer or employee: ( 918 ) 334 - 3700 , ext.

Study Area Code of Reporting Carrier	<b>431974</b>	Filing Due Date for this form (mm/dd/yyyy)	August 2018
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**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CENTRAL OKLAHOMA TELEPHONE CO., L.L.C.</u>					
Signature of authorized officer or employee <b>Steve Guest</b>				Digitally signed by Steve Guest DN:cn=Steve Guest,email=steveg@cotc.net,O=central oklahoma telephone co., l.l.c.,l=Davenport OK 74026-0789, Date:3/24/2018	
Date: <u>3/24/2018</u>					
Printed name of authorized officer or employee: <u>Steve Guest</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>918-377-2241</u>					
Study Area Code of Reporting Carrier	<u>431977</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHEROKEE TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Samuel Sanchez</b>				Digitally signed by Samuel Sanchez DN:cn=Samuel Sanchez,email=ssanchez@cherokeetel.com,O=cherokee telephone co.,l=Calera OK 74730, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Samuel Sanchez</u>					
Title or position of authorized officer or employee: <u>Vice President Operations</u>					
Telephone number of authorized officer or employee: <u>580-434-5375</u>					
Study Area Code of Reporting Carrier	<u>431979</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHICKASAW TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Larry Jones</b>				Digitally signed by Larry Jones DN:cn=Larry Jones,email=larry@chickasawphone.net,O=chickasaw telephone co.,l=Sulphur OK 73086-0460, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Larry Jones</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>580-622-5223</u>					
Study Area Code of Reporting Carrier	<u>431980</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GRAND TELEPHONE CO. INC.</u>					
Signature of authorized officer or employee <u>Jason Anderson</u>				Digitally signed by Jason Anderson DN:cn=Jason Anderson,email=jsanderson@grand.net,O=grand telephone co. inc.,l=Jay OK 74346-0308, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Jason Anderson</u>					
Title or position of authorized officer or employee: <u>Controller/Co-Manager/1st Vice President</u>					
Telephone number of authorized officer or employee: <u>918-253-4231</u>					
Study Area Code of Reporting Carrier	<u>431994</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HINTON TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Kenneth Doughty</b>				Digitally signed by Kenneth Doughty DN:cn=Kenneth Doughty,email=ken1tel@hintonet.net,O=hinton telephone co.,l=Hinton OK 73047, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Kenneth Doughty</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>405-542-3262</u>					
Study Area Code of Reporting Carrier	<u>431995</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MEDICINE PARK TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Dean Pennello</b>				Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=medicine park telephone co.,l=Lawton OK 73557, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dean Pennello</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>580-529-2700</u>					
Study Area Code of Reporting Carrier	<u>432008</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OKLATEL COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Toney Prather</b>				Digitally signed by Toney Prather DN:cn=Toney Prather,email=toney.prather@otelcom.net,O=oklatel communications, inc.,l=De Leon TX 76444, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Toney Prather</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>254-893-1000</u>					
Study Area Code of Reporting Carrier	<u>432013</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PANHANDLE TELEPHONE COOPERATIVE INC.</u>					
Signature of authorized officer or employee <b>Kelley Wells</b>				Digitally signed by Kelley Wells DN:cn=Kelley Wells,email=kelly.wells@ptci.net,O=panhandle telephone cooperative inc.,l=Guymon OK 73942, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Kelley Wells</u>					
Title or position of authorized officer or employee: <u>Regulatory Affairs Manager</u>					
Telephone number of authorized officer or employee: <u>580-468-2179</u>					
Study Area Code of Reporting Carrier	<u>432016</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PINE TELEPHONE CO INC- OK</u>					
Signature of authorized officer or employee <u>Jane Merz</u>				Digitally signed by Jane Merz DN:cn=Jane Merz,email=jane@pinetelephone.com,O=pine telephone co inc- ok,I=Broken Bow OK 74728, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jane Merz</u>					
Title or position of authorized officer or employee: <u>Bookkeeper</u>					
Telephone number of authorized officer or employee: <u>580-584-3355</u>					
Study Area Code of Reporting Carrier	<u>432017</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Pine Telephone Company, Inc.**

Signature of authorized officer or employee

*Esta O. Callham*

Date

**10/04/2018**

Printed name of authorized officer or employee

**Esta O. Callham**

Title or position of authorized officer or employee

**President**

Telephone number of authorized officer or employee: ( 580 ) 584 - 3355 , ext.

Study Area Code of Reporting Carrier

**432017**

Filing Due Date for this  
form (mm/dd/yyyy)

October 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SHIDLER TEL. CO.</u>					
Signature of authorized officer or employee <u>Jill Kuehny</u>				Digitally signed by Jill Kuehny DN:cn=Jill Kuehny,email=jkuehny@kanokla.com,O=shidler tel. co.,l=Caldwell KS 67022-0111, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jill Kuehny</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>620-845-5682</u>					
Study Area Code of Reporting Carrier	<u>432023</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TERRAL TEL. CO.</u>					
Signature of authorized officer or employee <b>Chad Segress</b>				<small>Digitally signed by Chad Segress DN:cn=Chad Segress,email=chad@wavelinx.com,O=terral tel. co.,l=Yukon OK 73099, Date:3/26/2018</small> Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Chad Segress</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>405-609-7164</u>					
Study Area Code of Reporting Carrier	<u>432029</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TOTAH COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Keith Watson</b>				Digitally signed by Keith Watson DN:cn=Keith Watson,email=kewatson@totelcsi.com,O=totah communications, inc.,l=Ochelata OK 74051-0300, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Keith Watson</u>					
Title or position of authorized officer or employee: <u>Executive VP / Controller</u>					
Telephone number of authorized officer or employee: <u>918-535-2208</u>					
Study Area Code of Reporting Carrier	<u>432030</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

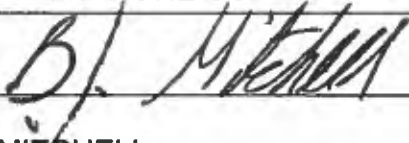
I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier <b>Totah Communications, Inc</b>				
Signature of authorized officer or employee 			Date <b>10/05/2018</b>	
Printed name of authorized officer or employee <b>Mark M. Gailey</b>				
Title or position of authorized officer or employee <b>President &amp; G.M.</b>				
Telephone number of authorized officer or employee: ( 918 ) 535 - 2208 , ext.				
Study Area Code of Reporting Carrier	432030	Filing Due Date for this form (mm/dd/yyyy)	October 2018	
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>				

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

**FCC Form 508**  
**OMB Control No. 3060-0986**

**TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:**

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>WYANDOTTE TELEPHONE CO</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>BJ MITCHELL</u>			
Title or position of authorized officer or employee <u>VICE-PRESIDENT</u>			
Telephone number of authorized officer or employee <u>( 417 ) 776 - 2247</u> , ext.			
Study Area Code of Reporting Carrier	<div style="border: 2px solid red; padding: 2px; display: inline-block;">432034</div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SANTA ROSA TELEPHONE COOP. INC.</u>					
Signature of authorized officer or employee <b>Jason Tole</b>				Digitally signed by Jason Tole DN:cn=Jason Tole,email=jason.tole@srcaccess.net,O=santa rosa telephone coop. inc.,l=Vernon TX 76384, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Jason Tole</u>					
Title or position of authorized officer or employee: <u>Assistant GM / CFO</u>					
Telephone number of authorized officer or employee: <u>940-886-2014</u>					
Study Area Code of Reporting Carrier	<u>432141</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CAMERON TELEPHONE COMPANY - TEXAS</u>					
Signature of authorized officer or employee		<b>Bruce Petry</b>		Digitally signed by Bruce Petry DN:cn=Bruce Petry,email=bruce.petry@camtel.com,O=cameron telephone company - texas,l=Sulphur LA 70665, Date:3/22/2018	Date: <u>3/22/2018</u>
Printed name of authorized officer or employee: <u>Bruce Petry</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>337-583-2092</u>					
Study Area Code of Reporting Carrier	<u>440425</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLOSSOM TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Kelly Dorries</b>				Digitally signed by Kelly Dorries DN:cn=Kelly Dorries,email=kelly@blossomtel.net,O=blossom telephone company,l=Blossom TX 75416, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Kelly Dorries</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>903-982-5200</u>					
Study Area Code of Reporting Carrier	<u>442038</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BIG BEND TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <u>Lauren Sanders</u>				Digitally signed by Lauren Sanders DN:cn=Lauren Sanders,email=lauren.sanders@bbtco.com,O=big bend telephone company inc.,I=Alpine TX 79830, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Lauren Sanders</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>432-364-0054</u>					
Study Area Code of Reporting Carrier	<u>442039</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BRAZORIA TEL. CO.</u>					
Signature of authorized officer or employe <b>Mark Garner</b>				Digitally signed by Mark Garner DN:cn=Mark Garner,email=mark@btel.com,O=brazoria tel. co.,l=Brazoria TX 77422, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Mark Garner</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>979-798-2121</u>					
Study Area Code of Reporting Carrier	<u>442040</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CAP ROCK TELEPHONE COOPERATIVE, INC.</u>					
Signature of authorized officer or employee <b>Jim Whitefield</b>				Digitally signed by Jim Whitefield DN:cn=Jim Whitefield,email=advisory@caprock-spur.com,O=cap rock telephone cooperative, inc.,l=Spur TX 79370-0300, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Jim Whitefield</u>					
Title or position of authorized officer or employee: <u>Executive Vice President/General Manager</u>					
Telephone number of authorized officer or employee: <u>806-271-3336</u>					
Study Area Code of Reporting Carrier	<u>442046</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COLEMAN COUNTY TELEPHONE CO-OP. INC.</u>					
Signature of authorized officer or employee <b>Tim Humpert</b>				Digitally signed by Tim Humpert DN:cn=Tim Humpert,email=timh@web-access.net,O=coleman county telephone co-op. inc.,l=Santa Anna TX 76878, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Tim Humpert</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>325-348-3124</u>					
Study Area Code of Reporting Carrier	<u>442057</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COMMUNITY TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Jenny Barton</b>				Digitally signed by Jenny Barton DN:cn=Jenny Barton,email=jennybarton@comcell.net,O=community telephone company, inc.,l=Windthorst TX 76389, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Jenny Barton</u>					
Title or position of authorized officer or employee:					
Telephone number of authorized officer or employee: <u>940-423-6201</u>					
Study Area Code of Reporting Carrier	<u>442061</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>Cumby Telephone Cooperative, Inc.</b>			
Signature of authorized officer or employee 			Date <b>3-27-18</b>
Printed name of authorized officer or employee <b>Karen L. Zimmerman</b>			
Title or position of authorized officer or employee <b>General Manager</b>			
Telephone number of authorized officer or employee: ( 903 ) 994 - 2211 , ext.			
Study Area Code of Reporting Carrier	<b>442065</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

Certification-Agent

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DELL TELEPHONE CO-OP. INC. - TX</u>					
Signature of authorized officer or employee <b>Marcy Guillen</b>				Digitally signed by Marcy Guillen DN:cn=Marcy Guillen,email=mguillen@delltelco.com,O=dell telephone co-op. inc. - tx,l=Dell City TX 79837, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Marcy Guillen</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>915-964-2352</u>					
Study Area Code of Reporting Carrier	<u>442066</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

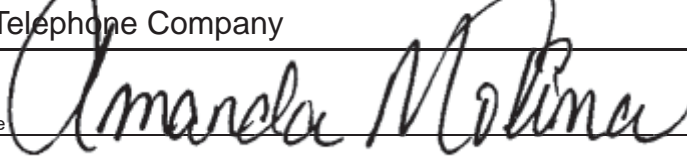
FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>EASTEX TELEPHONE COOPERATIVE INC.</u>					
Signature of authorized officer or employee <b>Steve Alexander</b>				Digitally signed by Steve Alexander DN:cn=Steve Alexander,email=stevena@eastex.com,O=eastex telephone cooperative inc.,l=Henderson UT 75653-0150, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Steve Alexander</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>903-854-1121</u>					
Study Area Code of Reporting Carrier	<u>442068</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier					Electra Telephone Company	
Signature of authorized officer or employee						
					Date	
					05/16/2018	
Printed name of authorized officer or employee					Amanda Molina	
Title or position of authorized officer or employee					Vice President of External Relations	
Telephone number of authorized officer or employee: ( 904 ) 259 - 0029 , ext.						
Study Area Code of Reporting Carrier		442069		Filing Due Date for this form (mm/dd/yyyy)		June 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER. IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>			
<p>Name of Reporting Carrier <u>Border to Border Communications, Inc.</u></p>			
<p>Signature of authorized officer or employee <u>Debbie H Fisher</u></p>			<p>Date <u>3/27/18</u></p>
<p>Printed name of authorized officer or employee <u>Debbie Fisher</u></p>			
<p>Title or position of authorized officer or employee <u>General Manager</u></p>			
<p>Telephone number of authorized officer or employee: <u>(956) 936-2000 ext. 246</u></p>			
<p>Study Area Code of Reporting Carrier <u>442073</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2018</u></p>		
<p>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.</p>			

Certification-Agent

TRANSMITTAL NO. 1549

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GANADO TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Bill Rakowitz</b>				Digitally signed by Bill Rakowitz DN:cn=Bill Rakowitz,email=bill@ykc.com,O=ganado telephone company inc.,l=Ganado TX 77962, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Bill Rakowitz</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>361-771-3331</u>					
Study Area Code of Reporting Carrier	<u>442076</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GUADALUPE VALLEY TEL CO-OP. INC.</u>					
Signature of authorized officer or employee <b>Robert Hunt</b>				Digitally signed by Robert Hunt DN:cn=Robert Hunt,email=robert.hunt@gvtc.net,O=guadalupe valley tel co-op. inc.,l=New Braunfels TX 78132-5900, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Robert Hunt</u>					
Title or position of authorized officer or employee: <u>VP-Regulatory Affairs &amp; Bus Ops</u>					
Telephone number of authorized officer or employee: <u>830-885-8239</u>					
Study Area Code of Reporting Carrier	<u>442083</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HILL COUNTRY TELEPHONE CO-OP. INC.</u>					
Signature of authorized officer or employee <b>R. Cook</b>				Digitally signed by R. Cook DN:cn=R. Cook,email=ccook@hctc.coop,O=hill country telephone co-op. inc.,l=Ingram TX 78025, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>R. Cook</u>					
Title or position of authorized officer or employee: <u>Chief Operations Officer</u>					
Telephone number of authorized officer or employee: <u>830-367-5333</u>					
Study Area Code of Reporting Carrier	<u>442086</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALENCO COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Mary Jo Moncrief</b>				Digitally signed by Mary Jo Moncrief DN:cn=Mary Jo Moncrief,email=maryjo@usapathway.com,O=alenco communications, inc.,l=Joshua TX 76058, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Mary Jo Moncrief</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>817-447-0127</u>					
Study Area Code of Reporting Carrier	<u>442090</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ETS TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Devi Sarwal</b>				Digitally signed by Devi Sarwal DN:cn=Devi Sarwal,email=dsarwal@entouchsystems.net,O=ets telephone company, inc.,l=Houston TX 77042, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Devi Sarwal</u>					
Title or position of authorized officer or employee: <u>Vice-President</u>					
Telephone number of authorized officer or employee: <u>305-433-0307</u>					
Study Area Code of Reporting Carrier	<u>442091</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LA WARD TELEPHONE EXCHANGE INC.</u>					
Signature of authorized officer or employe <b>Terri Parker</b>				Digitally signed by Terri Parker DN:cn=Terri Parker,email=terri@laward.org,O=la ward telephone exchange inc.,l=La Ward TX 77970-0246, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Terri Parker</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>361-872-2211</u>					
Study Area Code of Reporting Carrier	<u>442103</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

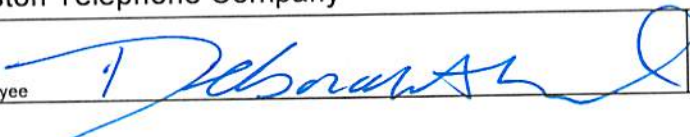
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LIPAN TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Beth Howard</b>				Digitally signed by Beth Howard DN:cn=Beth Howard,email=bethh@lipan.net,O=lipan telephone company,l=Lipan TX 76462, Date:3/20/2018 Date: <u>3/20/2018</u>	
Printed name of authorized officer or employee: <u>Beth Howard</u>					
Title or position of authorized officer or employee: <u>Sec / Treasurer</u>					
Telephone number of authorized officer or employee: <u>254-646-2211</u>					
Study Area Code of Reporting Carrier	<u>442105</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LIVINGSTON TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Deborah Rand</b>				Digitally signed by Deborah Rand DN:cn=Deborah Rand,email=drand@usch.com,O=livingston telephone company,l=Livingston TX 77351, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Deborah Rand</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>603-472-9786</u>					
Study Area Code of Reporting Carrier	<u>442107</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

<b>Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA</b>			
<p>I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.</p>			
Name of Reporting Carrier <b>Livingston Telephone Company</b>			
Signature of authorized officer or employee 			Date <b>09/07/2018</b>
Printed name of authorized officer or employee <b>Deborah Rand</b>			
Title or position of authorized officer or employee <b>President</b>			
Telephone number of authorized officer or employee: ( 936 ) 328 - 1190 , ext.			
Study Area Code of Reporting Carrier	<b>442107</b>	Filing Due Date for this form (mm/dd/yyyy)	Sept. 2018
<p>Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.</p>			

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MUENSTER TEL. CORP. OF TX DBA NORTEX COMM.</u>					
Signature of authorized officer or employee <b>Alan Rohmer</b>				Digitally signed by Alan Rohmer DN:cn=Alan Rohmer,email=arohmer@nortex.com,O=muenster tel. corp. of tx dba nortex comm.,l=Muenster TX 76252, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Alan Rohmer</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>940-759-2251</u>					
Study Area Code of Reporting Carrier	<u>442116</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PEOPLES TELEPHONE COOPERATIVE - TX</u>					
Signature of authorized officer or employee <b>Lloyd Steele</b>				Digitally signed by Lloyd Steele DN:cn=Lloyd Steele,email=steven.steele@gopeoples.net,O=people s telephone cooperative - tx,=Quitman TX 75783-0228, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Lloyd Steele</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>903-878-3132</u>					
Study Area Code of Reporting Carrier	<u>442130</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTHWEST TEXAS TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Gary Gilmer</b>				Digitally signed by Gary Gilmer DN:cn=Gary Gilmer,email=gary@swtexas.com,O=southwest texas telephone company,l=Rocksprings TX 78880, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Gary Gilmer</u>					
Title or position of authorized officer or employee: <u>President, CEO</u>					
Telephone number of authorized officer or employee: <u>830-683-2111</u>					
Study Area Code of Reporting Carrier	<u>442135</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SANTA ROSA TEL. COOP., INC.</u>					
Signature of authorized officer or employee <b>Jason Tole</b>				Digitally signed by Jason Tole DN:cn=Jason Tole,email=jason.tole@srcaccess.net,O=santa rosa tel. coop.,inc.,l=Vernon TX 76384, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Jason Tole</u>					
Title or position of authorized officer or employee: <u>Assistant GM / CFO</u>					
Telephone number of authorized officer or employee: <u>940-886-2014</u>					
Study Area Code of Reporting Carrier	<u>442141</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH PLAINS TEL. COOP.,INC.</u>					
Signature of authorized officer or employe <b>Scotty Hart</b>				Digitally signed by Scotty Hart DN:cn=Scotty Hart,email=scotthart@sptc.net,O=south plains tel. coop.,inc.,l=Lubbock TX 79415, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Scotty Hart</u>					
Title or position of authorized officer or employee: <u>CEO / General Manager</u>					
Telephone number of authorized officer or employee: <u>806-763-2301</u>					
Study Area Code of Reporting Carrier	<u>442143</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TATUM TEL. CO.</u>					
Signature of authorized officer or employee <u>Amanda Molina</u>				Digitally signed by Amanda Molina DN:cn=Amanda Molina,email=amolina@townes.net,O=tatum tel. co.,l=Merritt Island FL 32952, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Amanda Molina</u>					
Title or position of authorized officer or employee: <u>Vice President of External Relations</u>					
Telephone number of authorized officer or employee: <u>904-259-0029</u>					
Study Area Code of Reporting Carrier	<u>442150</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VALLEY TELEPHONE CO-OP. INC. - TX</u>					
Signature of authorized officer or employee <b>Dave Osborn</b>				Digitally signed by Dave Osborn DN:cn=Dave Osborn,email=dave.osborn@vtx1.net,O=valley telephone co-op. inc. - tx,l=Raymondville TX 78580, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Dave Osborn</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>956-642-1124</u>					
Study Area Code of Reporting Carrier	<u>442159</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Valley Telephone Cooperative Inc.**

Signature of authorized officer or employee

Date

**09/07/2018**

Printed name of authorized officer or employee

**Dave Osborn**

Title or position of authorized officer or employee

**CEO**

Telephone number of authorized officer or employee: ( 956 ) 642 - 1124 , ext. 124

Study Area Code of Reporting Carrier

**442159**

Filing Due Date for this form (mm/dd/yyyy)

**Sept. 2018**

**Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.**

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>XIT RURAL TELEPHONE CO-OP. INC.</u>					
Signature of authorized officer or employee <b>Darrell Dennis</b>				Digitally signed by Darrell Dennis DN:cn=Darrell Dennis,email=ddennis@xitcomm.net,O=xit rural telephone co-op. inc.,l=Dalhart TX 79022, Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Darrell Dennis</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>806-384-3311</u>					
Study Area Code of Reporting Carrier	<u>442170</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SAN CARLOS APACHE TELECOMM. UTILITY, INC.</u>					
Signature of authorized officer or employee <b>Shirley Ortiz</b>				Digitally signed by Shirley Ortiz DN:cn=Shirley Ortiz,email=shirley.ortiz@scatui.com,O=san carlos apache telecomm. utility, inc.,l=Peridot AZ 85542, Date:3/28/2018	
Date: <u>3/28/2018</u>					
Printed name of authorized officer or employee: <u>Shirley Ortiz</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>928-475-7058</u>					
Study Area Code of Reporting Carrier	<u>452169</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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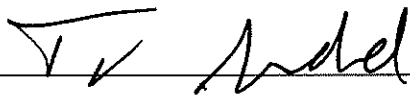
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TOHONO O'ODHAM UTILITY AUTHORITY</u>					
Signature of authorized officer or employee <b>Mike Bethurem</b>				Digitally signed by Mike Bethurem DN:cn=Mike Bethurem,email=mike.bethurem@hq.toua.net,O=toho no o'odham utility authority,I=Sells AZ 85634-0816, Date:3/16/2018	
Date: <u>3/16/2018</u>					
Printed name of authorized officer or employee: <u>Mike Bethurem</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>520-383-2236</u>					
Study Area Code of Reporting Carrier	<u>452173</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement Form

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<p align="center"><b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b></p>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
<p>Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u></p>			
<p>Name of Reporting Carrier <u>Valley Telephone Cooperative, Inc. AZ/Copper Valley Telephone</u></p>			
<p>Signature of authorized officer or employee </p>			<p>Date <u>3/23/18</u></p>
<p>Printed name of authorized officer or employee <u>TROY JUDD</u></p>			
<p>Title or position of authorized officer or employee <u>CHIEF FINANCIAL OFFICER</u></p>			
<p>Telephone number of authorized officer or employee: ( <u>520</u> ) <u>384</u> - <u>8934</u> , ext.</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><u>452176</u></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p><u>3/31/2018</u></p>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GILA RIVER TELECOMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Peter Quam</b>				Digitally signed by Peter Quam DN:cn=Peter Quam,email=pquam@gilarivertel.com,O=gila river telecommunications, inc.,l=Chandler AZ 85226, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Peter Quam</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>520-796-8878</u>					
Study Area Code of Reporting Carrier	<u>452179</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FORT MOJAVE TELECOMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Ruben Hernandez</b>				Digitally signed by Ruben Hernandez DN:cn=Ruben Hernandez,email=rhernandez@ftmojave.net,O=fort mojave telecommunications, inc.,l=Mohave Valley AZ 86440, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Ruben Hernandez</u>					
Title or position of authorized officer or employee: <u>Acting General Manager</u>					
Telephone number of authorized officer or employee: <u>928-346-2500</u>					
Study Area Code of Reporting Carrier	<u>452200</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MIDVALE TELEPHONE EXCHANGE, INC.-ARIZONA</u>					
Signature of authorized officer or employee <b>John Stuart</b>				<small>Digitally signed by John Stuart DN:cn=John Stuart,email=john.stuart@mtecom.com,O=midvale telephone exchange, inc.-arizona,l=Midvale ID 83645, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>John Stuart</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>208-355-2211</u>					
Study Area Code of Reporting Carrier	<u>452226</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TABLE TOP TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Dan Douglas</b>				Digitally signed by Dan Douglas DN:cn=Dan Douglas,email=dand@ponderosatel.com,O=table top telephone company, inc.,l=O'Neals CA 93645, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dan Douglas</u>					
Title or position of authorized officer or employee: <u>Financial Director</u>					
Telephone number of authorized officer or employee: <u>559-868-6395</u>					
Study Area Code of Reporting Carrier	<u>453334</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Saddleback Communications</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>Bill Bryant</u>			
Title or position of authorized officer or employee <u>President/General Manager</u>			
Telephone number of authorized officer or employee: ( <u>480</u> ) <u>362</u> - <u>7001</u> , ext.			
Study Area Code of Reporting Carrier	<u>457991</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>AGATE MUTUAL TELEPHONE COOPERATIVE ASSOC.</u>					
Signature of authorized officer or employee <b>Judy Hollembeak</b>				Digitally signed by Judy Hollembeak DN:cn=Judy Hollembeak,email=amtca@amtca.net,O=agate mutual telephone cooperative assoc.,l=Agate CO 80101 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Judy Hollembeak</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>719-764-2578</u>					
Study Area Code of Reporting Carrier	<u>462178</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BLANCA TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Alan Wehe</b>				Digitally signed by Alan Wehe DN:cn=Alan Wehe,email=alanwehe@gojade.org,O=blanca telephone co.,l=Alamosa CO 81101, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Alan Wehe</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>719-379-3839</u>					
Study Area Code of Reporting Carrier	<u>462182</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>EASTERN SLOPE RURAL TEL ASSN INC</u>					
Signature of authorized officer or employe <b>Patricia White</b>				Digitally signed by Patricia White DN:cn=Patricia White,email=patw@esrta.coop,O=eastern slope rural tel assn inc, =Hugo CO 80821, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Patricia White</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>719-743-2441</u>					
Study Area Code of Reporting Carrier	<u>462186</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS TEL CO, INC. - COLORADO</u>					
Signature of authorized officer or employee <b>Douglas Pace</b>				Digitally signed by Douglas Pace DN:cn=Douglas Pace,email=dpace@ftitel.net,O=farmers tel co, inc. - colorado,l=Pleasant View CO 81331-0369, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Douglas Pace</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>970-562-0058</u>					
Study Area Code of Reporting Carrier	<u>462188</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NUNN TEL. COMPANY</u>					
Signature of authorized officer or employee <b>Greg Grablander</b>				Digitally signed by Greg Grablander DN:cn=Greg Grablander,email=greg@ezlink.com,O=nunn tel. company,l=Nunn CO 80648, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Greg Grablander</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>970-897-2200</u>					
Study Area Code of Reporting Carrier	<u>462194</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH PARK TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>David Shipley</b>				Digitally signed by David Shipley DN:cn=David Shipley,email=dshipley@usch.com,O=south park telephone company,l=Colorado City CO 81019-0166, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>David Shipley</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>719-676-4151</u>					
Study Area Code of Reporting Carrier	<u>462195</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PEETZ COOP. TEL. CO.</u>					
Signature of authorized officer or employee <b>Kathy Glassburn</b>				Digitally signed by Kathy Glassburn DN:cn=Kathy Glassburn,email=kathy@peetzplace.com,O=peetz coop. tel. co.,l=Peetz CO 80747, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Kathy Glassburn</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>970-334-2220</u>					
Study Area Code of Reporting Carrier	<u>462196</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PHILLIPS COUNTY TEL. CO.</u>					
Signature of authorized officer or employee <b>Vincent Kropp</b>				Digitally signed by Vincent Kropp DN:cn=Vincent Kropp,email=vince.kropp@pctelcom.org,O=phillips county tel. co.,l=Holyoke CO 80734, Date:3/23/2018 Date: <u>3/23/2018</u>	
Printed name of authorized officer or employee: <u>Vincent Kropp</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>970-854-2201</u>					
Study Area Code of Reporting Carrier	<u>462197</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PLAINS COOPERATIVE TEL. ASSOC. INC.</u>					
Signature of authorized officer or employee <b>Ronny Puckett</b>				Digitally signed by Ronny Puckett DN:cn=Ronny Puckett,email=ronnypuckett@plainstel.com,O=plains cooperative tel. assoc. inc.,l=Joes CO 80822, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Ronny Puckett</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>970-358-4211</u>					
Study Area Code of Reporting Carrier	<u>462199</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ROGGEN TELEPHONE COOPERATIVE CO.</u>					
Signature of authorized officer or employee <b>Peggy Manino</b>				Digitally signed by Peggy Manino DN:cn=Peggy Manino,email=pmanino@rtebb.net,O=roggen telephone cooperative co.,l=Roggen CO 80652-0100, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Peggy Manino</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>303-849-5260</u>					
Study Area Code of Reporting Carrier	<u>462202</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE RYE TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>David Shipley</b>				Digitally signed by David Shipley DN:cn=David Shipley,email=dshipley@ghvalley.net,O=the rye telephone company inc.,l=Colorado City CO 81019-0166, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>David Shipley</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>719-676-3131</u>					
Study Area Code of Reporting Carrier	<u>462203</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STONEHAM COOPERATIVE TEL. CO.</u>					
Signature of authorized officer or employee <b>Taya Northrup</b>				Digitally signed by Taya Northrup DN:cn=Taya Northrup,email=stoneham.telephone@yahoo.com,O=stoneham cooperative tel. co.,l=Stoneham CO 80754 Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Taya Northrup</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>970-735-2251</u>					
Study Area Code of Reporting Carrier	<u>462206</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WIGGINS TEL. ASSOC.</u>					
Signature of authorized officer or employee <u>Terry Hendrickson</u>				Digitally signed by Terry Hendrickson DN:cn=Terry Hendrickson,email=terry@wigginstel.com,O=wiggins tel. assoc.,l=Wiggins CO 80654-0690, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Terry Hendrickson</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>970-483-7343</u>					
Study Area Code of Reporting Carrier	<u>462209</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WILLARD TEL. CO.</u>					
Signature of authorized officer or employee <b>Aimee Dollerschell</b>				Digitally signed by Aimee Dollerschell DN:cn=Aimee Dollerschell,email=adollerschell@willardtell.com,O=willard tel. co.,l=Stoneham CO 80754, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Aimee Dollerschell</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>970-228-4571</u>					
Study Area Code of Reporting Carrier	<u>462210</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALBION TEL. CO. D/B/A ATC COMMUNICATIONS</u>					
Signature of authorized officer or employe <b>Rich Redman</b>				Digitally signed by Rich Redman DN:cn=Rich Redman,email=rich@atcnet.net,O=albion tel. co. d/b/a atc communications,j=Albion ID 83311, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Rich Redman</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>208-673-5335</u>					
Study Area Code of Reporting Carrier	<u>472213</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CUSTER TEL. COOPERATIVE INC.</u>					
Signature of authorized officer or employee <b>Dennis Thornock</b>				Digitally signed by Dennis Thornock DN:cn=Dennis Thornock,email=dennis@custertel.net,O=custer tel. cooperative inc.,l=Challis ID 83226, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Dennis Thornock</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>208-879-2281</u>					
Study Area Code of Reporting Carrier	<u>472218</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FILER MUTUAL TELEPHONE COMPANY - ID</u>					
Signature of authorized officer or employee <b>Bob Kraut</b>				Digitally signed by Bob Kraut DN:cn=Bob Kraut,email=bobk@fildtel.com,O=filer mutual telephone company - id,j=Filer ID 83328-0089, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Bob Kraut</u>					
Title or position of authorized officer or employee: <u>CFO/Controller</u>					
Telephone number of authorized officer or employee: <u>208-326-4330</u>					
Study Area Code of Reporting Carrier	<u>472220</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FARMERS MUTUAL TEL CO LTD. - ID</u>					
Signature of authorized officer or employee <b>Daniel Greig</b>				Digitally signed by Daniel Greig DN:cn=Daniel Greig,email=dan@fmtc.com,O=farmers mutual tel co ltd. - id,1=Fruitland ID 83619, Date:3/26/2018 Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Daniel Greig</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>208-452-3100</u>					
Study Area Code of Reporting Carrier	<u>472221</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MIDVALE TEL. EXCH. INC.</u>					
Signature of authorized officer or employee <u>John Stuart</u>				<small>Digitally signed by John Stuart DN:cn=John Stuart,email=john.stuart@mtcom.com,O=midvale tel. exch. inc.,l=Midvale ID 83645, Date:3/22/2018</small> Date: <u>3/22/2018</u>	
Printed name of authorized officer or employee: <u>John Stuart</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>208-355-2211</u>					
Study Area Code of Reporting Carrier	<u>472226</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DIRECT COMMUNICATIONS ROCKLAND, INC.</u>					
Signature of authorized officer or employee <u>Leonard May</u>				Digitally signed by Leonard May DN:cn=Leonard May,email=leonard@directcom.com,O=direct communications rockland, inc.,l=Rockland ID 83271, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Leonard May</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>208-548-2345</u>					
Study Area Code of Reporting Carrier	<u>472232</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

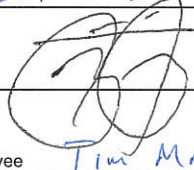
**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier

DIRECT COMMUNICATIONS ROCKLAND

Signature of authorized officer or employee



Date

4 Oct 2018

Printed name of authorized officer or employee

Tim Mori

Title or position of authorized officer or employee

General Manager

Telephone number of authorized officer or employee: ( 208 ) 548 - 2345 , ext.

Study Area Code of Reporting Carrier

472232

Filing Due Date for this form (mm/dd/yyyy)

October 2018

Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>COLUMBINE TEL. CO. DBA SILVER STAR COMM.</u>					
Signature of authorized officer or employee		<u>Jefferson England</u> <small>Digitally signed by Jefferson England DN: cn=Jefferson England, email=jengland@silverstar.net, O=columbine tel. co. dba silver star comm. l=Freedom WY 83120.</small>		Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Jefferson England</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>307-883-6675</u>					
Study Area Code of Reporting Carrier	<u>472295</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>INTERBEL TEL. COOPERATIVE INC.</u>					
Signature of authorized officer or employe <b>Virginia Henke</b>				Digitally signed by Virginia Henke DN:cn=Virginia Henke,email=jhenke@interbel.com,O=interbel tel. cooperative inc.,l=Eureka MT 59917, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Virginia Henke</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>406-889-3311</u>					
Study Area Code of Reporting Carrier	<u>482242</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEMONT TELEPHONE COOP.- MONTANA</u>					
Signature of authorized officer or employee <b>Remi Sun</b>				Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=nemont telephone coop.- montana,l=Scobey MT 59263-0600, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Remi Sun</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>406-783-2358</u>					
Study Area Code of Reporting Carrier	<u>482247</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTHERN TEL. COOP INC.- MT</u>					
Signature of authorized officer or employee <b>Rick Neva</b>				Digitally signed by Rick Neva DN:cn=Rick Neva,email=rneva@northermtel.net,O=northern tel. coop inc.- mt,l=Sunburst MT 59482-0190, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Rick Neva</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>406-937-2114</u>					
Study Area Code of Reporting Carrier	<u>482248</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PROJECT TEL. CO.</u>					
Signature of authorized officer or employe <u>Remi Sun</u>				Digitally signed by Remi Sun DN:cn=Remi Sun,email=remi.sun@nemont.coop,O=project tel. co.,l=Scobey MT 59263-0600, Date:3/27/2018 Date: <u>3/27/2018</u>	
Printed name of authorized officer or employee: <u>Remi Sun</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>406-783-2358</u>					
Study Area Code of Reporting Carrier	<u>482250</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>3-RIVERS TEL. COOPERATIVE INC.</u>					
Signature of authorized officer or employee <b>David Massey</b>				Digitally signed by David Massey DN:cn=David Massey,email=david.massey@3rivers.coop,O=3-rivers tel. cooperative inc.,l=Fairfield MT 59436, Date:3/28/2018	
Date: <u>3/28/2018</u>					
Printed name of authorized officer or employee: <u>David Massey</u>					
Title or position of authorized officer or employee: <u>CFO/Director of Finance</u>					
Telephone number of authorized officer or employee: <u>406-467-4402</u>					
Study Area Code of Reporting Carrier	<u>482255</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRIANGLE TEL. COOPERATIVE ASSN. INC.</u>					
Signature of authorized officer or employee <b>Mark Majeres</b>				Digitally signed by Mark Majeres DN:cn=Mark Majeres,email=mmajeres@tsttriangle.net,O=triangle tel. cooperative assn. inc.,l=Havre MT 59501, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Mark Majeres</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>406-394-2000</u>					
Study Area Code of Reporting Carrier	<u>482257</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRIANGLE TELEPHONE COOPERATIVE ASSN.,INC.-CMC</u>					
Signature of authorized officer or employee <b>Mark Majeres</b>				Digitally signed by Mark Majeres DN:cn=Mark Majeres,email=mmajeres@ttriangle.net,O=triangle telephone cooperative assn.,inc.-cmc,l=Havre MT 59501 Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Mark Majeres</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>406-394-2000</u>					
Study Area Code of Reporting Carrier	<u>483310</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MESCALERO APACHE TELECOM, INC.</u>					
Signature of authorized officer or employee <b>Joan Johnson</b>				Digitally signed by Joan Johnson DN:cn=Joan Johnson,email=jjohnson@matinetworks.net,O=mescalero apache telecom, inc.,l=Mescalero NM 88340, Date:3/20/2018	
Date: <u>3/20/2018</u>					
Printed name of authorized officer or employee: <u>Joan Johnson</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>575-464-4039</u>					
Study Area Code of Reporting Carrier	<u>491231</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

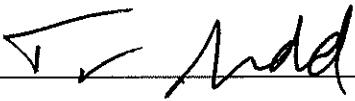
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DELL TELEPHONE CO-OP. INC.-NM</u>					
Signature of authorized officer or employee <b>Marcy Guillen</b>				Digitally signed by Marcy Guillen DN:cn=Marcy Guillen,email=mguillen@delltelco.com,O=dell telephone co-op. inc.-nm,l=Dell City TX 79837, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Marcy Guillen</u>					
Title or position of authorized officer or employee: <u>Office Manager</u>					
Telephone number of authorized officer or employee: <u>915-964-2352</u>					
Study Area Code of Reporting Carrier	<u>492066</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>VALLEY TELEPHONE COOPERATIVE, INC. NM</u>			
Signature of authorized officer or employee 			Date <u>3/23/18</u>
Printed name of authorized officer or employee <u>TROY JUDD</u>			
Title or position of authorized officer or employee <u>CHIEF FINANCIAL OFFICER</u>			
Telephone number of authorized officer or employee: ( <u>520</u> ) <u>384</u> - <u>8934</u> , ext.			
Study Area Code of Reporting Carrier	<u>492176</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BACA VALLEY TEL. CO.</u>					
Signature of authorized officer or employee <b>Paul Briesh</b>				Digitally signed by Paul Briesh DN:cn=Paul Briesh,email=paulbvt@bacavalley.com,O=bacavalley tel. co.,l=Des Moines NM 88418, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Paul Briesh</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>575-278-2101</u>					
Study Area Code of Reporting Carrier	<u>492259</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>E.N.M.R. TEL COOP. INC.-NM</u>					
Signature of authorized officer or employe <b>Alan Herman</b>				Digitally signed by Alan Herman DN:cn=Alan Herman,email=alanh@plateautel.com,O=e.n.m.r. tel coop. inc.-nm,lc=Clovis NM 88101, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Alan Herman</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>575-389-4212</u>					
Study Area Code of Reporting Carrier	<u>492262</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LA JICARITA RURAL TEL. COOP. INC.</u>					
Signature of authorized officer or employee <b>Danny Gray</b>				Digitally signed by Danny Gray DN:cn=Danny Gray,email=dgray@lajicarita.com,O=la jicarita rural tel. coop. inc.,l=Mora NM 87732-0269, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Danny Gray</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>575-387-2216</u>					
Study Area Code of Reporting Carrier	<u>492263</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>LEACO RURAL TEL. COOPERATIVE INC.</u>					
Signature of authorized officer or employee <b>Dale Snider</b>				<small>Digitally signed by Dale Snider DN:cn=Dale Snider,email=dsnider@leaco.org,O=leaco rural tel. cooperative inc.,l=Hobbs NM 88240, Date:3/25/2018</small> Date: <u>3/25/2018</u>	
Printed name of authorized officer or employee: <u>Dale Snider</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>575-433-4301</u>					
Study Area Code of Reporting Carrier	<u>492264</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund - Broadband Loop Support Mechanism projected data; and, to the best of my knowledge, the broadband-only data provided to NECA subsequent to the Form 508 filing with USAC are accurate.

Name of Reporting Carrier **Leaco Rural Telephone Cooperative, Inc.**

Signature of authorized officer or employee 	Date <b>08/06/2018</b>
--	------------------------

Printed name of authorized officer or employee **Sid Applin**

Title or position of authorized officer or employee **CEO**

Telephone number of authorized officer or employee: ( **575** ) **433** - **4303** , ext.

Study Area Code of Reporting Carrier	<b>492264</b>		Filing Due Date for this form (mm/dd/yyyy)	<b>August 7, 2018</b>	
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Statements and information submitted with this form will be incorporated in filings before the Federal Communications Commission. Persons willfully making false statements to the Commission 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.

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>Tularosa Basin Telephone Company, Inc.</u>					
Signature of authorized officer or employee <b>Joshua Beug</b>				Digitally signed by Joshua Beug DN:cn=Joshua Beug,email=jbeug@tbt.net,O=tularosa basin telephone company, inc.,l=Tularosa NM 88352, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Joshua Beug</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>575-585-0125</u>					
Study Area Code of Reporting Carrier	<u>492265</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PENASCO VALLEY TEL. COOPERATIVE INC.</u>					
Signature of authorized officer or employee <b>Ian Brumana</b>				Digitally signed by Ian Brumana DN:cn=Ian Brumana,email=ibrumana@pvt.com,O=penasco valley tel. cooperative inc.,l=Artesia NM 88210, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Ian Brumana</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>575-748-1241</u>					
Study Area Code of Reporting Carrier	<u>492270</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SACRED WIND COMMUNICATIONS, INC.</u>					
Signature of authorized officer or employee <b>Terry Clark</b>				Digitally signed by Terry Clark DN:cn=Terry Clark,email=tclark@sacred-wind.com,O=sacred wind communications, inc.,l=Albuquerque NM 87109, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Terry Clark</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>505-908-2661</u>					
Study Area Code of Reporting Carrier	<u>493403</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DIRECT COMMUNICATIONS CEDAR VALLEY, LLC</u>					
Signature of authorized officer or employee <b>Kip Wilson</b>				Digitally signed by Kip Wilson DN:cn=Kip Wilson,email=kip@directcom.com,O=direct communications cedar valley, llc,l=Rockland ID 83271 Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Kip Wilson</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>208-548-2345</u>					
Study Area Code of Reporting Carrier	<u>500758</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>EMERY TELEPHONE dba EMERY TELCOM</u>					
Signature of authorized officer or employee <u>Jake Frandsen</u>				Digitally signed by Jake Frandsen DN:cn=Jake Frandsen,email=jfrandsen@emerytelcom.com,O=emery telephone dba emery telcom,l=Orangeville UT 84537 Date:3/19/2018	
Date: <u>3/19/2018</u>					
Printed name of authorized officer or employee: <u>Jake Frandsen</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>435-748-2223</u>					
Study Area Code of Reporting Carrier	<u>502278</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MANTI TELEPHONE COMPANY</u>					
Signature of authorized officer or employe <b>Tami Hansen</b>				Digitally signed by Tami Hansen DN:cn=Tami Hansen,email=tami@mail.manti.com,O=manti telephone company,l=Manti UT 84642, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Tami Hansen</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>435-835-3391</u>					
Study Area Code of Reporting Carrier	<u>502282</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BEEHIVE TELEPHONE CO., INC., UT</u>					
Signature of authorized officer or employee <b>Jacob Warner</b>				Digitally signed by Jacob Warner DN:cn=Jacob Warner,email=jakew@beehive.net,O=beehive telephone co., inc., ut,l=Lake Point UT 84074, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jacob Warner</u>					
Title or position of authorized officer or employee: <u>President/General Manager</u>					
Telephone number of authorized officer or employee: <u>435-837-6000</u>					
Study Area Code of Reporting Carrier	<u>502284</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SOUTH CENTRAL UTAH TEL. ASSN. INC.</u>					
Signature of authorized officer or employee <b>Stephen Jantz</b>				Digitally signed by Stephen Jantz DN:cn=Stephen Jantz,email=stephenj@socen.com,O=south central utah tel. assn. inc.,l=Kanab UT 84741, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Stephen Jantz</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>435-644-0220</u>					
Study Area Code of Reporting Carrier	<u>502286</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALL WEST COMMUNICATIONS-UT</u>					
Signature of authorized officer or employee <u>Jenny Prescott</u>				Digitally signed by Jenny Prescott DN:cn=Jenny Prescott,email=jenny.prescott@allwest.com,O=all west communications-ut,l=Kamas UT 84036, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Jenny Prescott</u>					
Title or position of authorized officer or employee: <u>VP Customer Service &amp; Finance</u>					
Telephone number of authorized officer or employee: <u>435-783-4913</u>					
Study Area Code of Reporting Carrier	<u>502288</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>RANGE TEL. COOPERATIVE INC.-WY</u>					
Signature of authorized officer or employee <b>Gail Rainey</b>				Digitally signed by Gail Rainey DN:cn=Gail Rainey,email=gail.rainey@rangetel.coop,O=range tel. cooperative inc.-wy, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Gail Rainey</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>406-347-2859</u>					
Study Area Code of Reporting Carrier	<u>512251</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ALL WEST COMMUNICATIONS-WY</u>					
Signature of authorized officer or employee <u>Jenny Prescott</u>				Digitally signed by Jenny Prescott DN:cn=Jenny Prescott,email=jenny.prescott@allwest.com,O=all west communications-wy,l=Kamas UT 84036, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Jenny Prescott</u>					
Title or position of authorized officer or employee: <u>VP Customer Service &amp; Finance</u>					
Telephone number of authorized officer or employee: <u>435-783-4913</u>					
Study Area Code of Reporting Carrier	<u>512290</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <b>National Exchange Carrier Association, Inc.</b>			
Name of Reporting Carrier <b>Dubois Telephone Exchange, Inc.</b>			
Signature of authorized officer or employee 			Date <b>03/26/2018</b>
Printed name of authorized officer or employee <b>Michael J. Kenney</b>			
Title or position of authorized officer or employee <b>Vice President/General Manager</b>			
Telephone number of authorized officer or employee: ( 307 ) 455 - 2341 , ext.			
Study Area Code of Reporting Carrier	<b>512291</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2018</b>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SILVER STAR TEL. CO.- WY</u>					
Signature of authorized officer or employee <u>Jefferson England</u>				Digitally signed by Jefferson England DN: cn=Jefferson England, email=jengland@silverstar.net, O=silver star tel. co - wy l=Freedom WY 83120, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Jefferson England</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>307-883-6675</u>					
Study Area Code of Reporting Carrier	<u>512295</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TRI-COUNTY TEL. ASSN. INC.-WY</u>					
Signature of authorized officer or employee <b>Steven Harper</b>				Digitally signed by Steven Harper DN:cn=Steven Harper,email=steve.harper@tctstaff.com,O=tri-county tel. assn. inc.-wy,l=Cody WY 82414, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Steven Harper</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>307-568-2427</u>					
Study Area Code of Reporting Carrier	<u>512296</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WESTGATE COMMUNICATIONS LLC dba WEAVTEL</u>					
Signature of authorized officer or employee <b>Richard Weaver</b>				Digitally signed by Richard Weaver DN:cn=Richard Weaver,email=rick@weavnet.com,O=westgate communications llc dba weavtel,l=Chelan WA 98816, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Richard Weaver</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>509-682-5556</u>					
Study Area Code of Reporting Carrier	<u>520580</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SKYLINE TELECOM COMPANY</u>					
Signature of authorized officer or employee <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=dkluser@ortelco.net,O=skyline telecom company,l=Mt. Vernon OR 97865-0609, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Delinda Kluser</u>					
Title or position of authorized officer or employee: <u>Vice President, Manager</u>					
Telephone number of authorized officer or employee: <u>541-932-4411</u>					
Study Area Code of Reporting Carrier	<u>520581</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HAT ISLAND TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Chris Burns</b>				Digitally signed by Chris Burns DN:cn=Chris Burns,email=chris.burns@whidbeytel.com,O=hat island telephone company,l=Langley WA 98260, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Chris Burns</u>					
Title or position of authorized officer or employee: <u>Chief Operating Officer</u>					
Telephone number of authorized officer or employee: <u>360-321-0036</u>					
Study Area Code of Reporting Carrier	<u>522417</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HOOD CANAL TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Mike Oblizalo</b>				Digitally signed by Mike Oblizalo DN:cn=Mike Oblizalo,email=mikeo@hcc.net,O=hood canal telephone company,l=Union WA 98592, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Mike Oblizalo</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>360-898-3963</u>					
Study Area Code of Reporting Carrier	<u>522419</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>INLAND TELEPHONE COMPANY - WA</u>					
Signature of authorized officer or employee <b>James Brooks</b>				Digitally signed by James Brooks DN:cn=James Brooks,email=jbrooks@inlandnet.com,O=inland telephone company - wa,l=Roslyn WA 98941, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>James Brooks</u>					
Title or position of authorized officer or employee: <u>Treasurer/Controller/Reg. Manager</u>					
Telephone number of authorized officer or employee: <u>509-649-2211</u>					
Study Area Code of Reporting Carrier	<u>522423</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KALAMA TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Rick Vitzthum</b>				Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=kalama telephone company,l=Tenino WA 98589, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Rick Vitzthum</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>360-264-3155</u>					
Study Area Code of Reporting Carrier	<u>522426</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MASHELL TELECOM INC.</u>					
Signature of authorized officer or employee <b>Danielle Clausen</b>				Digitally signed by Danielle Clausen DN:cn=Danielle Clausen,email=danielle.clausen@rainierconnect.net,O=mashell telecom inc.,l=Eatonville WA 98328, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Danielle Clausen</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>360-832-4130</u>					
Study Area Code of Reporting Carrier	<u>522431</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ST. JOHN TELEPHONE, INC.</u>					
Signature of authorized officer or employee <b>Eric Trump</b>				Digitally signed by Eric Trump DN:cn=Eric Trump,email=eric@stjohncable.com,O=st. john telephone, inc.,I=St. John WA 99171, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Eric Trump</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>509-648-3322</u>					
Study Area Code of Reporting Carrier	<u>522442</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TENINO TEL. CO.</u>					
Signature of authorized officer or employe <b>Rick Vitzthum</b>				Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=tenino tel. co.,l=Tenino WA 98589, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Rick Vitzthum</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>360-264-3155</u>					
Study Area Code of Reporting Carrier	<u>522446</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TOLEDO TELEPHONE COMPANY INC.</u>					
Signature of authorized officer or employee <b>Philip Cappalonga</b>				Digitally signed by Philip Cappalonga DN:cn=Philip Cappalonga,email=phil@toledotel.com,O=toledo telephone company inc.,l=Toledo WA 98591, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Philip Cappalonga</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>360-864-2004</u>					
Study Area Code of Reporting Carrier	<u>522447</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WESTERN WAHAKIUM COUNTY TEL COMPANY</u>					
Signature of authorized officer or employee		<b>Carol Larson</b> <small>Digitally signed by Carol Larson DN:cn=Carol Larson,email=clarson@wwest.net,O=western wahkiakum county tel company,l=Rosburg WA 98643 Date:3/26/2018</small>		Date: <u>3/26/2018</u>	
Printed name of authorized officer or employee: <u>Carol Larson</u>					
Title or position of authorized officer or employee: <u>Industry Relations Manager</u>					
Telephone number of authorized officer or employee: <u>360-465-2211</u>					
Study Area Code of Reporting Carrier	<u>522451</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>WHIDBEY TEL. CO.</u>					
Signature of authorized officer or employee <b>Chris Burns</b>				Digitally signed by Chris Burns DN:cn=Chris Burns,email=chris.burns@whidbeytel.com,O=whidbey tel. co.,l=Langley WA 98260, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Chris Burns</u>					
Title or position of authorized officer or employee: <u>Chief Operating Officer</u>					
Telephone number of authorized officer or employee: <u>360-321-0036</u>					
Study Area Code of Reporting Carrier	<u>522452</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>BEAVER CREEK COOPERATIVE TEL. CO.</u>					
Signature of authorized officer or employe <b>Paul Hauer</b>				Digitally signed by Paul Hauer DN:cn=Paul Hauer,email=phauer@cbsoregon.com,O=beaver creek cooperative tel. co.,l=Mt. Angel OR 97362, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Paul Hauer</u>					
Title or position of authorized officer or employee: <u>CEO/President</u>					
Telephone number of authorized officer or employee: <u>503-845-4433</u>					
Study Area Code of Reporting Carrier	<u>532359</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CANBY TELEPHONE ASSOCIATION</u>					
Signature of authorized officer or employee <b>Paul Hauer</b>				Digitally signed by Paul Hauer DN:cn=Paul Hauer,email=phauer@cbsoregon.com,O=canby telephone association,l=Mt. Angel OR 97362, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Paul Hauer</u>					
Title or position of authorized officer or employee: <u>CEO/President</u>					
Telephone number of authorized officer or employee: <u>503-632-6314</u>					
Study Area Code of Reporting Carrier	<u>532362</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CLEAR CREEK MUTUAL TELEPHONE CO.</u>					
Signature of authorized officer or employee <b>Mitchell Moore</b>				Digitally signed by Mitchell Moore DN:cn=Mitchell Moore,email=mmoore@clearcreek.coop,O=clear creek mutual telephone co.,l=Oregon City OR 97045, Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Mitchell Moore</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>503-631-2101</u>					
Study Area Code of Reporting Carrier	<u>532363</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Colton Telephone Company</u>			
Signature of authorized officer or employee <u>Gen Fraijo</u>			Date <u>3-27-18</u>
Printed name of authorized officer or employee <u>Gen Fraijo</u>			
Title or position of authorized officer or employee <u>GM / COO</u>			
Telephone number of authorized officer or employee: <u>(503) 824-3211</u> , ext.			
Study Area Code of Reporting Carrier	<u>532364</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
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.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>EAGLE TELEPHONE SYSTEM INC.</u>					
Signature of authorized officer or employee <b>Mike Lattin</b>				Digitally signed by Mike Lattin DN:cn=Mike Lattin,email=eagle@eagletelephone.com,O=eagle telephone system inc.,l=Richland OR 97870, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Mike Lattin</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>541-893-6111</u>					
Study Area Code of Reporting Carrier	<u>532369</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>GERVAIS TELEPHONE COMPANY DBA DATAVISION</u>					
Signature of authorized officer or employee <b>Renee Willer</b>				Digitally signed by Renee Willer DN:cn=Renee Willer,email=rwiller@datavision.coop,O=gervais telephone company dba datavision,l=Gervais OR 97026 Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Renee Willer</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>503-792-5500</u>					
Study Area Code of Reporting Carrier	<u>532373</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HOME TELEPHONE COMPANY</u>					
Signature of authorized officer or employe <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=dkluser@ortelco.net,O=home telephone company,l=Mt. Vernon OR 97865-0609, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Delinda Kluser</u>					
Title or position of authorized officer or employee: <u>Vice President, Manager</u>					
Telephone number of authorized officer or employee: <u>541-932-4411</u>					
Study Area Code of Reporting Carrier	<u>532377</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MOLALLA TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Terry Simms</b>				Digitally signed by Terry Simms DN:cn=Terry Simms,email=TSimms@molalla.com,O=molalla telephone company,l= , Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Terry Simms</u>					
Title or position of authorized officer or employee: <u>Vice President/CFO</u>					
Telephone number of authorized officer or employee: <u>503-829-1122</u>					
Study Area Code of Reporting Carrier	<u>532383</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>MONITOR COOPERATIVE TELEPHONE CO</u>					
Signature of authorized officer or employee <u>Geri Fraijo</u>				Digitally signed by Geri Fraijo DN:cn=Geri Fraijo,email=gerif@monitorcoop.net,O=monitor cooperative telephone co,lc=Woodburn OR 97071, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Geri Fraijo</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>503-634-2266</u>					
Study Area Code of Reporting Carrier	<u>532384</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CANBY TELEPHONE ASSOCIATION (MT. ANGEL)</u>					
Signature of authorized officer or employee <b>Paul Hauer</b>				Digitally signed by Paul Hauer DN:cn=Paul Hauer,email=phauer@cbsoregon.com,O=canby telephone association (mt. angel),I=Mt. Angel OR 97362 Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Paul Hauer</u>					
Title or position of authorized officer or employee: <u>CEO/President</u>					
Telephone number of authorized officer or employee: <u>503-632-6314</u>					
Study Area Code of Reporting Carrier	<u>532386</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NEHALEM TELECOMMUNICATIONS, INC. DBA NEHALEM</u>					
Signature of authorized officer or employee <b>Beverly Arrington</b>				Digitally signed by Beverly Arrington DN:cn=Beverly Arrington,email=beverly.arrington@ruraltel.org,O=nehalem telecommunications, inc. dba nehalem,/=Glenns Ferry ID 83623 Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Beverly Arrington</u>					
Title or position of authorized officer or employee: <u>Senior Accounting Specialist</u>					
Telephone number of authorized officer or employee: <u>208-366-2614</u>					
Study Area Code of Reporting Carrier	<u>532387</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
APPENDIX C  
EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>NORTH STATE TELEPHONE COMPANY - OR</u>					
Signature of authorized officer or employee <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=dkluser@ortelco.net,O=north state telephone company - or,l=Mt. Vernon OR 97865-0609, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Delinda Kluser</u>					
Title or position of authorized officer or employee: <u>Vice President, Manager</u>					
Telephone number of authorized officer or employee: <u>541-932-4411</u>					
Study Area Code of Reporting Carrier	<u>532388</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OREGON TELEPHONE CORPORATION</u>					
Signature of authorized officer or employe <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=dkluser@ortelco.net,O=oregon telephone corporation,l=Mt. Vernon OR 97865-0609, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Delinda Kluser</u>					
Title or position of authorized officer or employee: <u>Vice President, Manager</u>					
Telephone number of authorized officer or employee: <u>541-932-4411</u>					
Study Area Code of Reporting Carrier	<u>532389</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OREGON-IDAHO UTILITIES, INC.</u>					
Signature of authorized officer or employee <u>Justin Perez</u>				Digitally signed by Justin Perez DN:cn=Justin Perez,email=justin.perez@oiutelecom.net,O=oregon-idaho utilities, inc.,l=Nampa ID 83651, Date:3/22/2018	
Date: <u>3/22/2018</u>					
Printed name of authorized officer or employee: <u>Justin Perez</u>					
Title or position of authorized officer or employee: <u>Controller / Corporate Secretary</u>					
Telephone number of authorized officer or employee: <u>208-461-7802</u>					
Study Area Code of Reporting Carrier	<u>532390</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PEOPLES TELEPHONE CO. - OR</u>					
Signature of authorized officer or employee <b>Curt Thornton</b>				Digitally signed by Curt Thornton DN:cn=Curt Thornton,email=curtt@wvi.com,O=peoples telephone co. - or,lc=Stayton OR 97383, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Curt Thornton</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>503-769-2121</u>					
Study Area Code of Reporting Carrier	<u>532391</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>PINE TELEPHONE SYSTEM INC. - OR</u>					
Signature of authorized officer or employe <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=dkluser@ortelco.net,O=pine telephone system inc. - or,l=Mt. Vernon OR 97865-0609, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Delinda Kluser</u>					
Title or position of authorized officer or employee: <u>Vice President, Manager</u>					
Telephone number of authorized officer or employee: <u>541-932-4411</u>					
Study Area Code of Reporting Carrier	<u>532392</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
VOLUME 1  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>ST. PAUL COOP. TEL. ASSN.</u>					
Signature of authorized officer or employee <b>Nick Schneider</b>				Digitally signed by Nick Schneider DN:cn=Nick Schneider,email=nick@stpaultel.com,O=st. paul coop. tel. assn.,l=St. Paul OR 97137, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Nick Schneider</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>503-633-2111</u>					
Study Area Code of Reporting Carrier	<u>532396</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SCIO MUTUAL TEL. ASSOCIATION</u>					
Signature of authorized officer or employee <b>Thomas Barth</b>				Digitally signed by Thomas Barth DN:cn=Thomas Barth,email=tom.barth@smta.coop,O=scio mutual tel. association,/=Scio OR 97374, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Thomas Barth</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>503-394-3366</u>					
Study Area Code of Reporting Carrier	<u>532397</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>STAYTON COOP. TEL CO</u>					
Signature of authorized officer or employee <b>Curt Thornton</b>				Digitally signed by Curt Thornton DN:cn=Curt Thornton,email=curtt@wvi.com,O=stayton coop. tel co,l=Stayton OR 97383, Date:3/19/2018 Date: <u>3/19/2018</u>	
Printed name of authorized officer or employee: <u>Curt Thornton</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>503-769-2121</u>					
Study Area Code of Reporting Carrier	<u>532399</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>OREGON TELEPHONE CORPORATION (MTE-OREGON)</u>					
Signature of authorized officer or employee <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=dkluser@ortelco.net,O=oregon telephone corporation (mte-oregon),l=Mt. Vernon OR 97865-0609, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Delinda Kluser</u>					
Title or position of authorized officer or employee: <u>Vice President, Manager</u>					
Telephone number of authorized officer or employee: <u>541-932-4411</u>					
Study Area Code of Reporting Carrier	<u>533336</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
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FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CALAVERAS TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>Rose Cullen</u>				Digitally signed by Rose Cullen DN:cn=Rose Cullen,email=rose.cullen@caltel.com,O=calaveras telephone company,l= , Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Rose Cullen</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>209-785-2211</u>					
Study Area Code of Reporting Carrier	<u>542301</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>DUCOR TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <u>Jenifer Vellucci</u>				Digitally signed by Jenifer Vellucci DN:cn=Jenifer Vellucci,email=jvellucci@ducortelco.com,O=ducor telephone company,l=Ducor CA 93218, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Jenifer Vellucci</u>					
Title or position of authorized officer or employee: <u>CFO/AGM</u>					
Telephone number of authorized officer or employee: <u>602-432-3981</u>					
Study Area Code of Reporting Carrier	<u>542313</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FORESTHILL TELEPHONE COMPANY DBA SEBASTIAN</u>					
Signature of authorized officer or employee <b>David Clark</b>				<small>Digitally signed by David Clark DN:cn=David Clark,email=dclark@sebastiancorp.com,O=foresthill telephone company dba sebastian,j=Kerman CA 93630 Date:3/27/2018</small>	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>David Clark</u>					
Title or position of authorized officer or employee: <u>Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>559-846-4892</u>					
Study Area Code of Reporting Carrier	<u>542318</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
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FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>KERMAN TELEPHONE COMPANY DBA SEBASTIAN</u>					
Signature of authorized officer or employee <b>David Clark</b>				<small>Digitally signed by David Clark DN:cn=David Clark,email=dclark@sebastiancorp.com,O=kerman telephone company dba sebastian,j=Kerman CA 93630 Date:3/27/2018</small>	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>David Clark</u>					
Title or position of authorized officer or employee: <u>Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>559-846-4892</u>					
Study Area Code of Reporting Carrier	<u>542324</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE PONDEROSA TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Dan Douglas</b>				Digitally signed by Dan Douglas DN:cn=Dan Douglas,email=dand@ponderosatel.com,O=the ponderosa telephone company,l=O'Neals CA 93645, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Dan Douglas</u>					
Title or position of authorized officer or employee: <u>Financial Director</u>					
Telephone number of authorized officer or employee: <u>559-868-6395</u>					
Study Area Code of Reporting Carrier	<u>542332</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>SIERRA TELEPHONE COMPANY, INC.</u>					
Signature of authorized officer or employee <b>Monika Brandle</b>				Digitally signed by Monika Brandle DN:cn=Monika Brandle,email=monikab@stcg.net,O=sierra telephone company, inc.,l=Oakhurst CA 93644, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>Monika Brandle</u>					
Title or position of authorized officer or employee: <u>Regulatory Manager</u>					
Telephone number of authorized officer or employee: <u>559-642-1380</u>					
Study Area Code of Reporting Carrier	<u>542338</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>THE SISKIYOU TELEPHONE CO.</u>					
Signature of authorized officer or employee <u>James Lowers</u>				Digitally signed by James Lowers DN:cn=James Lowers,email=jtlowers@sisqtel.net,O=the siskiyou telephone co.,l=Etna CA 96027-0157, Date:3/26/2018	
Date: <u>3/26/2018</u>					
Printed name of authorized officer or employee: <u>James Lowers</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>530-467-6171</u>					
Study Area Code of Reporting Carrier		<u>542339</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<b>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.</b>					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>VOLCANO TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Brenda Shepard</b>				Digitally signed by Brenda Shepard DN:cn=Brenda Shepard,email=brendas@volcanotel.com,O=volcano telephone company,l=Pine Grove CA 95665, Date:3/23/2018	
Date: <u>3/23/2018</u>					
Printed name of authorized officer or employee: <u>Brenda Shepard</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>209-296-1447</u>					
Study Area Code of Reporting Carrier	<u>542343</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>FILER MUTUAL TELEPHONE COMPANY - NV</u>					
Signature of authorized officer or employee <b>Bob Kraut</b>				Digitally signed by Bob Kraut DN:cn=Bob Kraut,email=bobk@fildtel.com,O=filer mutual telephone company - nv,l=Filer ID 83328-0089, Date:3/21/2018	
Date: <u>3/21/2018</u>					
Printed name of authorized officer or employee: <u>Bob Kraut</u>					
Title or position of authorized officer or employee: <u>CFO/Controller</u>					
Telephone number of authorized officer or employee: <u>208-326-4330</u>					
Study Area Code of Reporting Carrier	<u>552220</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>CHURCHILL COUNTY TEL. DBA CC COMMUNICATIONS</u>					
Signature of authorized officer or employee <b>Mark Feest</b>				Digitally signed by Mark Feest DN:cn=Mark Feest,email=mark.feest@cccomm.co,O=churchill county tel. dba cc communications,l=Fallon NV 89407 Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Mark Feest</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>775-423-7654</u>					
Study Area Code of Reporting Carrier	<u>552349</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>		
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0972  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>HUMBOLDT TELEPHONE COMPANY</u>					
Signature of authorized officer or employee <b>Justin Perez</b>				<div style="font-size: small;">Digitally signed by Justin Perez DN:cn=Justin Perez,email=justin.perez@oiutecom.net,O=humboldt telephone company,l=Nampa ID 83651, Date:3/22/2018</div> <div style="float: right;">Date: <u>3/22/2018</u></div>	
Printed name of authorized officer or employee: <u>Justin Perez</u>					
Title or position of authorized officer or employee: <u>Controller / Corporate Secretary</u>					
Telephone number of authorized officer or employee: <u>208-461-7802</u>					
Study Area Code of Reporting Carrier	<u>553304</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support**  
**Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
OMB Control No. 3060-0986

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>			
Name of Authorized Agent <u>National Exchange Carrier Association, Inc.</u>			
Name of Reporting Carrier <u>Sandwich Isles Communications, Inc.</u>			
Signature of authorized officer or employee 			Date <u>03/22/2018</u>
Printed name of authorized officer or employee <u>A. Tawarahara</u>			
Title or position of authorized officer or employee <u>Controller</u>			
Telephone number of authorized officer or employee: ( <u>808</u> ) <u>540</u> - <u>5775</u> , ext.			
Study Area Code of Reporting Carrier	<u>623021</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>
<p align="center">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.</p>			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>TELEGUAM HOLDINGS, LLC</u>					
Signature of authorized officer or employee <u>Joe Shinohara</u>				Digitally signed by Joe Shinohara DN:cn=Joe Shinohara,email=jshinohara@gta.net,O=teleguam holdings, llc,l=Tamuning GU 96913, Date:3/21/2018 Date: <u>3/21/2018</u>	
Printed name of authorized officer or employee: <u>Joe Shinohara</u>					
Title or position of authorized officer or employee: <u>VP of Finance &amp; Controller</u>					
Telephone number of authorized officer or employee: <u>671-644-1653</u>					
Study Area Code of Reporting Carrier	<u>663800</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

FCC Form 508  
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carriers Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer broadband-only loop and special access categories. 47 C.F.R. 54.903 (a)(3)(4).</p>					
Name of Authorized Agent : <u>National Exchange Carriers Association, Inc.</u>					
Name of Reporting Carrier: <u>AMERICAN SAMOA TELECOMMUNICATIONS AUTHORITY</u>					
Signature of authorized officer or employee <b>Chris Danielson</b>				Digitally signed by Chris Danielson DN:cn=Chris Danielson,email=chris.danielson@astca.net,O=american samoa telecommunications authority,lc= , Date:3/27/2018	
Date: <u>3/27/2018</u>					
Printed name of authorized officer or employee: <u>Chris Danielson</u>					
Title or position of authorized officer or employee: <u>Lead Accountant</u>					
Telephone number of authorized officer or employee: <u>684-633-1121</u>					
Study Area Code of Reporting Carrier	<u>673900</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2018</u>	
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.					