

# VOLUME 1

## APPENDIX D

### 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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>OXFORD WEST TEL CO</u>					
Signature of authorized officer or employee <u>Cindy Bryce</u>				Digitally signed by Cindy Bryce DN:cn=Cindy Bryce,email=cbryce@firstlight.net,O=oxford west tel co,l=Lewiston ME 04240-7418, Date:3/17/2020	Date: <u>3/17/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>OXFORD COUNTY TEL</u>					
Signature of authorized officer or employee <u>Cindy Bryce</u>				Digitally signed by Cindy Bryce DN:cn=Cindy Bryce,email=cbryce@firstlight.net,O=oxford county tel,l=Lewiston ME 04240-7418, Date:3/17/2020	
				Date: <u>3/17/2020</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>3/31/2020</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**

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


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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>UNITEL, INC.</u>					
Signature of authorized officer or employee <b>David Dubois</b>				<small>Digitally signed by David Dubois DN:cn=David Dubois,email=ddubois@unitel.me,O=unitel,inc.,l=Unity ME 04988, Date:3/17/2020</small> Date: <u>3/17/2020</u>	
Printed name of authorized officer or employee: <u>David Dubois</u>					
Title or position of authorized officer or employee: <u>CPA, Controller</u>					
Telephone number of authorized officer or employee: <u>207-948-3466</u>					
Study Area Code of Reporting Carrier	<u>100029</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **UniTel, Inc.**

Signature of authorized officer or employee  Date **12/03/2020**

Printed name of authorized officer or employee **James A. Carlson**

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

Telephone number of authorized officer or employee: ( **207** ) **948** - **9920** , ext.

Study Area Code of Reporting Carrier **100029**

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

December 2020

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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GRANITE STATE TEL</u>					
Signature of authorized officer or employee <b>Steven P. Schilling</b>				Digitally signed by Steven P. Schilling DN: cn=Steven P. Schilling, email=sschilling@gsc.tech, O=granite state tel.l=Weare NH 03281 Date: 3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Steven P. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DUNBARTON TEL CO</u>					
Signature of authorized officer or employee <b>David P. Montgomery</b>				<div style="font-size: small;">           Digitally signed by David P. Montgomery            DN: cn=David P.            Montgomery, email=duntelco@gsinet.net, O=dunbarton            tel.co, l=Dunbarton NH 03046, Date: 3/17/2020         </div>	
Printed name of authorized officer or employee: <u>David P. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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: 3/27/2020	
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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



**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>TOPSHAM TELEPHONE COMPANY, INC.</u>			
Signature of authorized officer or employee <u>Mark De Perrior</u>			Date <u>03/25/2020</u>
Printed name of authorized officer or employee <u>MARK DE PERRIOR</u>			
Title or position of authorized officer or employee <u>CONTROLLER</u>			
Telephone number of authorized officer or employee: <u>(315) 324-591</u> , ext.			
Study Area Code of Reporting Carrier <u>140068</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WAITSFIELD/FAYSTON</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, =Waitsfield VT 05673, Date:3/25/2020 Date: <u>3/25/2020</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>3/31/2020</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>					

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Name of Authorized Agent : <u>National Exchange Carrier Association, Inc.</u>					
Name of Reporting Carrier: <u>VERMONT TEL. CO-VT</u>					
Signature of authorized officer or employe <b>Catherine Euchre</b>				Digitally signed by Catherine Euchre DN: cn=Catherine Euchre, email=ceuchre@vermontel.com, O=vermont tel. co-vt l=Springfield VT 05156. Date: 3/25/2020	
Printed name of authorized officer or employee: <u>Catherine Euchre</u>					
Title or position of authorized officer or employee: <u>Director of Process Engineering</u>					
Telephone number of authorized officer or employee: <u>802-885-7746</u>					
Study Area Code of Reporting Carrier	<u>147332</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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>					
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Name of Authorized Agent : <u>National Exchange Carrier Association, Inc.</u>					
Name of Reporting Carrier: <u>CASSADAGA TEL CORP</u>					
Signature of authorized officer or employee <b>Wade Weatherlow</b>				Digitally signed by Wade Weatherlow DN:cn=Wade Weatherlow,email=wade.weatherlow@dfel.com,O=ca ssadaga tel corp,l=Fredonia NY 14063-0209, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Wade Weatherlow</u>					
Title or position of authorized officer or employee: <u>Carrier Relations Manager</u>					
Telephone number of authorized officer or employee: <u>716-673-3091</u>					
Study Area Code of Reporting Carrier	<u>150076</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>The Champlain Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>3/19/2020</u>
Printed name of authorized officer or employee <u>Mark Websteer</u>			
Title or position of authorized officer or employee <u>Controller</u>			
Telephone number of authorized officer or employee: ( <u>518</u> ) <u>298</u> - <u>2480</u> , ext.			
Study Area Code of Reporting Carrier	<u>150077</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u>					
Name of Reporting Carrier: <u>CROWN POINT TEL CORP</u>					
Signature of authorized officer or employee <b>Shana R. Macey</b>				Digitally signed by Shana R. Macey DN:cn=Shana R. Macey,email=shana.macey@cptelco.net,O=crown point tel corp,l=Crown Point NY 12928, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Shana R. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DUNKIRK &amp; FREDONIA</u>					
Signature of authorized officer or employee <b>Wade Weatherlow</b>				Digitally signed by Wade Weatherlow DN:cn=Wade Weatherlow,email=wade.weatherlow@dfel.com,O=du nkirk & fredonia,l=Fredonia NY 14063-0209, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Wade Weatherlow</u>					
Title or position of authorized officer or employee: <u>Carrier Relations Manager</u>					
Telephone number of authorized officer or employee: <u>716-673-3091</u>					
Study Area Code of Reporting Carrier	<u>150091</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GERMANTOWN TEL CO</u>					
Signature of authorized officer or employee <b>Bruce C. Bohnsack</b>				Digitally signed by Bruce C. Bohnsack DN:cn=Bruce C. Bohnsack,email=bruceb@gtel.net,O=germantown tel co,l=Germantown NY 12526, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Bruce C. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ONEIDA COUNTY RURAL</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,l=Holland Patent NY 13354, Date:3/26/2020	
Date: <u>3/26/2020</u>					
Printed name of authorized officer or employee: <u>Heather Kirkland</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ONTARIO TEL CO, INC.</u>					
Signature of authorized officer or employee <u>James E Cheney</u>				Digitally signed by James E Cheney DN:cn=James E Cheney,email=JimC@ottctel.com,O=ontario tel co, inc.,l=Phelps NY 14532, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>James E Cheney</u>					
Title or position of authorized officer or employee: <u>CFO/COO</u>					
Telephone number of authorized officer or employee: <u>315-548-8017</u>					
Study Area Code of Reporting Carrier	<u>150112</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>STATE TEL CO</u>					
Signature of authorized officer or employee <b>Mark Evans</b>				Digitally signed by Mark Evans DN:cn=Mark Evans,email=mevans@statetel.com,O=state tel co,l=Coxsackie NY 12051, Date:3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TRUMANSBURG TEL CO.</u>					
Signature of authorized officer or employee <b>James E Cheney</b>				Digitally signed by James E Cheney DN:cn=James E Cheney,email=JimC@ottctel.com,O=trumansburg tel co.,l=Phelps NY 14532, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>James E Cheney</u>					
Title or position of authorized officer or employee: <u>CFO/COO</u>					
Telephone number of authorized officer or employee: <u>315-548-8017</u>					
Study Area Code of Reporting Carrier	<u>150131</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ALTEVA WARWICK</u>					
Signature of authorized officer or employee <u>Virginia O'Hanlon</u>				Digitally signed by Virginia O'Hanlon DN:cn=Virginia O'Hanlon,email=vohanlon@momentumtelecom.com,O=alteva warwick,l=Warwick NY 10990, Date:3/27/2020	
Date: <u>3/27/2020</u>					
Printed name of authorized officer or employee: <u>Virginia O'Hanlon</u>					
Title or position of authorized officer or employee: <u>Regulatory and Tax Compliance Manager</u>					
Telephone number of authorized officer or employee: <u>845-986-2535</u>					
Study Area Code of Reporting Carrier	<u>160135</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 - KECKSBURG</u>					
Signature of authorized officer or employee <u>Arnold K. Cutrell</u>				Digitally signed by Arnold K. Cutrell DN:cn=Arnold K. Cutrell,email=arnie.cutrell@ctzn.net,O=citizens - kecksburg,I=Mount Pleasant PA 15666, Date:3/25/2020	
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>724-424-4444</u>					
Study Area Code of Reporting Carrier	<u>170156</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/25/2020 Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>IRONTON TEL CO</u>					
Signature of authorized officer or employee <u>Patricia L Stewart</u>				Digitally signed by Patricia L Stewart DN:cn=Patricia L Stewart,email=pstewart@ironton.com,O=ironton tel co,l=Coplay PA 18037-9608, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Patricia L Stewart</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>610-799-0225</u>					
Study Area Code of Reporting Carrier		<u>170175</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**  
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VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TELECOM</u>					
Signature of authorized officer or employee <u>James J. Kail</u>				Digitally signed by James J. Kail DN:cn=James J. Kail,email=jjkail@lhlc.net,O=lackawaxen telecom,l=Stahlstown PA 15687-0168, Date:3/27/2020	
Date: <u>3/27/2020</u>					
Printed name of authorized officer or employee: <u>James J. Kail</u>					
Title or position of authorized officer or employee: <u>President and CEO</u>					
Telephone number of authorized officer or employee: <u>724-593-2411</u>					
Study Area Code of Reporting Carrier	<u>170177</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ARMSTRONG TEL CO-PA</u>					
Signature of authorized officer or employee <b>David Ames</b>				Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel co-pa,l=Butler PA 16002, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ARMSTRONG TEL NORTH</u>					
Signature of authorized officer or employee <b>David Ames</b>				Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel north,l=Butler PA 16002, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PALMERTON TEL CO</u>					
Signature of authorized officer or employee <u>Timothy A. Hausman</u>				Digitally signed by Timothy A. Hausman DN: cn=Timothy A. Hausman, email=THausman@pencor.com, O=palmer ton tel co, l=Palmerston PA 18071, Date: 3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Timothy A. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Kimberly M Hannan</b>				Digitally signed by Kimberly M Hannan DN: cn=Kimberly M Hannan, email=patelco@ovalinternet.net, O=pennsylv ania tel co l=Jersey Shore PA 17740-9519	
				Date: <u>3/27/2020</u>	
Printed name of authorized officer or employee: <u>Kimberly M Hannan</u>					
Title or position of authorized officer or employee: <u>Vice President</u>					
Telephone number of authorized officer or employee: <u>570-745-7101</u>					
Study Area Code of Reporting Carrier	<u>170197</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employe <u>James J. Kail</u>				Digitally signed by James J. Kail DN:cn=James J. Kail,email=jjkail@lhcc.net,O=south canaan tel co,l=Stahlstown PA 15687-0168, Date:3/27/2020 Date: <u>3/27/2020</u>	
Printed name of authorized officer or employee: <u>James J. Kail</u>					
Title or position of authorized officer or employee: <u>President and CEO</u>					
Telephone number of authorized officer or employee: <u>724-593-2411</u>					
Study Area Code of Reporting Carrier	<u>170205</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ARMSTRONG TEL OF MD</u>					
Signature of authorized officer or employee <b>David Ames</b>				Digitally signed by David Ames DN:cn=David Ames,email=dames@agoc.com,O=armstrong tel of md,I=Butler PA 16002, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</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

**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>Buggs Island Telephone Cooperative</u>			
Signature of authorized officer or employee <u>Michele Taylor</u>			Date <u>03/23/2020</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>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BURKE'S GARDEN TEL</u>					
Signature of authorized officer or employee <u>Missy Lynch</u>				Digitally signed by Missy Lynch DN:cn=Missy Lynch,email=missylynch@bgco.net,O=burke's garden tel, Tazewell VA 24651, Date:3/16/2020 Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL COOP</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 tel coop,I=Fort Defiance VA 24437, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SHENANDOAH TEL CO</u>					
Signature of authorized officer or employee <b>Gary Miller</b>				Digitally signed by Gary Miller DN:cn=Gary Miller,email=Gary.Miller@emp.shentel.com,O=shenandoah tel co,l=Edinburg VA 22824, Date:3/17/2020 Date: <u>3/17/2020</u>	
Printed name of authorized officer or employee: <u>Gary Miller</u>					
Title or position of authorized officer or employee: <u>Director, Accounting WLN &amp; WLS</u>					
Telephone number of authorized officer or employee: <u>540-984-5991</u>					
Study Area Code of Reporting Carrier	<u>190250</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SHENANDOAH - NR</u>					
Signature of authorized officer or employee <b>Gary Miller</b>				Digitally signed by Gary Miller DN:cn=Gary Miller,email=Gary.Miller@emp.shentel.com,O=shenandoah - nr,l=Edinburg VA 22824, Date:3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Gary Miller</u>					
Title or position of authorized officer or employee: <u>Director, Accounting WLN &amp; WLS</u>					
Telephone number of authorized officer or employee: <u>540-984-5991</u>					
Study Area Code of Reporting Carrier	<u>197251</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ITS TELECOMM. SYS.</u>					
Signature of authorized officer or employee <b>Bruce Russell</b>				Digitally signed by Bruce Russell DN:cn=Bruce Russell,email=brucer@itsfiber.com,O=its telecomm. sys.,l=Indiantown FL 34956, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Bruce Russell</u>					
Title or position of authorized officer or employee: <u>Vice President/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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BRANTLEY TEL CO</u>					
Signature of authorized officer or employee <u>Andrea Mathie</u>				Digitally signed by Andrea Mathie DN:cn=Andrea Mathie,email=andrea.mathie@btctelcom.net,O=brantley tel co,l=Nahunta GA 31553, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BULLOCH COUNTY RURAL</u>					
Signature of authorized officer or employee <u>John D. Scott</u>				Digitally signed by John D. Scott DN:cn=John D. Scott,email=johnscott@bulloch.net,O=bulloch county rural,l=Statesboro GA 30458, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>John D. Scott</u>					
Title or position of authorized officer or employee: <u>General Manager/COO</u>					
Telephone number of authorized officer or employee: <u>912-865-1100</u>					
Study Area Code of Reporting Carrier		<u>220348</u>	Filing Due Date for this form (mm/dd/yyyy)		<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DARIEN TEL CO</u>					
Signature of authorized officer or employee <b>Kenneth I. Johnson</b>				<small>Digitally signed by Kenneth I. Johnson  DN: cn=Kenneth I.  Johnson, email=kenj@darientel.net, O=darien tel  co, l=Darien GA 31305, Date: 3/24/2020</small>	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Kenneth I. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ELLIJAY TEL CO</u>					
Signature of authorized officer or employee <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:3/26/2020 Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GLENWOOD TEL CO</u>					
Signature of authorized officer or employee <u>Janice E. O'Brien</u>				Digitally signed by Janice E. O'Brien DN:cn=Janice E. O'Brien,email=jeogtc@gtconline.com,O=glenwood tel co,l=Glenwood GA 30428-0235, Date:3/26/2020	
Date: <u>3/26/2020</u>					
Printed name of authorized officer or employee: <u>Janice E. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>Hart Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>03/25/2020</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</u> ) <u>376</u> . <u>4701</u> , ext. <u>2238</u>			
Study Area Code of Reporting Carrier	<u>220368</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <u>Beverly Pirkle</u>				Digitally signed by Beverly Pirkle DN:cn=Beverly Pirkle,email=BeverlyP@pemtelo.com,O=pembroke tel co,l=Pembroke GA 31321, Date:3/25/2020	Date: <u>3/25/2020</u>
Printed name of authorized officer or employee: <u>Beverly Pirkle</u>					
Title or position of authorized officer or employee: <u>CABS Administrator</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>3/31/2020</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

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>Planters Rural Telephone Cooperative</u>			
Signature of authorized officer or employee 			Date <u>3-17-2020</u>
Printed name of authorized officer or employee <u>Stephen D. Milner</u>			
Title or position of authorized officer or employee <u>CEO/General Manager</u>			
Telephone number of authorized officer or employee: ( 912 ) 857 - 4411 , ext.			
Study Area Code of Reporting Carrier	<u>220378</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			



**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:**

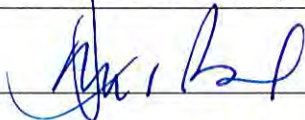
**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

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 Public Service Telephone Company

Signature of authorized officer or employee



Date

03/23/2020

Printed name of authorized officer or employee

James L. Bond

Title or position of authorized officer or employee

President

Telephone number of authorized officer or employee: ( 478 ) 847 - 4111 , ext. 6520

Study Area Code of Reporting Carrier

220381

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

3/31/2020

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

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RINGGOLD TEL CO</u>					
Signature of authorized officer or employee <u>Andy LeGrande</u>				Digitally signed by Andy LeGrande DN:cn=Andy LeGrande,email=alegrande@rtctel.com,O=ringgold tel co,l=Ringgold GA 30736, Date:3/18/2020 Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Andy LeGrande</u>					
Title or position of authorized officer or employee: <u>Regulatory Business Development Analyst</u>					
Telephone number of authorized officer or employee: <u>706-965-1719</u>					
Study Area Code of Reporting Carrier	<u>220382</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>Trenton Telephone Company</u>			
Signature of authorized officer or employee <u>Steven W. Tatum</u>			Date <u>03/26/2020</u>
Printed name of authorized officer or employee <u>Steven W. Tatum</u>			
Title or position of authorized officer or employee <u>First Vice President</u>			
Telephone number of authorized officer or employee: ( <u>706</u> ) <u>657</u> - <u>4367</u> , ext.			
Study Area Code of Reporting Carrier	<u>220389</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			



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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>WAVERLY HALL TEL</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=waverly hall tel,l=Livingston TX 77351, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **Waverly Hall Telephone**

Signature of authorized officer or employee



Date

**09/02/2020**

Printed name of authorized officer or employee

**Deborah Rand**

Title or position of authorized officer or employee

**President**

Telephone number of authorized officer or employee: ( **603** ) **472** - **9786** , ext.

Study Area Code of Reporting Carrier

**220392**

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

September 2020

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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ATLANTIC MEMBERSHIP</u>					
Signature of authorized officer or employee <b>Laura Graff</b>				Digitally signed by Laura Graff DN:cn=Laura Graff,email=lgraff@atmc.com,O=atlantic membership,l=Shallotte NC 28459, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BARNARDSVILLE TEL CO</u>					
Signature of authorized officer or employee <u>Tim Tribble</u>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@myriverstreet.net,O=barnardsville tel co, Wilkesboro NC 28697, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <u>Tara Thomas</u>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=citizens tel co,l=Rock Hill SC 29730, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <u>Tim Tribble</u>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@myriverstreet.net,O=ellerbe tel co,l=Wilkesboro NC 28697, Date:3/24/2020	
Date: <u>3/24/2020</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>230478</u>	Filing Due Date for this form (mm/dd/yyyy)		<u>3/31/2020</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

**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>TOWN OF PINEVILLE DBA PINEVILLE TELEPHONE COMPAN'</u>			
Signature of authorized officer or employee 			Date <u>03/19/2020</u>
Printed name of authorized officer or employee <u>TAMMY J VACHON</u>			
Title or position of authorized officer or employee <u>TELECOMMUNICATIONS DIRECTOR</u>			
Telephone number of authorized officer or employee: ( <u>704</u> ) <u>889</u> - <u>2001</u> , ext.			
Study Area Code of Reporting Carrier <u>230494</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RANDOLPH MEMBERSHIP</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 membership,I=Asheboro NC 27203, Date:3/23/2020</small>		Date: <u>3/23/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SURRY MEMBERSHIP</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 membership,l=Dobson NC 27017, Date:3/23/2020	
				Date: <u>3/23/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SALUDA MOUNTAIN TEL</u>					
Signature of authorized officer or employee <u>Tim Tribble</u>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@myriverstreet.net,O=saluda mountain tel,l=Wilkesboro NC 28697, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SERVICE TEL CO</u>					
Signature of authorized officer or employee <u>Tim Tribble</u>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@myriverstreet.net,O=service tel co,l=Wilkesboro NC 28697, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SKYLINE MEMBERSHIP</u>					
Signature of authorized officer or employee <u>Steven Hardin</u>				Digitally signed by Steven Hardin DN:cn=Steven Hardin,email=steven.hardin@skyline.org,O=skyline membership,l=West Jefferson NC 28694, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 MEMBERSHIP CORP</u>					
Signature of authorized officer or employee <u>Jeff Nethercutt</u>				Digitally signed by Jeff Nethercutt DN:cn=Jeff Nethercutt,email=jnethercutt@stmc.net,O=star membership corp,l=Clinton NC 28328, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Jeff Nethercutt</u>					
Title or position of authorized officer or employee: <u>Executive Vice President and Gen Manager</u>					
Telephone number of authorized officer or employee: <u>910-564-7869</u>					
Study Area Code of Reporting Carrier		<u>230502</u>	Filing Due Date for this form (mm/dd/yyyy)		<u>3/31/2020</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.

**STAR TELEPHONE MEMBERSHIP CORPORATION**

Name of Reporting Carrier

Signature of authorized officer or employee

  
Jeffrey A. Nethercutt

Date 11/03/2020

Printed name of authorized officer or employee

**Executive VP & CEO**

Title or position of authorized officer or employee

Telephone number of authorized officer or employee: ( 910 ) 564-7869 , ext.

Study Area Code of Reporting Carrier

230502

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

November 2020

**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**

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>SURRY MEMBERSHIP</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 membership,l=Dobson NC 27017, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RIVERSTREET-TCTMC</u>					
Signature of authorized officer or employee <u>Tim Tribble</u>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@myriverstreet.net,O=riverstreet-tctmc,I=Wilkesboro NC 28697, Date:3/24/2020	
Date: <u>3/24/2020</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>230505</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RIVERSTREET-WTMC</u>					
Signature of authorized officer or employee <u>Tim Tribble</u>				Digitally signed by Tim Tribble DN:cn=Tim Tribble, email=timtribble@myriverstreet.net,O=riverstreet-wtmc,I=Wilkesboro NC 28697, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL</u>					
Signature of authorized officer or employee <b>Butch Mabry</b>				Digitally signed by Butch Mabry DN:cn=Butch Mabry,email=Butch.mabry@yadtel.com,O=yadkin valley tel,l=Yadkinville NC 27055, Date:3/30/2020 Date: <u>3/30/2020</u>	
Printed name of authorized officer or employee: <u>Butch Mabry</u>					
Title or position of authorized officer or employee: <u>Risk &amp; Compliance Manager</u>					
Telephone number of authorized officer or employee: <u>336-463-5050</u>					
Study Area Code of Reporting Carrier	<u>230511</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL. CO.</u>					
Signature of authorized officer or employee <u>Trey Judy</u>				Digitally signed by Trey Judy DN:cn=Trey Judy,email=trey.judy@htc.hargray.com,O=bluffton tel. co.,l=Hilton Head SC 29928, Date:3/26/2020 Date: <u>3/26/2020</u>	
Printed name of authorized officer or employee: <u>Trey Judy</u>					
Title or position of authorized officer or employee: <u>Director Regulatory &amp; Carrier Relation</u>					
Telephone number of authorized officer or employee: <u>843-686-1210</u>					
Study Area Code of Reporting Carrier	<u>240512</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHESNEE TEL CO</u>					
Signature of authorized officer or employee <b>Steven Hardin</b>				Digitally signed by Steven Hardin DN:cn=Steven Hardin,email=steven.hardin@skyline.org,O=chesnee tel co,l=West Jefferson NC 28694, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHESTER TEL CO - SC</u>					
Signature of authorized officer or employee <b>Eric Ramey</b>				Digitally signed by Eric Ramey DN:cn=Eric Ramey,email=eric.Ramey@truvista.biz,O=chester tel co - sc,l=Chester SC 29706-0160, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Eric Ramey</u>					
Title or position of authorized officer or employee: <u>Sr Director Admin &amp; Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>803-581-9152</u>					
Study Area Code of Reporting Carrier	<u>240516</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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

Signature of authorized officer or employee

*Eric Ramey*

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)

**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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL COOP</u>					
Signature of authorized officer or employee <u>Sandra Moore</u>				Digitally signed by Sandra Moore DN:cn=Sandra Moore,email=moores@mail.ftc.org,O=farmers tel coop,l=Kingtree SC 29556, Date:3/18/2020 Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Sandra Moore</u>					
Title or position of authorized officer or employee: <u>External Affairs and Regulatory Analyst</u>					
Telephone number of authorized officer or employee: <u>843-382-1313</u>					
Study Area Code of Reporting Carrier	<u>240520</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FORT MILL TEL CO</u>					
Signature of authorized officer or employee <u>Tara Thomas</u>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=fort mill tel co,I=Rock Hill SC 29730, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <u>Trey Judy</u>				Digitally signed by Trey Judy DN:cn=Trey Judy,email=trey.judy@htc.hargray.com,O=hargray tel co, Hilton Head SC 29928, Date:3/26/2020 Date: <u>3/26/2020</u>	
Printed name of authorized officer or employee: <u>Trey Judy</u>					
Title or position of authorized officer or employee: <u>Director Regulatory &amp; Carrier Relation</u>					
Telephone number of authorized officer or employee: <u>843-686-1210</u>					
Study Area Code of Reporting Carrier	<u>240523</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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:

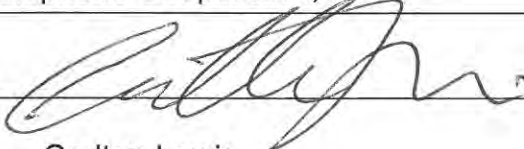
**Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund -  
Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier**

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 **Horry Telephone Cooperative, Inc.**

Signature of authorized officer or employee



Date **03/23/2020**

Printed name of authorized officer or employee

**Carlton Lewis**

Title or position of authorized officer or employee

**CFO**

Telephone number of authorized officer or employee: ( **843** ) **365** - **2151** , ext.

Study Area Code of Reporting Carrier

**240528**

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

**3/31/2020**

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

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LANCASTER TEL CO</u>					
Signature of authorized officer or employee <u>Tara Thomas</u>				Digitally signed by Tara Thomas DN:cn=Tara Thomas,email=tara.thomas@comporium.com,O=lancaster tel co,l=Rock Hill SC 29730, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>LOCKHART TEL CO INC</u>					
Signature of authorized officer or employee <b>Eric Ramey</b>				Digitally signed by Eric Ramey DN:cn=Eric Ramey,email=eric.Ramey@truvista.biz,O=lockhart tel co inc,l=Chester SC 29706-0160, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Eric Ramey</u>					
Title or position of authorized officer or employee: <u>Sr Director Admin &amp; Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>803-581-9152</u>					
Study Area Code of Reporting Carrier	<u>240532</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Lockhart Telephone Company

Signature of authorized officer or employee *Eric Ramey* Date 07/09/2020

Printed name of authorized officer or employee Eric S. Ramey

Title or position of authorized officer or employee Sr. Director Admin and Regulatory Affairs

Telephone number of authorized officer or employee: ( 803 ) 581 - 9152 , ext.

Study Area Code of Reporting Carrier	<u>240532</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>July 2020</u>	
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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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PALMETTO RURAL COOP</u>					
Signature of authorized officer or employee <u>Jason J. Dandridge</u>				<small>Digitally signed by Jason J. Dandridge DN:cn=Jason J. Dandridge,email=jason.dandridge@prtc.us,O=palmetto rural coop,lc=Walterboro SC 29488, Date:3/25/2020</small> Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Jason J. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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>Piedmont Rural Telephone Cooperative, Inc.</u>			
Signature of authorized officer or employee 			Date <u>03/23/2020</u>
Printed name of authorized officer or employee <u>Kara Horner</u>			
Title or position of authorized officer or employee <u>Controller</u>			
Telephone number of authorized officer or employee: ( 864 ) 682 - 3131 , ext.			
Study Area Code of Reporting Carrier	<u>240538</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/16/2020	
Date: <u>3/16/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>RIDGEWAY TEL CO</u>					
Signature of authorized officer or employee <b>Eric Ramey</b>				Digitally signed by Eric Ramey DN:cn=Eric Ramey,email=eric.Ramey@truvista.biz,O=ridgeway tel co,l=Chester SC 29706-0160, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Eric Ramey</u>					
Title or position of authorized officer or employee: <u>Sr Director Admin &amp; Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>803-581-9152</u>					
Study Area Code of Reporting Carrier	<u>240541</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **Ridgeway Telephone Company**

Signature of authorized officer or employee *Eric Ramey* Date **07/09/2020**

Printed name of authorized officer or employee **Eric S. Ramey**

Title or position of authorized officer or employee **Sr Director Admin and Regulatory Affiars**

Telephone number of authorized officer or employee: ( **803** ) **581** - **9152** , ext.

Study Area Code of Reporting Carrier	<b>240541</b>		Filing Due Date for this form (mm/dd/yyyy)	July 2020	
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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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SANDHILL TEL COOP</u>					
Signature of authorized officer or employee <u>Allen Mills</u>				Digitally signed by Allen Mills DN:cn=Allen Mills,email=allen.mills@mysandhill.net,O=sandhill tel coop,/=Jefferson SC 29718, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Allen Mills</u>					
Title or position of authorized officer or employee: <u>CABS Coordinator</u>					
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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 TEL COOP**

Signature of authorized officer or employee *Allen Mills*

Date **06/04/2020**

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

**240546**

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

**June 2020**

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  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement FormFCC 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

Castleberry Telephone Co., Inc.

Signature of authorized officer or employee

Homer Holland

Date

3-17-20

Printed name of authorized officer or employee

Homer Holland

Title or position of authorized officer or employee

Sec/Treas

Telephone number of authorized officer or employee:

(251) 966-2115

, ext.

Study Area Code of Reporting Carrier

250285Filing Due Date for this form  
(mm/dd/yyyy)3/31/2020

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

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 Farmers Telecommunications Cooperative, Inc.

Signature of authorized officer or employee

*Tyler Pair*

Date

03/25/2020

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.

Study Area Code of Reporting Carrier

250290

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

3/31/2020

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

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HAYNEVILLE TEL CO</u>					
Signature of authorized officer or employee <u>Evelyn Causey</u>				Digitally signed by Evelyn Causey DN:cn=Evelyn Causey,email=ecausey@htcnet.net,O=hayneville tel co,l=Hayneville AL 36040, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Evelyn Causey</u>					
Title or position of authorized officer or employee: <u>President/COO</u>					
Telephone number of authorized officer or employee: <u>334-548-2101</u>					
Study Area Code of Reporting Carrier	<u>250299</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MON-CRE TEL COOP</u>					
Signature of authorized officer or employe <u>Teresa Rich</u>				Digitally signed by Teresa Rich DN:cn=Teresa Rich,email=teresa@mon-cre.net,O=mon-cre tel coop, =Ramer AL 36069, Date:3/27/2020	
Date: <u>3/27/2020</u>					
Printed name of authorized officer or employee: <u>Teresa Rich</u>					
Title or position of authorized officer or employee: <u>General Manager</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MOUNDVILLE TEL CO</u>					
Signature of authorized officer or employe <u>R. Scott Taylor</u>				Digitally signed by R. Scott Taylor DN:cn=R. Scott Taylor,email=scott@mound.net,O=moundville tel co,l=Moundville AL 35474, Date:3/21/2020 Date: <u>3/21/2020</u>	
Printed name of authorized officer or employee: <u>R. Scott 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 New Hope Telephone Cooperative, Inc.

Signature of authorized officer or employee 

Date 3/19/20

Printed name of authorized officer or employee Daniel Martin

Title or position of authorized officer or employee General Manager

Telephone number of authorized officer or employee: ( 256 ) 723 - 4211 , ext.

Study Area Code of Reporting Carrier	250308	Filing Due Date for this form (mm/dd/yyyy)	3/31/2020
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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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PINE BELT TEL CO</u>					
Signature of authorized officer or employee <u>John C. Nettles</u>				Digitally signed by John C. Nettles DN:cn=John C. Nettles,email=john@pinebelt.net,O=pine belt tel co,l=Arlington AL 36722, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>John C. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RAGLAND TEL CO</u>					
Signature of authorized officer or employe <b>Matthew Jackson</b>				Digitally signed by Matthew Jackson DN: cn=Matthew Jackson, email=mattjackson@ragland.net, O=ragland tel co, l=Ragland AL 35131, Date: 3/20/2020	
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>205-472-2141</u>					
Study Area Code of Reporting Carrier	<u>250316</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BALLARD RURAL COOP</u>					
Signature of authorized officer or employee <u>Randy Grogan</u>				Digitally signed by Randy Grogan DN:cn=Randy Grogan,email=randy.grogan@btc.coop,O=ballard rural coop, =La Center KY 42056-0209, Date:3/25/2020 Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Randall Bradley</b>				<small>Digitally signed by Randall Bradley DN:cn=Randall Bradley,email=rbradley@bbtel.com,O=brandenburg tel co,l=Brandenburg KY 40108, Date:3/17/2020</small> Date: <u>3/17/2020</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>270-422-2121</u>					
Study Area Code of Reporting Carrier	<u>260398</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DUO COUNTY TEL COOP</u>					
Signature of authorized officer or employee <b>Daryl L. Hammond</b>				Digitally signed by Daryl L. Hammond DN:cn=Daryl L. Hammond,email=dhammond@duotel.com,O=duo county tel coop,l=Jamestown KY 42629, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Daryl L. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FOOTHILLS RURAL COOP</u>					
Signature of authorized officer or employee <u>Ruth Conley</u>				Digitally signed by Ruth Conley DN:cn=Ruth Conley,email=ruthc@foothills.coop,O=foothills rural coop,l=Staffordsville KY 41256, Date:3/26/2020	Date: <u>3/26/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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-COALFIELDS</u>					
Signature of authorized officer or employee <u>James O. Campbell</u>				Digitally signed by James O. Campbell DN: cn=James O. Campbell, email=jcamp@mis.net, O=gearheart-coalfield, ds.l=Harold KY 41635, Date: 3/17/2020 Date: <u>3/17/2020</u>	
Printed name of authorized officer or employee: <u>James O. Campbell</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>606-479-6254</u>					
Study Area Code of Reporting Carrier	<u>260408</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LOGAN TEL. COOP. INC</u>					
Signature of authorized officer or employee <b>Gregory A. Hale</b>				Digitally signed by Gregory A. Hale DN:cn=Gregory A. Hale,email=ghale@loganphone.com,O=logan tel. coop. inc,l=Auburn KY 42206-0097, Date:3/26/2020 Date: <u>3/26/2020</u>	
Printed name of authorized officer or employee: <u>Gregory A. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MOUNTAIN RURAL COOP</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 coop,I=West Liberty KY 41472, Date:3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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**

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PEOPLES RURAL COOP</u>					
Signature of authorized officer or employee <b>Christine Duncan</b>				Digitally signed by Christine Duncan DN: cn=Christine Duncan, email=Christine.duncan@prtc.org, O=peoples rural coop, l=McKee KY 40447, Date: 3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Christine Duncan</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>606-287-5485</u>					
Study Area Code of Reporting Carrier	<u>260415</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 CENTRAL RURAL</u>					
Signature of authorized officer or employee <u>Chris Lawrence</u>				Digitally signed by Chris Lawrence DN:cn=Chris Lawrence,email=chris.lawrence@scrtc.net,O=south central rural,l=Glasgow KY 42141, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>THACKER/GRIGSBY TEL</u>					
Signature of authorized officer or employe <u>William K. Grigsby</u>				<small>Digitally signed by William K. Grigsby DN:cn=William K. Grigsby,email=b.grigsby@tgtel.com,O=thacker/grigsby,telephone=Hindman KY 41822, Date:3/26/2020</small> Date: <u>3/26/2020</u>	
Printed name of authorized officer or employee: <u>William K. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WEST KENTUCKY RURAL</u>					
Signature of authorized officer or employee <b>Tiffany Myers</b>				Digitally signed by Tiffany Myers DN:cn=Tiffany Myers,email=tmyers@mywkt.coop,O=west kentucky rural,l=Mayfield KY 42066, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Tiffany Myers</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-804-4110</u>					
Study Area Code of Reporting Carrier	<u>260421</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DELCAMBRE TEL CO</u>					
Signature of authorized officer or employee <b>Marcy Landry</b>				Digitally signed by Marcy Landry DN:cn=Marcy Landry,email=mlandry@delcambre.net,O=delcambre tel co, Delcambre LA 70528, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Marcy Landry</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KAPLAN TEL CO</u>					
Signature of authorized officer or employee <b>Richard J. Constantin</b>				<small>Digitally signed by Richard J. Constantin  DN: cn=Richard J. Constantin, email=rconstantin@kaptel.net, O=kaplan tel co, l=Kaplan LA 70548-0369, Date: 3/24/2020</small>	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Richard J. Constantin</u>					
Title or position of authorized officer or employee: <u>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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NORTHEAST LOUISIANA</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,l=Collinston LA 71229, Date:3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 **Reserve Telephone Company**

Signature of authorized officer or employee	<i>Annette Faircloth</i>	Date	<b>03/19/2020</b>
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Printed name of authorized officer or employee **Annette Faircloth**

Title or position of authorized officer or employee **VP of Finance**

Telephone number of authorized officer or employee: ( 985 ) 536 - 1271 , ext.

Study Area Code of Reporting Carrier	<b>270438</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Bruce Steed</b>				Digitally signed by Bruce Steed DN:cn=Bruce Steed,email=bruce@directcom.com,O=star tel co,l=Rockland ID 83271, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Bruce Steed</u>					
Title or position of authorized officer or employee: <u>Accountant</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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:

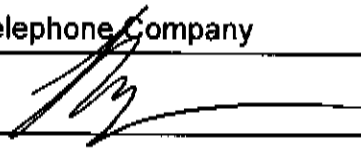
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Connect America Fund - Broadband Loop Support Mechanism Projected CAF-BLS Form on Behalf of Reporting Carrier</b>			
<p>I certify that <u>National Exchange Carrier Association, Inc. (NECA)</u> is authorized to submit 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>Noxapater Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>3/19/2020</u>
Printed name of authorized officer or employee <u>John Pearce</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>601</u> ) <u>764-3171</u> ext.			
Study Area Code of Reporting Carrier <u>280461</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SLEDGE TEL CO</u>					
Signature of authorized officer or employe <u>Robert O. Sledge Jr.</u>				Digitally signed by Robert O. Sledge Jr. DN: cn=Robert O. Sledge Jr., email=rsledge@deltaland.net, O=sledge tel co, l=Sunflower MS 38778-0068, Date: 3/21/2020	
Printed name of authorized officer or employee: <u>Robert O. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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>Sledge Telephone Company</b></p>			
<p>Signature of authorized officer or employee </p>			<p>Date <b>07/07/2020</b></p>
<p>Printed name of authorized officer or employee <b>Robert O. Sledge, Jr.</b></p>			
<p>Title or position of authorized officer or employee <b>President</b></p>			
<p>Telephone number of authorized officer or employee: ( 662 ) 569 - 3311 , ext.</p>			
<p>Study Area Code of Reporting Carrier</p>	<p><b>280466</b></p>	<p>Filing Due Date for this form (mm/dd/yyyy)</p>	<p>July 2020</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. §§ 602, 603(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**

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

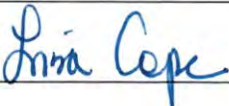
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ARDMORE TEL CO</u>					
Signature of authorized officer or employee <u>Tiffany Myers</u>				Digitally signed by Tiffany Myers DN:cn=Tiffany Myers,email=tmyers@mywkt.coop,O=ardmore tel co,l=Mayfield KY 42066, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Tiffany Myers</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-804-4110</u>					
Study Area Code of Reporting Carrier		<u>290280</u>	Filing Due Date for this form (mm/dd/yyyy)		<u>3/31/2020</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

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>Ben Lomand Rural Telephone Cooperative, Inc.</b>			
Signature of authorized officer or employee 			Date <b>3-20-2020</b>
Printed name of authorized officer or employee <b>Lisa Cope</b>			
Title or position of authorized officer or employee <b>General Manager / CEO</b>			
Telephone number of authorized officer or employee: ( <b>931</b> ) <b>668</b> - <b>4131</b> , ext.			
Study Area Code of Reporting Carrier <b>290553</b>		Filing Due Date for this form (mm/dd/yyyy) <b>3/31/2020</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>			

Certification-Agent

TRANSMITTAL NO. 1607

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BLED SOE TEL COOP</u>					
Signature of authorized officer or employee <b>Maranda Keith</b>				Digitally signed by Maranda Keith DN:cn=Maranda Keith,email=marandakeith@bledsoe.net,O=bledsoe tel coop,l=Pikeville TN 37367-0609, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Maranda Keith</u>					
Title or position of authorized officer or employee: <u>Billing Supervisor</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LORETTO TEL CO</u>					
Signature of authorized officer or employee <b>Bridget Holden</b>				Digitally signed by Bridget Holden DN:cn=Bridget Holden,email=bridget@lorettotel.com,O=loretto tel co,l=Loretto TN 38469, Date:3/19/2020	
				Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Bridget Holden</u>					
Title or position of authorized officer or employee: <u>Staff Accountant</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NORTH CENTRAL COOP</u>					
Signature of authorized officer or employee <u>Johnny McClanahan</u>				Digitally signed by Johnny McClanahan DN: cn=Johnny McClanahan, email=johnny.mcclanahan@nctc.com, O= <u>north central coop</u> , l=Lafayette TN 37083 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Johnny McClanahan</u>					
Title or position of authorized officer or employee: <u>President and CEO</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TWIN LAKES TEL COOP</u>					
Signature of authorized officer or employee <b>Bridget Betcher</b>				Digitally signed by Bridget Betcher DN:cn=Bridget Betcher,email=bbetcher@twilakes.coop,O=twin lakes tel coop,lc= , Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>UTC-TN-UNITED COMM</u>					
Signature of authorized officer or employee <b>Kristin Jackson</b>				Digitally signed by Kristin Jackson DN:cn=Kristin Jackson,email=kjackson@gounited.net,O=utc-tn-united comm,l=Chapel Hill TN 37034, Date:3/26/2020	
Date: <u>3/26/2020</u>					
Printed name of authorized officer or employee: <u>Kristin Jackson</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>931-364-4325</u>					
Study Area Code of Reporting Carrier	<u>290581</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WEST KY COOP-TN</u>					
Signature of authorized officer or employee <b>Tiffany Myers</b>				Digitally signed by Tiffany Myers DN:cn=Tiffany Myers,email=tmyers@mywkt.coop,O=west ky coop-tn,l=Mayfield KY 42066, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Tiffany Myers</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>270-804-4110</u>					
Study Area Code of Reporting Carrier	<u>290598</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>THE ARTHUR MUTUAL</u>					
Signature of authorized officer or employee <u>Eric Roughton</u>				Digitally signed by Eric Roughton DN:cn=Eric Roughton,email=artelco@bright.net,O=the arthur mutual,l=Defiance OH 43512, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>AYERSVILLE TEL CO</u>					
Signature of authorized officer or employee <u>Phil Maag</u>				Digitally signed by Phil Maag DN:cn=Phil Maag,email=pmaag@ayersvilletelco.com,O=ayersville tel co,l=Defiance OH 43512, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BASCOM MUTUAL TEL CO</u>					
Signature of authorized officer or employee <u>Laura A. Wise</u>				Digitally signed by Laura A. Wise DN:cn=Laura A. Wise, email=law@bascomtelephone.com, O=bascom mutual tel co, j=Bascom OH 44809-0316, Date:3/25/2020	Date: <u>3/25/2020</u>
Printed name of authorized officer or employee: <u>Laura A. 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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BENTON RIDGE TEL CO</u>					
Signature of authorized officer or employee <u>Angela Finnerty</u>				Digitally signed by Angela Finnerty DN:cn=Angela Finnerty,email=angela@finnerty.com,watchcomm.net,O=benton ridge tel co,serial=45801, Date:3/23/2020	Date: <u>3/23/2020</u>
Printed name of authorized officer or employee: <u>Angela Finnerty</u>					
Title or position of authorized officer or employee: <u>Corporate Accountant</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>3/31/2020</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**

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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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>THE CHAMPAIGN TEL CO</u>					
Signature of authorized officer or employee <u>Tiffany Ebersold</u>				Digitally signed by Tiffany Ebersold DN:cn=Tiffany Ebersold,email=tiffany@ctcommunications.com,O=the champaign tel co,l=Urbana OH 43078, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MCCLURE TEL CO</u>					
Signature of authorized officer or employee <u>Lance Miller</u>				Digitally signed by Lance Miller DN:cn=Lance Miller,email=lance@mccluretelephone.com,O=mcclure tel co,l=McClure OH 43534-0026, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</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**

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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CONNEAUT TEL CO</u>					
Signature of authorized officer or employee		<b>Deanna Brown</b> <small>Digitally signed by Deanna Brown DN:cn=Deanna Brown,email=dbrown@greatwavecom.com,O=conneaut tel co,lc=Conneaut OH 44030, Date:3/25/2020</small>		Date: <u>3/25/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DOYLESTOWN TEL CO</u>					
Signature of authorized officer or employee <b>David Jones</b>				Digitally signed by David Jones DN:cn=David Jones,email=djones@doylestowntelephone.com,O=doylestown tel co,j=Doylestown OH 44230, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>David Jones</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>330-658-3401</u>					
Study Area Code of Reporting Carrier	<u>300609</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL</u>					
Signature of authorized officer or employee <b><u>Cheryl Bostelman</u></b>				Digitally signed by Cheryl Bostelman DN:cn=Cheryl Bostelman,email=cbostelman@fmtc.cc,O=farmers mutual tel,l=Okolona OH 43545, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/26/2020	
Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GLANDORF TEL CO</u>					
Signature of authorized officer or employe <b>David L. Hunt</b>				<small>Digitally signed by David L. Hunt DN:cn=David L. Hunt,email=hunt@bright.net,O=glandorf tel co,l=Glandorf OH 45848, Date:3/26/2020</small> Date: <u>3/26/2020</u>	
Printed name of authorized officer or employee: <u>David L. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KALIDA TEL CO</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,l=Kalida OH 45853, Date:3/18/2020</small> Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MINFORD TEL CO</u>					
Signature of authorized officer or employee <b>Paula J. McGraw</b>				Digitally signed by Paula J. McGraw DN:cn=Paula J. McGraw,email=pmcgraw@falcon1.net,O=minford tel co,l=Minford OH 45653, Date:3/19/2020	
Date: <u>3/19/2020</u>					
Printed name of authorized officer or employee: <u>Paula J. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>OTTOVILLE MUTUAL</u>					
Signature of authorized officer or employee <u>William J Honigford</u>				Digitally signed by William J Honigford DN: cn=William J Honigford, email=billh@ottovillemutual.com, O=ottoville mutual, l=Ottoville OH 45876-0427, Date: 3/19/2020	
Printed name of authorized officer or employee: <u>William J 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement FormFCC 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 Sherwood Mutual Telephone Association Inc

Signature of authorized officer or employee



Date

03/20/2020

Printed name of authorized officer or employee

Richard R. Rostorfer

Title or position of authorized officer or employee

General Manager

Telephone number of authorized officer or employee: ( 419 ) 899 - 2121 , ext.

Study Area Code of Reporting Carrier

300656

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

3/31/2020

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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>Vaughnsville Telephone Company</u>			
Signature of authorized officer or employee <u>Martha J Kaplan</u>			Date <u>03/20/2020</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>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ACE-MI ALLENDALE</u>					
Signature of authorized officer or employee <u>Cynthia Sweet</u>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace-mi allendale,I=Houston MN 55943-0360, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BLANCHARD TEL. CO.</u>					
Signature of authorized officer or employee <b>Ronald Ray</b>				Digitally signed by Ronald Ray DN:cn=Ronald Ray,email=r ray@blanchardtel.com,O=blanchard tel. co.,l=Blanchard MI 49310, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Ronald Ray</u>					
Title or position of authorized officer or employee: <u>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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Steve Shults</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>Climax Telephone Co.</u>			
Signature of authorized officer or employee <u><i>Samuel McCuey</i></u>			Date <u>3.16.2020</u>
Printed name of authorized officer or employee <u>Samuel R Dewey</u>			
Title or position of authorized officer or employee <u>Controller</u>			
Telephone number of authorized officer or employee: <u>269, 746.3292</u> , ext.			
Study Area Code of Reporting Carrier <u>310688</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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. 1607

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DEERFIELD FARMERS</u>					
Signature of authorized officer or employe <b>Victoria Stevens</b>				Digitally signed by Victoria Stevens DN:cn=Victoria Stevens,email=Victoria.stevens@d-pcomm.com,O=d eerfield farmers,l=Petersburg MI 49270, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Victoria Stevens</u>					
Title or position of authorized officer or employee: <u>HR/RSC Manager</u>					
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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>ACE-MI DRENTHE</u>					
Signature of authorized officer or employee <u>Cynthia Sweet</u>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace-mi drenthe,I=Houston MN 55943-0360, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ACE TEL OF MICHIGAN</u>					
Signature of authorized officer or employee <u>Cynthia Sweet</u>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel of michigan, ,I=Houston MN 55943-0360, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Randy K. Fletcher</b>				Digitally signed by Randy K. Fletcher DN:cn=Randy K. Fletcher,email=rfletcher@lentel.com,O=lennon tel co,l=Lennon MI 48449-0329, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Randy K. Fletcher</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>810-621-3304</u>					
Study Area Code of Reporting Carrier	<u>310708</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>OGDEN TEL CO</u>					
Signature of authorized officer or employee <u>Kristen K Fisher</u>				Digitally signed by Kristen K Fisher DN:cn=Kristen K Fisher,email=fisher@ogdentel.com,O=ogden tel co,l=Blissfield MI 49228, Date:3/19/2020	Date: <u>3/19/2020</u>
Printed name of authorized officer or employee: <u>Kristen K Fisher</u>					
Title or position of authorized officer or employee: <u>Secretary-Treasurer</u>					
Telephone number of authorized officer or employee: <u>517-443-5595</u>					
Study Area Code of Reporting Carrier	<u>310714</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employe <u>Neal B. Eichler</u>				Digitally signed by Neal B. Eichler DN:cn=Neal B. Eichler,email=naeic@avci.net,O=pigeon tel co,l=Pigeon MI 48755, Date:3/18/2020 Date: <u>3/18/2020</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>989-453-4391</u>					
Study Area Code of Reporting Carrier	<u>310721</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/19/2020	
Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WINN TEL CO</u>					
Signature of authorized officer or employee <b>Mark Graf</b>				Digitally signed by Mark Graf DN:cn=Mark Graf,email=mgraf@winntel.com,O=winntel co,l=Winn MI 48896, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ACE-MI OLD MISSION</u>					
Signature of authorized officer or employee <u>Cynthia Sweet</u>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace-mi old mission,I=Houston MN 55943-0360, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CORP</u>					
Signature of authorized officer or employee <u>Joan Paxson</u>				Digitally signed by Joan Paxson DN:cn=Joan Paxson,email=joanie@citiznet.com,O=citizens tel corp,l=Warren IN 46792, Date:3/26/2020	Date: <u>3/26/2020</u>
Printed name of authorized officer or employee: <u>Joan Paxson</u>					
Title or position of authorized officer or employee: <u>Secretary, Office Manager</u>					
Telephone number of authorized officer or employee: <u>260-375-2111</u>					
Study Area Code of Reporting Carrier	<u>320751</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CLAY DBA ENDEAVOR</u>					
Signature of authorized officer or employee <u>Darin LaCoursiere</u>				Digitally signed by Darin LaCoursiere DN:cn=Darin LaCoursiere,email=darinl@weEndeavor.com,O=clay dba endeavor,l=Cloverdale IN 46120-0237, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CRAIGVILLE TEL CO</u>					
Signature of authorized officer or employee <u>Lee Von Gunten</u>				Digitally signed by Lee Von Gunten DN:cn=Lee Von Gunten,email=lee@adamswells.com,O=craigville tel co,l=Craigville IN 46731, Date:3/26/2020	Date: <u>3/26/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DAVIESS-MARTIN/RTC</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=davieess-martin/rtc,I=Montgomery IN 47558, Date:3/26/2020	
Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GEETINGSVILLE TEL CO</u>					
Signature of authorized officer or employee <b>Steve Scott</b>				Digitally signed by Steve Scott DN:cn=Steve Scott,email=support@geetel.net,O=geetingsville tel co,l=Frankfort IN 46041-7799, Date:3/21/2020	
Date: <u>3/21/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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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VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HANCOCK DBA NINESTAR</u>					
Signature of authorized officer or employe <u>Michael R. Burrow</u>				Digitally signed by Michael R. Burrow DN:cn=Michael R. Burrow,email=mburrow@ninstarconnect.com,O=hanc ock dba ninstar I=Greenfield IN 46140	
Printed name of authorized officer or employee: <u>Michael R. Burrow</u>				Date: <u>3/16/2020</u>	
Title or position of authorized officer or employee: <u>President and CEO</u>					
Telephone number of authorized officer or employee: <u>317-326-2101</u>					
Study Area Code of Reporting Carrier	<u>320775</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/26/2020 Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MONON TEL CO</u>					
Signature of authorized officer or employee <u>Bruce Hanway</u>				Digitally signed by Bruce Hanway DN:cn=Bruce Hanway,email=bruceh@urhere.net,O=monon tel co,l=Monon IN 47959, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MULBERRY COOP TEL CO</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,l=Mulberry IN 46058, Date:3/26/2020 Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 LISBON TEL CO</u>					
Signature of authorized officer or employee <u>John Greene</u>				Digitally signed by John Greene DN:cn=John Greene,email=john.greene@nlbc.com,O=new lisbon tel co,l=New Lisbon IN 47366, Date:3/21/2020	
Date: <u>3/21/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 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,I=New Paris IN 46553-0047, Date:3/27/2020 Date: <u>3/27/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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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FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NORTHWESTERN INDIANA</u>					
Signature of authorized officer or employee <b>Thomas C. Long</b>				Digitally signed by Thomas C. Long DN:cn=Thomas C. Long,email=tlong@nitco.com,O=northwestern indiana,l=Hebron IN 46341, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Thomas C. Long</u>					
Title or position of authorized officer or employee: <u>COO</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PERRY-SPENCER RURAL</u>					
Signature of authorized officer or employee <u>James M. Dauby</u>				Digitally signed by James M. Dauby DN:cn=James M. Dauby,email=jdauby@psci.net,O=perry-spencer rural,l=St. Meinrad IN 47577, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>James M. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LIGHTSTREAM</u>					
Signature of authorized officer or employee <u>Brent Gillum</u>				Digitally signed by Brent Gillum DN:cn=Brent Gillum,email=bgillum@pwrct.net,O=lightstream, =Buffalo IN 47925, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</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 **Pulaski White Rural Telephone Coop. Inc. (d/b/a) LightStream**

Signature of authorized officer or employee



Date

**09/02/2020**

Printed name of authorized officer or employee

**Brent Gillum**

Title or position of authorized officer or employee

**President & CEO**

Telephone number of authorized officer or employee: ( 574 ) 278 - 7121 , ext. 229

Study Area Code of Reporting Carrier

**320813**

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

**09/02/2020**

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**

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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ROCHESTER TEL CO</u>					
Signature of authorized officer or employee <u>Greta Lynch</u>				Digitally signed by Greta Lynch DN:cn=Greta Lynch,email=greta.lynych@rtc1.com,O=rochester tel co,l=Rochester IN 46975-1509, Date:3/16/2020 Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SE INDIANA RURAL</u>					
Signature of authorized officer or employee <u>Aliesha Niebrugge</u>				Digitally signed by Aliesha Niebrugge DN:cn=Aliesha Niebrugge,email=niebruggea@seidata.com,O=se indiana rural,l=Dillsboro IN 47018-0007, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Aliesha Niebrugge</u>					
Title or position of authorized officer or employee: <u>Business Office Supervisor</u>					
Telephone number of authorized officer or employee: <u>812-667-5100</u>					
Study Area Code of Reporting Carrier	<u>320819</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SUNMAN - ENHANCED</u>					
Signature of authorized officer or employee <u>Michael J. Alig</u>				Digitally signed by Michael J. Alig DN:cn=Michael J. Alig,email=malig@etc1.net,O=sunman - enhanced, Sunman IN 47041, Date:3/26/2020	Date: <u>3/26/2020</u>
Printed name of authorized officer or employee: <u>Michael J. 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>3/31/2020</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**

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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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SWAYZEE TEL CO</u>					
Signature of authorized officer or employee <u>Audra Hicks</u>				Digitally signed by Audra Hicks DN:cn=Audra Hicks,email=swayzee@swayzee.com,O=swayzee tel co,l=Swayzee IN 46986, Date:3/26/2020 Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SWEETSER RURAL TEL</u>					
Signature of authorized officer or employee <u>Lynn Hess</u>				Digitally signed by Lynn Hess DN:cn=Lynn Hess,email=lynnhess@comteck.com,O=sweetser rural tel,I=sweetser IN 46987, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 CTY RURAL</u>					
Signature of authorized officer or employee <b>Sara Morris</b>				Digitally signed by Sara Morris DN:cn=Sara Morris,email=sara.morris@tele-mediasolutions.coop,O=Washington Cty Rural,IN 47165, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Sara Morris</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>812-967-5529</u>					
Study Area Code of Reporting Carrier	<u>320834</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>YEOMAN TEL CO, INC</u>					
Signature of authorized officer or employe <b>David W. Blacker</b>				Digitally signed by David W. Blacker DN:cn=David W. Blacker,email=dblacke@ytc.com,O=yeoman tel co, inc,l=Yeoman IN 47997, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>David W. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHEQUAMEGON COM COOP</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 com coop,I=Cable WI 54821, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHIBARDUN TEL COOP</u>					
Signature of authorized officer or employee <b>Eric M Pelle</b>				Digitally signed by Eric M Pelle DN:cn=Eric M Pelle,email=epelle@mosaictelecom.com,O=chibardun tel coop,l=Cameron WI 54822, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Eric M Pelle</u>					
Title or position of authorized officer or employee: <u>Chief Financial 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL COOP-WI</u>					
Signature of authorized officer or employe <b>Dennis L. Bachman</b>				Digitally signed by Dennis L. Bachman DN: cn=Dennis L. Bachman, email=dbachman@citizens-connected.com, O=citizens tel coop-wi, l=New Auburn WI 54757-0127	
Printed name of authorized officer or employee: <u>Dennis L. Bachman</u>				Date: <u>3/26/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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@mwat.net,O=cochrane coop tel co,l=Cochrane WI 54622-0189, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LAKEFIELD TEL CO</u>					
Signature of authorized officer or employee <u>Jim Paulos</u>				Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=lakefield tel co,l=Green Bay WI 54313, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Jim Paulos</u>					
Title or position of authorized officer or employee: <u>Fixed Operations Manager</u>					
Telephone number of authorized officer or employee: <u>920-617-7085</u>					
Study Area Code of Reporting Carrier	<u>330896</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL COOP</u>					
Signature of authorized officer or employee <u>Gregory Rockweiler</u>				Digitally signed by Gregory Rockweiler DN: cn=Gregory Rockweiler, email=gregr@lvc.coop, O=la valle tel coop, l=La Valle WI 53941, Date: 3/20/2020	
Printed name of authorized officer or employee: <u>Gregory Rockweiler</u>					
Title or position of authorized officer or employee: <u>Assistant Secretary</u>					
Telephone number of authorized officer or employee: <u>608-985-7201</u>					
Study Area Code of Reporting Carrier	<u>330899</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LEMONWEIR VALLEY TEL</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,l=Camp Douglas WI 54618, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LAKELAND COMM.</u>					
Signature of authorized officer or employee		<u>Crystal Morley</u> <small>Digitally signed by Crystal Morley DN:cn=Crystal Morley,email=crystalm@lakeland.ws,O=lakeland comm.,l=Milltown WI 54858, Date:3/24/2020</small>		Date: <u>3/24/2020</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>3/31/2020</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>					

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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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MARQUETTE-ADAMS COOP</u>					
Signature of authorized officer or employee <u>Jerry Schneider</u>				Digitally signed by Jerry Schneider DN:cn=Jerry Schneider,email=jschneider@maadtelco.com,O=marquette-adams coop,I=Oxford WI 53952, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NELSON COMM COOP</u>					
Signature of authorized officer or employee <b>Christy A. Berger</b>				Digitally signed by Christy A. Berger DN:cn=Christy A. Berger,email=christy@ntec.net,O=nelson comm coop, =Durand WI 54736-0228, Date:3/19/2020	
Date: <u>3/19/2020</u>					
Printed name of authorized officer or employee: <u>Christy A. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NIAGARA TEL CO</u>					
Signature of authorized officer or employee <u>Jim Paulos</u>				Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=niagara tel co,l=Green Bay WI 54313, Date:3/25/2020	
				Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Jim Paulos</u>					
Title or position of authorized officer or employee: <u>Fixed Operations Manager</u>					
Telephone number of authorized officer or employee: <u>920-617-7085</u>					
Study Area Code of Reporting Carrier		<u>330920</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BAYLAND TEL, LLC</u>					
Signature of authorized officer or employee <u>Jim Paulos</u>				Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=bayland tel, llc,l=Green Bay WI 54313, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Jim Paulos</u>					
Title or position of authorized officer or employee: <u>Fixed Operations Manager</u>					
Telephone number of authorized officer or employee: <u>920-617-7085</u>					
Study Area Code of Reporting Carrier	<u>330925</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PRICE COUNTY TEL CO</u>					
Signature of authorized officer or employee		<b>Robert Thompson</b> <small>Digitally signed by Robert Thompson DN:cn=Robert Thompson,email=rthompson@norvado.com,O=price county tel co, C=Cable WI 54821, Date:3/23/2020</small>		Date: <u>3/23/2020</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>330937</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NORTHEAST TEL CO</u>					
Signature of authorized officer or employee <u>Jim Paulos</u>				Digitally signed by Jim Paulos DN:cn=Jim Paulos,email=jim.paulos@nsight.com,O=northeast tel co,l=Green Bay WI 54313, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Jim Paulos</u>					
Title or position of authorized officer or employee: <u>Fixed Operations Manager</u>					
Telephone number of authorized officer or employee: <u>920-617-7085</u>					
Study Area Code of Reporting Carrier	<u>330938</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SHARON TEL CO</u>					
Signature of authorized officer or employee <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:3/24/2020	
				Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SIREN TEL CO, INC</u>					
Signature of authorized officer or employee <u>Sid Sherstad</u>				Digitally signed by Sid Sherstad DN:cn=Sid Sherstad,email=sherstad@sirentel.net,O=siren tel co, inc,I=Siren WI 54872-0426, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Sid Sherstad</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 VALLEY TEL CO</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,l=Spring Valley WI 54767, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Carol Anderson</u>					
Title or position of authorized officer or employee: <u>General Manager</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>W. WISCONSIN TELCOM</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=w. wisconsin telcom,l=Downsville WI 54735, Date:3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <u>Justin Huebner</u>				Digitally signed by Justin Huebner DN:cn=Justin Huebner,email=jhuebner@solarus.net,O=wood county tel co,l=Wisconsin Rapids WI 54494, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Justin Huebner</u>					
Title or position of authorized officer or employee: <u>Executive Vice President</u>					
Telephone number of authorized officer or employee: <u>715-421-8140</u>					
Study Area Code of Reporting Carrier	<u>330974</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>EGYPTIAN COOP ASSN</u>					
Signature of authorized officer or employee <b>Matt Bollinger</b>				Digitally signed by Matt Bollinger DN:cn=Matt Bollinger,email=mbollinger@egyptian.net,O=egyptian coop assn,l=Steeleville IL 62288, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Matt Bollinger</u>					
Title or position of authorized officer or employee: <u>Executive Vice President/General Manager</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



**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>Grandview Mutual Telephone</u>			
Signature of authorized officer or employee <u>Angela Tate</u>			Date <u>3-24-2020</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> ext.			
Study Area Code of Reporting Carrier <u>341021</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GRIDLEY TEL CO</u>					
Signature of authorized officer or employe <u>Herb Flesher</u>				Digitally signed by Herb Flesher DN:cn=Herb Flesher,email=hflesher@gridtel.com,O=gridley tel co,l=Gridley IL 61744-0129, Date:3/23/2020	
				Date: <u>3/23/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HARRISONVILLE TEL CO</u>					
Signature of authorized officer or employee <u>Lee Whitcher</u>				Digitally signed by Lee Whitcher DN:cn=Lee Whitcher,email=htclhw@htc.net,O=harrisonville tel co,l=Waterloo IL 62298-0149, Date:3/18/2020 Date: <u>3/18/2020</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>3/31/2020</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

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>Home Telephone Co</u>			
Signature of authorized officer or employee 			Date <u>3/19/2020</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>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 HARPE TEL CO</u>					
Signature of authorized officer or employee <u>Todd Irish</u>				Digitally signed by Todd Irish DN:cn=Todd Irish,email=todd@laharpetelephone.com,O=la harpe tel co,l=La Harpe IL 61450, Date:3/16/2020	
Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LEAF RIVER TEL CO</u>					
Signature of authorized officer or employee <u>Aaron L. Palmer</u>				Digitally signed by Aaron L. Palmer DN:cn=Aaron L. Palmer,email=apalmer@lnet1.com,O=leaf river tel co,l=Leaf River IL 61047, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Aaron L. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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


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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>MCDONOUGH TEL COOP</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 tel coop,l=Colchester IL 62326, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>MADISON TELEPHONE COMPANY</u>			
Signature of authorized officer or employee <u></u>			Date <u>3/16/2020</u>
Printed name of authorized officer or employee <u>MARY WESTERHOLD</u>			
Title or position of authorized officer or employee <u>VP/CFO</u>			
Telephone number of authorized officer or employee: ( <u>618</u> ) <u>635-1000</u> , ext. <u>248</u>			
Study Area Code of Reporting Carrier <u>341049</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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. 1607



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MARSEILLES TEL CO</u>					
Signature of authorized officer or employee <u>Ann Rauh Dickerson</u>				Digitally signed by Ann Rauh Dickerson DN:cn=Ann Rauh Dickerson,email=adickerson@corp.mtco.com,O=mar seilles tel co, Metamora IL 61548-0800 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Ann Rauh 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>METAMORA TEL CO</u>					
Signature of authorized officer or employee <u>Ann Rauh Dickerson</u>				Digitally signed by Ann Rauh Dickerson DN:cn=Ann Rauh Dickerson,email=adickerson@corp.mtco.com,O=metamora tel co, Metamora IL 61548-0800 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Ann Rauh 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MONTROSE MUTUAL TEL</u>					
Signature of authorized officer or employee <u>Barry Adair</u>				Digitally signed by Barry Adair DN:cn=Barry Adair,email=barryadair@wabash.net,O=montrose mutual tel,lc=Louisville IL 62858, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Barry Adair</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>618-665-3311</u>					
Study Area Code of Reporting Carrier	<u>341058</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ONEIDA TEL EXCHANGE</u>					
Signature of authorized officer or employee <u>Troy Nimrick</u>				Digitally signed by Troy Nimrick DN:cn=Troy Nimrick,email=troy@oneidatel.com,O=oneida tel exchange, Oneida IL 61467, Date:3/19/2020 Date: <u>3/19/2020</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>309-483-3111</u>					
Study Area Code of Reporting Carrier		<u>341066</u>	Filing Due Date for this form (mm/dd/yyyy)		<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>VIOLA HOME TEL CO</u>					
Signature of authorized officer or employee <u>Jay D. Barton</u>				Digitally signed by Jay D. Barton DN:cn=Jay D. Barton,email=jay@violatel.com,O=viola home tel co,l=Viola IL 61486, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Jay D. Barton</u>					
Title or position of authorized officer or employee: <u>Assistant Secretary</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WABASH COMM CO-OP</u>					
Signature of authorized officer or employee <u>Barry Adair</u>				Digitally signed by Barry Adair DN:cn=Barry Adair,email=barryadair@wabash.net,O=wabash comm co-op,lc=Louisville IL 62858, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Barry Adair</u>					
Title or position of authorized officer or employee: <u>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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ALPINE COMM.</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 comm.,l=Elkader IA 52043, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Chris Hopp</u>					
Title or position of authorized officer or employee: <u>Chief Operating Officer</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CASCADE COMM. CO.</u>					
Signature of authorized officer or employee <b>David L. Gibson</b>				Digitally signed by David L. Gibson DN:cn=David L. Gibson,email=dave@cascadecomm.com,O=cascade comm. co.,l=Cascade IA 52033-0250, Date:3/19/2020	
Date: <u>3/19/2020</u>					
Printed name of authorized officer or employee: <u>David L. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CLEAR LAKE INDEPEND</u>					
Signature of authorized officer or employee <b>Thomas Lovell</b>				<small>Digitally signed by Thomas Lovell DN:cn=Thomas Lovell,email=tomlovell@ctel.com,O=clear lake independ,l=Clear Lake IA 50428-0066, Date:3/24/2020</small> Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Thomas Lovell</u>					
Title or position of authorized officer or employee: <u>General Manager/Vice President</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>COLO TEL CO</u>					
Signature of authorized officer or employee <u>Larry W. Springer</u>				Digitally signed by Larry W. Springer DN:cn=Larry W. Springer,email=larrycolo@netins.net,O=colo tel co,l=Colo IA 50056-0315, Date:3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Larry W. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DUMONT TEL CO</u>					
Signature of authorized officer or employee <u>Roger Kregel</u>				Digitally signed by Roger Kregel DN:cn=Roger Kregel,email=rogerkr@netins.net,O=dumont tel co,l=Dumont IA 50625-0349, Date:3/16/2020	
Date: <u>3/16/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DUNKERTON TEL COOP</u>					
Signature of authorized officer or employee <u>Sue Bruns</u>				Digitally signed by Sue Bruns DN:cn=Sue Bruns,email=sue@dunkerton.net,O=dunkerton tel coop,/=Dunkerton IA 50626, Date:3/18/2020	
				Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Sue Bruns</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>319-822-4512</u>					
Study Area Code of Reporting Carrier		<u>351153</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ELLSWORTH COOP ASSN</u>					
Signature of authorized officer or employe <b>Joshua Angove</b>				Digitally signed by Joshua Angove DN:cn=Joshua Angove,email=jangove@netins.net,O=ellsworth coop assn,l=Ellsworth IA 50075-0458, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MINBURN TELECOMM.</u>					
Signature of authorized officer or employe <b>Debra Lucht</b>				Digitally signed by Debra Lucht DN:cn=Debra Lucht,email=debl@minburncomm.com,O=minburn telecomm.,I=Minburn IA 50167, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Debra Lucht</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

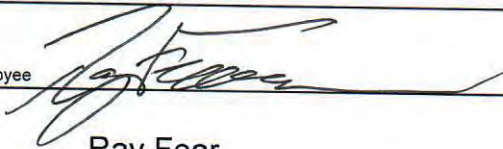
<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate Common Line Support Mechanism Projected Annual Common Line Revenue Requirement Form, on Behalf of Reporting Carrier</b>					
<p>I certify that <u>National Exchange Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 COOP TEL CO</u>					
Signature of authorized officer or employe <b>Shelly Franzenburg</b>				Digitally signed by Shelly Franzenburg DN: cn=Shelly Franzenburg, email=sfranzenburg@fctc.coop, O=farmers coop tel co, l=Dysart IA 52224-0280 Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Shelly Franzenburg</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>319-476-7800</u>					
Study Area Code of Reporting Carrier	<u>351162</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



**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>Farmers and Merchants</u>			
Signature of authorized officer or employee 			Date <u>3/18/2020</u>
Printed name of authorized officer or employee <u>Ray Fear</u>			
Title or position of authorized officer or employee <u>Manager</u>			
Telephone number of authorized officer or employee: ( <u>319</u> ) <u>256</u> - <u>2736</u> , ext.			
Study Area Code of Reporting Carrier	<u>351166</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL</u>					
Signature of authorized officer or employee <u>Josh Hveem</u>				Digitally signed by Josh Hveem DN:cn=Josh Hveem,email=jhveem@omnitel.biz,O=farmers mutual tel,l=Truro IA 50257, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Josh Hveem</u>					
Title or position of authorized officer or employee: <u>COO</u>					
Telephone number of authorized officer or employee: <u>641-765-4201</u>					
Study Area Code of Reporting Carrier	<u>351172</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>FARMERS MUTUAL COOP</u>					
Signature of authorized officer or employee <b>Curtis Eldred</b>				Digitally signed by Curtis Eldred DN:cn=Curtis Eldred,email=celdred@usacomm.coop,O=farmers mutual coop,l=Shellsburg IA 52332-0438, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL</u>					
Signature of authorized officer or employee <u>Kevin Cabbage</u>				Digitally signed by Kevin Cabbage DN:cn=Kevin Cabbage,email=kcabbage@fmtcnet.com,O=farmers mutual tel,l=Stanton IA 51573-0220, Date:3/16/2020	Date: <u>3/16/2020</u>
Printed name of authorized officer or employee: <u>Kevin Cabbage</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</u>					
Telephone number of authorized officer or employee: <u>712-829-2111</u>					
Study Area Code of Reporting Carrier	<u>351174</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO - BAT</u>					
Signature of authorized officer or employee <u>Joe Snyder</u>				Digitally signed by Joe Snyder DN:cn=Joe Snyder,email=jsnyder@cmtel.com,O=farmers tel co - bat,l=Bloomfield IA 52537, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO -RICE</u>					
Signature of authorized officer or employee <u>Josh Hveem</u>				Digitally signed by Josh Hveem DN:cn=Josh Hveem,email=jhveem@omnitel.biz,O=farmers tel co -rice,l=Truro IA 50257, Date:3/23/2020	
				Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Josh Hveem</u>					
Title or position of authorized officer or employee: <u>COO</u>					
Telephone number of authorized officer or employee: <u>641-765-4201</u>					
Study Area Code of Reporting Carrier		<u>351177</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GOLDFIELD TEL CO</u>					
Signature of authorized officer or employee <b>Jacob Berte</b>				Digitally signed by Jacob Berte DN:cn=Jacob Berte,email=jberte@ganiowa.com,O=goldfield tel co,l=Goldfield IA 50542, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Jacob Berte</u>					
Title or position of authorized officer or employee: <u>Accountant</u>					
Telephone number of authorized officer or employee: <u>515-825-3766</u>					
Study Area Code of Reporting Carrier	<u>351188</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GRISWOLD CO-OP TEL</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 co-op tel,l=Griswold IA 51535-0640, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HUXLEY COMM. COOP.</u>					
Signature of authorized officer or employee <u>Levi Bappe</u>				Digitally signed by Levi Bappe DN:cn=Levi Bappe,email=levi@huxleycommunications.net,O=huxley comm. coop.,l=Huxley IA 50124-0036, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Levi Bappe</u>					
Title or position of authorized officer or employee: <u>General Manager and Excutive 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>IAMO COMM - IA</u>					
Signature of authorized officer or employee <u>Jillinda Thornton</u>				Digitally signed by Jillinda Thornton DN:cn=Jillinda Thornton,email=jthornton@iamo.tel,O=iamo comm - ia, Coin IA 51636-0368, Date:3/20/2020	
				Date: <u>3/20/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FMTC-I35, INC.</u>					
Signature of authorized officer or employee <u>Jennifer R. Garrels</u>				Digitally signed by Jennifer R. Garrels DN: cn=Jennifer R. Garrels, email=jgarrels@omnitel.biz, O=fmtc-i35, inc, c=Truro, IA 50257-0229, Date: 3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Jennifer R. Garrels</u>					
Title or position of authorized officer or employee: <u>Accounting Manager - Southern Operations</u>					
Telephone number of authorized officer or employee: <u>641-765-4201</u>					
Study Area Code of Reporting Carrier	<u>351209</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KALONA COOP TEL CO</u>					
Signature of authorized officer or employee <u>Casey Peck</u>				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:3/24/2020	Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KEYSTONE FRMS COOP</u>					
Signature of authorized officer or employee <u>Byran Kimm</u>				Digitally signed by Byran Kimm DN:cn=Byran Kimm,email=keystone@netins.net,O=keystone frms coop,/=Keystone IA 52249-0277, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>LA PORTE CITY TEL CO</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=la porte city tel co,l=Elkader IA 52043, Date:3/18/2020 Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Chris Hopp</u>					
Title or position of authorized officer or employee: <u>Chief Operating Officer</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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</u>					
Signature of authorized officer or employee <b>Jim Suchan</b>				Digitally signed by Jim Suchan DN:cn=Jim Suchan,email=jsmgr@lvcta.com,O=lehigh valley coop,=Lehigh IA 50557, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Jim Suchan</u>					
Title or position of authorized officer or employee: <u>Chief Executive Officer</u>					
Telephone number of authorized officer or employee: <u>515-359-2211</u>					
Study Area Code of Reporting Carrier	<u>351225</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MINBURN TEL CO</u>					
Signature of authorized officer or employee <u>Debra Lucht</u>				Digitally signed by Debra Lucht DN:cn=Debra Lucht,email=debl@minburncomm.com,O=minburn tel co,l=Minburn IA 50167, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Debra Lucht</u>					
Title or position of authorized officer or employee: <u>General Manager/CEO</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>3/31/2020</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**  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MEDIAPOLIS TEL CO</u>					
Signature of authorized officer or employee <u>Angie Rupe</u>				Digitally signed by Angie Rupe DN:cn=Angie Rupe,email=arupe@mepotelco.net,O=mediapolis tel co,l=Mediapolis IA 52637, Date:3/23/2020	
Date: <u>3/23/2020</u>					
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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>OGDEN TEL CO - IA</u>					
Signature of authorized officer or employee <u>James R Heckman</u>				Digitally signed by James R Heckman DN: cn=James R Heckman, email=ogdenteljim@netins.net, O=ogden tel co - ia, l=Ogden IA 50212, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>James R 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PALO COOP TEL ASSN</u>					
Signature of authorized officer or employee <u>Erin Petersen</u>				Digitally signed by Erin Petersen DN:cn=Erin Petersen,email=palomanager@netins.net,O=palo coop tel assn,l=Palo IA 52324, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Erin Petersen</u>					
Title or position of authorized officer or employee: <u>CEO/General Manager</u>					
Telephone number of authorized officer or employee: <u>319-851-3431</u>					
Study Area Code of Reporting Carrier	<u>351269</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PANORA COMM COOP</u>					
Signature of authorized officer or employee <u>Andrew M. Randol</u>				<small>Digitally signed by Andrew M. Randol DN:cn=Andrew M. Randol,email=andrewrandol@panoratelco.com,O=panora comm coop,l=Panora JA 50216 Date:3/17/2020</small> Date: <u>3/17/2020</u>	
Printed name of authorized officer or employee: <u>Andrew M. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PRAIRIEBURG TEL CO</u>					
Signature of authorized officer or employe <u>LaRae Reichenauer</u>				Digitally signed by LaRae Reichenauer DN: cn=LaRae Reichenauer, email=prbgtele@netins.net, O=prairieburg tel.co, l=Prairieburg IA 52219-8826, Date: 3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>LaRae Reichenauer</u>					
Title or position of authorized officer or employee: <u>Secretary/Treasurer</u>					
Telephone number of authorized officer or employee: <u>319-437-3611</u>					
Study Area Code of Reporting Carrier	<u>351275</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PRESTON TEL CO</u>					
Signature of authorized officer or employee <u>MaryBeth Heister</u>				Digitally signed by MaryBeth Heister DN: cn=MaryBeth Heister, email=rogerak@prestonel.com, O=preston tel co, l=Preston IA 52069-0167, Date: 3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>MaryBeth Heister</u>					
Title or position of authorized officer or employee: <u>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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RINGSTED TEL CO</u>					
Signature of authorized officer or employee <u>Aaron McCartan</u>				Digitally signed by Aaron McCartan DN:cn=Aaron McCartan,email=aaron@ringstelco.com,O=ringsted tel co,l=Ringsted IA 50578, Date:3/25/2020	Date: <u>3/25/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/16/2020	
				Date: <u>3/16/2020</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>712-933-2615</u>					
Study Area Code of Reporting Carrier		<u>351283</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SHARON TEL CO</u>					
Signature of authorized officer or employee <u>Robert Joseph Schneider,</u> <small>Digitally signed by Robert Joseph Schneider, Jr.  DN: cn=Robert Joseph Schneider, Jr.  , email=sharontc@sharontc.net, O=sharon tel co, l=Hills  IA 52235 Date: 3/25/2020</small>				Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Robert Joseph Schneider, Jr.</u>					
Title or position of authorized officer or employee: <u>CEO</u>					
Telephone number of authorized officer or employee: <u>319-679-2211</u>					
Study Area Code of Reporting Carrier	<u>351293</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 SLOPE COOP TEL</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,=North Liberty IA 52317, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FMTC-I35 (SWT)</u>					
Signature of authorized officer or employee <u>Jennifer R. Garrels</u>				Digitally signed by Jennifer R. Garrels DN: cn=Jennifer R. Garrels, email=jgarrels@omnitel.biz, O=fmtc-i35 (swt), l=Truro, IA, 50257-0229, Date: 3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Jennifer R. Garrels</u>					
Title or position of authorized officer or employee: <u>Accounting Manager - Southern Operations</u>					
Telephone number of authorized officer or employee: <u>641-765-4201</u>					
Study Area Code of Reporting Carrier	<u>351301</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SPRINGVILLE COOP TEL</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,l=Springville IA 52336-0009, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SO. SLOPE-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=so. slope-swisher,l=North Liberty IA 52317, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>STRATFORD MUTUAL TEL</u>					
Signature of authorized officer or employee <b>Steven Frey</b>				Digitally signed by Steven Frey DN:cn=Steven Frey,email=sfrey@stratfordtelephone.com,O=stratford mutual tel,l=Stratford IA 50249-0438, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Steven Frey</u>					
Title or position of authorized officer or employee: <u>General 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>UNITED FARMERS TEL</u>					
Signature of authorized officer or employe <u>Roxanne White</u>				Digitally signed by Roxanne White DN:cn=Roxanne White,email=rwhite@evertek.net,O=united farmers tel,l=Everly IA 51338, Date:3/17/2020 Date: <u>3/17/2020</u>	
Printed name of authorized officer or employee: <u>Roxanne White</u>					
Title or position of authorized officer or employee: <u>Executive Vice President</u>					
Telephone number of authorized officer or employee: <u>712-834-2211</u>					
Study Area Code of Reporting Carrier		<u>351316</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>VAN HORNE COOP TEL</u>					
Signature of authorized officer or employee <u>Kerry Less</u>				Digitally signed by Kerry Less DN:cn=Kerry Less,email=canary@netins.net,O=van home coop tel,l=Van Horne IA 52346-0096, Date:3/18/2020 Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>VENTURA TEL CO, INC</u>					
Signature of authorized officer or employee <u>Thomas Lovell</u>				Digitally signed by Thomas Lovell DN:cn=Thomas Lovell,email=tomlovell@ctel.com,O=ventura tel co, inc,l=Clear Lake IA 50428-0066, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Thomas Lovell</u>					
Title or position of authorized officer or employee: <u>General Manager/Vice President</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WELLMAN COOP TEL</u>					
Signature of authorized officer or employe <u>Jayne S. Hochstedler</u>				Digitally signed by Jayne S. Hochstedler DN: cn=Jayne S. Hochstedler,email=wellman@netins.net,O=wellman coop.tel,lc=Wellman IA 52356-0170 Date:3/25/2020	
Printed name of authorized officer or employee: <u>Jayne S. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WEST LIBERTY TEL CO</u>					
Signature of authorized officer or employee <u>Jerry S. Melick</u>				Digitally signed by Jerry S. Melick DN:cn=Jerry S. Melick,email=jsmelick@corp.lcom.net,O=west liberty tel co,l=West Liberty IA 52776, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Jerry S. Melick</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Stacie Harris</u>					
Title or position of authorized officer or employee: <u>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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ACE TEL ASSN-MN</u>					
Signature of authorized officer or employee <u>Cynthia Sweet</u>				Digitally signed by Cynthia Sweet DN:cn=Cynthia Sweet,email=csweet@acentek.net,O=ace tel assn-mn,l=Houston MN 55943-0360, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CITY OF BARNESVILLE</u>					
Signature of authorized officer or employee <u>Guy Swenson</u>				Digitally signed by Guy Swenson DN:cn=Guy Swenson,email=gswenson@bvillemn.net,O=city of barnesville,l=Barnesville MN 56514, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Mark N. Roach</b>				Digitally signed by Mark N. Roach DN:cn=Mark N. Roach,email=mark.roach@ctctelcom.net,O=consolidated tel co.,l=Brainerd MN 56401-0972, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Mark N. Roach</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>218-454-1104</u>					
Study Area Code of Reporting Carrier	<u>361373</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>EMILY COOP TEL CO</u>					
Signature of authorized officer or employee <u>Josh Netland</u>				Digitally signed by Josh Netland DN:cn=Josh Netland,email=jnetland@emily.net,O=emily coop tel co,l=Emily MN 56447, Date:3/20/2020 Date: <u>3/20/2020</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>361387</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>MANCHESTER-HARTLAND</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,l=Manchester MN 56007, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **Manchester-Hartland Telephone Company**

Signature of authorized officer or employee  Date **07/06/2020**

Printed name of authorized officer or employee **Cory Hoerler**

Title or position of authorized officer or employee **Operations Manager**

Telephone number of authorized officer or employee: ( 507 ) 826 - 3212 , ext.

Study Area Code of Reporting Carrier	<b>361426</b>		Filing Due Date for this form (mm/dd/yyyy)	July 2020	
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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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Curt Kawlewski</b>				Digitally signed by Curt Kawlewski DN:cn=Curt Kawlewski,email=curtkawlewski@nu-telecom.net,O=scott rice tel co,l=New Ulm MN 56073, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Curt Kawlewski</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>507-233-4172</u>					
Study Area Code of Reporting Carrier	<u>361479</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TRI-CO/CROSSLAKE</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/crosslake, I=Emily MN 56447, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>THREE RIVER TELCO</u>					
Signature of authorized officer or employee <b>Steven Dorf</b>				<small>Digitally signed by Steven Dorf DN:cn=Steven Dorf,email=sdorf@threerivertelco.com,O=three river telco,l=Lynch NE 68746-0066, Date:3/23/2020</small> Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Steven Dorf</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO -NE</u>					
Signature of authorized officer or employe <u>J. Thomas Shoemaker</u>				Digitally signed by J. Thomas Shoemaker DN:cn=J. Thomas Shoemaker,email=tom.shoemaker@pnpt.com,O=cambridge tel co -ne,l=Cambridge NE 69022 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>J. Thomas Shoemaker</u>					
Title or position of authorized officer or employee: <u>V P Regulatory Affairs</u>					
Telephone number of authorized officer or employee: <u>308-697-3333</u>					
Study Area Code of Reporting Carrier	<u>371526</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>COZAD TEL CO</u>					
Signature of authorized officer or employee <b>Marcus D. Young</b>				Digitally signed by Marcus D. Young DN:cn=Marcus D. Young,email=myoung.ctc@cozadtel.net,O=cozad tel co,l=Cozad NE 69130, Date:3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Marcus D. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DILLER TEL CO</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 tel co,l=Diller NE 68343, Date:3/25/2020	
				Date: <u>3/25/2020</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>3/31/2020</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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VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GLENWOOD TEL MEMBER</u>					
Signature of authorized officer or employee <u>Stanley Rouse</u>				Digitally signed by Stanley Rouse DN:cn=Stanley Rouse,email=manager@glenwoodtelco.net,O=glenwood tel member,l=Blue Hill NE 68930, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HARTINGTON TELECOM</u>					
Signature of authorized officer or employee <b>Dave Nilles</b>				<small>Digitally signed by Dave Nilles DN:cn=Dave Nilles,email=dnilles@hartel.net,O=hartington telecom,l=Hartington NE 68739-0157, Date:3/18/2020</small> Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Dave Nilles</u>					
Title or position of authorized officer or employee: <u>CFO/ General Manager</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HARTMAN TEL EXCH INC</u>					
Signature of authorized officer or employee <u>Linda McKain</u>				Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=hartman tel exch inc,j=Benkelman NE 69021, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HEMINGFORD COOP TEL</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 tel,l=Hemingford NE 69348-0246, Date:3/25/2020 Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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>					
I certify that <u>National Exchange Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>HENDERSON CO-OP TEL</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 tel,I=Henderson NE 68371, Date:3/16/2020	
Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HERSHEY COOP TEL CO</u>					
Signature of authorized officer or employee <u>Rex Woolley</u>				Digitally signed by Rex Woolley DN:cn=Rex Woolley,email=rwoolley@hersheytel.net,O=hershey coop tel co,l=Hershey NE 69143, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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>					
I certify that <u>National Exchange Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>GLENWOOD NET SRV</u>					
Signature of authorized officer or employee <b>Stanley Rouse</b>				Digitally signed by Stanley Rouse DN:cn=Stanley Rouse,email=manager@glenwoodtelco.net,O=glenwood net srv,l=Blue Hill NE 68930, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PLAINVIEW TEL CO</u>					
Signature of authorized officer or employee <u>Grant Dummer</u>				Digitally signed by Grant Dummer DN:cn=Grant Dummer,email=gdummer@plvwtelco.net,O=plainview tel co,l=Plainview NE 68769-0117, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Grant Dummer</u>					
Title or position of authorized officer or employee: <u>General 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SE NEBRASKA COMM 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=se nebraska comm inc,l=Falls City NE 68355, Date:3/16/2020 Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>STANTON TELECOM INC.</u>					
Signature of authorized officer or employee <b>Robert J. Paden</b>				Digitally signed by Robert J. Paden DN:cn=Robert J. Paden,email=rjpaden@stanton.net,O=stanton telecom inc.,l=Stanton NE 68779, Date:3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Robert J. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WAUNETA TEL CO</u>					
Signature of authorized officer or employee <b>Linda McKain</b>				<small>Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=wauneta tel co,l=Benkelman NE 69021, Date:3/20/2020</small> Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BENKELMAN TEL CO</u>					
Signature of authorized officer or employee <u>Linda McKain</u>				Digitally signed by Linda McKain DN:cn=Linda McKain,email=lmckain@bwtelcom.net,O=benkelman tel co,l=Benkelman NE 69021, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 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:3/19/2020	
Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MIDSTATE TEL CO</u>					
Signature of authorized officer or employee <u>Ryan Wilhelmi</u>				Digitally signed by Ryan Wilhelmi DN:cn=Ryan Wilhelmi,email=ryanw@midstate.net,O=midstate tel co,l=Stanley ND 58784-0400, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Ryan Wilhelmi</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>701-628-2522</u>					
Study Area Code of Reporting Carrier	<u>381617</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NORTHWEST COMM COOP</u>					
Signature of authorized officer or employee <u>Jennifer Bingeman</u>				Digitally signed by Jennifer Bingeman DN: cn=Jennifer Bingeman, email=jenb@nccray.com, O=northwest comm coop, l=Ray ND 58849, Date: 3/19/2020	
Printed name of authorized officer or employee: <u>Jennifer Bingeman</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>701-568-8101</u>					
Study Area Code of Reporting Carrier	<u>381625</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL COOP</u>					
Signature of authorized officer or employee <u>Shane Hart</u>				Digitally signed by Shane Hart DN:cn=Shane Hart,email=shaneh@rtc.email,O=reservation tel coop, =Parshall ND 58770-0068, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Shane Hart</u>					
Title or position of authorized officer or employee: <u>CEO/ General Manager</u>					
Telephone number of authorized officer or employee: <u>701-862-3115</u>					
Study Area Code of Reporting Carrier	<u>381632</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>W. RIVER TELECOM.</u>					
Signature of authorized officer or employee <b>Troy Schilling</b>				<small>Digitally signed by Troy Schilling DN:cn=Troy Schilling,email=troys@wrtc.com,O=w. river telecom.,l=Hazen ND 58545, Date:3/20/2020</small> Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MIDSTATE COMM.</u>					
Signature of authorized officer or employee <u>Ryan Wilhelmi</u>				Digitally signed by Ryan Wilhelmi DN:cn=Ryan Wilhelmi,email=ryanw@midstate.net,O=midstate comm.,l=Stanley ND 58784-0400, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Ryan Wilhelmi</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>701-628-2522</u>					
Study Area Code of Reporting Carrier	<u>381638</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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>SRT COMMUNICATIONS, INC</u>			
Signature of authorized officer or employee <u>ASD</u>			Date <u>03/18/2020</u>
Printed name of authorized officer or employee <u>STEVE LYSNE</u>			
Title or position of authorized officer or employee <u>CEO</u>			
Telephone number of authorized officer or employee: ( <u>701</u> ) <u>858 5246</u> ext.			
Study Area Code of Reporting Carrier <u>383303</u>	Filing Due Date for this form (mm/dd/yyyy) <u>3/31/2020</u>	Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHEYENNE RIVER SIOUX</u>					
Signature of authorized officer or employe <b>Mona L Thompson</b>				Digitally signed by Mona L Thompson DN:cn=Mona L Thompson,email=monat@lakotanetwork.com,O=cheyenne river sioux,l=Eagle Butte SD 57625, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Mona L 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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</u>					
Signature of authorized officer or employee <b>Beth Rasmussen</b>				Digitally signed by Beth Rasmussen DN:cn=Beth Rasmussen,email=bethr@bmtc.net,O=beresford municipal,I=Beresford SD 57004, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Beth Rasmussen</u>					
Title or position of authorized officer or employee: <u>General Manager Assistant</u>					
Telephone number of authorized officer or employee: <u>605-763-2500</u>					
Study Area Code of Reporting Carrier	<u>391649</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CITY OF BROOKINGS</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,l=Brookings SD 57006, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CITY OF FAITH MUNIC</u>					
Signature of authorized officer or employee		<b>Debbie Brown</b> <small>Digitally signed by Debbie Brown DN:cn=Debbie Brown,email=faith@faithsd.com,O=city of faith munic,I=Faith SD 57626-0368, Date:3/18/2020</small>		Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Debbie Brown</u>					
Title or position of authorized officer or employee: <u>Finance Officer</u>					
Telephone number of authorized officer or employee: <u>605-967-2261</u>					
Study Area Code of Reporting Carrier	<u>391653</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>JEFFERSON TEL CO -SD</u>					
Signature of authorized officer or employee				<div style="text-align: center;"><b>Tom Connors</b> <small>Digitally signed by Tom Connors DN:cn=Tom Connors,email=tomc@longlines.biz,O=jefferson tel co -sd,l=Jefferson SD 57038-0128, Date:3/25/2020</small></div>	Date: <u>3/25/2020</u>
Printed name of authorized officer or employee: <u>Tom Connors</u>					
Title or position of authorized officer or employee: <u>Manager</u>					
Telephone number of authorized officer or employee: <u>605-966-5631</u>					
Study Area Code of Reporting Carrier	<u>391666</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KENNEBEC TEL CO</u>					
Signature of authorized officer or employee <b>Rod Bowar</b>				<small>Digitally signed by Rod Bowar DN:cn=Rod Bowar,email=rodb@kennebectelephone.com,O=kennebec tel co,l=Kennebec SD 57544, Date:3/23/2020</small> Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WEST RIVER(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(mobridge),l=Hazen ND 58545, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>				Digitally signed by Robin Thoreson DN:cn=Robin Thoreson,email=rthoreson@tnics.com,O=rc technologies,j=New Effington SD 57255-0197, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Robin Thoreson</u>					
Title or position of authorized officer or employee: <u>Accounting Manager</u>					
Telephone number of authorized officer or employee: <u>605-637-5211</u>					
Study Area Code of Reporting Carrier	<u>391674</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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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FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SANTEL COMM. COOP.</u>					
Signature of authorized officer or employee <u>Ryan Thompson</u>				Digitally signed by Ryan Thompson DN:cn=Ryan Thompson,email=rthompson@santel.coop,O=santel comm. coop.,l=Woonsocket SD 57385-0067, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TELECOMM.</u>					
Signature of authorized officer or employee <u>Jeff Symens</u>				Digitally signed by Jeff Symens DN:cn=Jeff Symens,email=jeff.s@valleytel.coop,O=valley telecomm.,l=Herreid SD 57632-0007, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CENTRAL ARKANSAS TEL</u>					
Signature of authorized officer or employee <u>Larry D Frazier</u>				Digitally signed by Larry D Frazier DN:cn=Larry D Frazier,email=larryf@catc.net,O=central arkansas tel,l=Bismarck AR 71929, Date:3/16/2020	
				Date: <u>3/16/2020</u>	
Printed name of authorized officer or employee: <u>Larry D 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>3/31/2020</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**

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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL</u>					
Signature of authorized officer or employee <b>Ramona Rosiere</b>				Digitally signed by Ramona Rosiere DN:cn=Ramona Rosiere,email=ramona@sgobroadband.com,O=cleveland county tel,l=Seneca MO 64865, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Ramona Rosiere</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>417-776-2247</u>					
Study Area Code of Reporting Carrier	<u>401698</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DECATUR TEL CO INC</u>					
Signature of authorized officer or employee <b>Ramona Rosiere</b>				Digitally signed by Ramona Rosiere DN:cn=Ramona Rosiere,email=ramona@sgobroadband.com,O=decatur tel co inc, Seneca MO 64865, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Ramona Rosiere</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>417-776-2247</u>					
Study Area Code of Reporting Carrier	<u>401699</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LAVACA TEL CO-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 tel co-ar,l=Lavaca AR 72941-0230, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MADISON COUNTY TEL</u>					
Signature of authorized officer or employee <b>Tom S. Shrum</b>				Digitally signed by Tom S. Shrum DN:cn=Tom S. Shrum,email=tomshrum@madisoncounty.net,O=madison county tel,l=Huntsville AR 72740, Date:3/16/2020	
Date: <u>3/16/2020</u>					
Printed name of authorized officer or employee: <u>Tom S. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NORTH ARKANSAS TEL</u>					
Signature of authorized officer or employee <u>Denise Russell</u>				<small>Digitally signed by Denise Russell DN:cn=Denise Russell,email=drussell@natconet.com,O=north arkansas tel,l=Chattaroy WA 99003, Date:3/25/2020</small> Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Denise Russell</u>					
Title or position of authorized officer or employee: <u>Revenue Req Mgr</u>					
Telephone number of authorized officer or employee: <u>509-238-2961</u>					
Study Area Code of Reporting Carrier	<u>401713</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PRAIRIE GROVE TEL CO</u>					
Signature of authorized officer or employee <u>Rick Reed</u>				Digitally signed by Rick Reed DN:cn=Rick Reed,email=treed@pgtc.com,O=prairie grove tel co,l=Prairie Grove AR 72753-1010, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

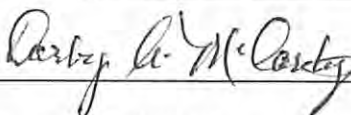
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FCC FORM 508 ON THE CARRIER'S BEHALF:

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 Rice Belt Telephone Company Inc.

Signature of authorized officer or employee

Date 3/17/2020

Printed name of authorized officer or employee

Darby A. McCarty

Title or position of authorized officer or employee

PresidentTelephone number of authorized officer or employee: ( 812 ) 876 - 2211 , ext.

Study Area Code of Reporting Carrier

401721Filing Due Date for this form  
(mm/dd/yyyy)3/31/2020

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

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SW ARKANSAS TEL COOP</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=sw arkansas tel coop, =Texarkana AR 71854-8073, Date:3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BLUE VALLEY TELE-COM</u>					
Signature of authorized officer or employee <u>Amy Peschel</u>				Digitally signed by Amy Peschel DN:cn=Amy Peschel,email=apeschel@bluevalleyinc.net,O=blue valley tele-com,I=Home KS 66438, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Amy Peschel</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>785-799-3663</u>					
Study Area Code of Reporting Carrier	<u>411746</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>COUNCIL GROVE TEL CO</u>					
Signature of authorized officer or employee <u>Dale L. Jones</u>				Digitally signed by Dale L. Jones DN:cn=Dale L. Jones,email=djones@tctainc.net,O=council grove tel co,l=Council Grove KS 66846-0299, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Dale L. 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>3/31/2020</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**

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CUNNINGHAM TEL CO</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=cunnin gham tel co,l=Glen Elder KS 67446-0108, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ELKHART TEL CO INC</u>					
Signature of authorized officer or employe <b>Becky Scott</b>				Digitally signed by Becky Scott DN:cn=Becky Scott,email=bscott@epictouch.com,O=elkhart tel co inc,I=Elkhart KS 67950, Date:3/21/2020 Date: <u>3/21/2020</u>	
Printed name of authorized officer or employee: <u>Becky Scott</u>					
Title or position of authorized officer or employee: <u>Interim 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GOLDEN BELT TEL ASSN</u>					
Signature of authorized officer or employee <b>Beau D. Rebel</b>				Digitally signed by Beau D. Rebel DN:cn=Beau D. Rebel,email=brebel@gbtlive.com,O=golden belt tel assn,l=Rush Center KS 67575, Date:3/27/2020	
				Date: <u>3/27/2020</u>	
Printed name of authorized officer or employee: <u>Beau D. 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>3/31/2020</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**

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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GORHAM TEL CO</u>					
Signature of authorized officer or employee <u>Tonya Murphy</u>				Digitally signed by Tonya Murphy DN:cn=Tonya Murphy,email=tmurphy@gorhamtel.com,O=gorham tel co,l=Gorham KS 67640-0235, Date:3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <u>Tina Anderson</u>				Digitally signed by Tina Anderson DN:cn=Tina Anderson,email=tanderson@hci-ks.com,O=home tel co,l=Galva KS 67443, Date:3/17/2020	Date: <u>3/17/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KANOKLA TEL ASSN-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 tel assn-ks,l=Caldwell KS 67022-0111, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Jill Kuehny</u>					
Title or position of authorized officer or employee: <u>Chief Executive 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MADISON TEL., LLC</u>					
Signature of authorized officer or employee <u>Shana Rains</u>				Digitally signed by Shana Rains DN:cn=Shana Rains,email=mtn.shana@gmail.com,O=madison tel., llc,l=Madison KS 66860, Date:3/17/2020	
Date: <u>3/17/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MUTUAL TEL CO</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 tel co,l=Little River KS 67457, Date:3/25/2020	
				Date: <u>3/25/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PEOPLES TELECOM LLC</u>					
Signature of authorized officer or employee <b>Daniel Welch</b>				Digitally signed by Daniel Welch DN:cn=Daniel Welch,email=dwelch@peopletelecom.net,O=peoples telecom llc,l=Lacygne KS 66040-0186, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Daniel Welch</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PIONEER TEL ASSN INC</u>					
Signature of authorized officer or employee		<u>Becky Zerr</u> <small>Digitally signed by Becky Zerr DN:cn=Becky Zerr,email=becky.zerr@pioncomm.net,O=pioneer tel assn inc,i=Ulysses KS 67880, Date:3/17/2020</small>		Date: <u>3/17/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CRAW-KAN TEL COOP</u>					
Signature of authorized officer or employee <b>Craig Wilbert</b>				Digitally signed by Craig Wilbert DN:cn=Craig Wilbert,email=crwilbert@ckt.net,O=craw-kan tel coop,l=Girard KS 66743-0100, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>RAINBOW TELECOM</u>					
Signature of authorized officer or employe <b>Kathy Ruoff</b>				Digitally signed by Kathy Ruoff DN:cn=Kathy Ruoff,email=kathy@rainbowtel.com,O=rainbow telecom,l=Everest KS 66424, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Kathy Ruoff</u>					
Title or position of authorized officer or employee: <u>Controller/CFO</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

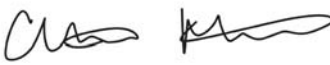
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>S &amp; T TEL COOP ASSN</u>					
Signature of authorized officer or employe <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: 3/25/2020	
Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 **S & T TEL COOP ASSN**

Signature of authorized officer or employee 

Date **09/03/2020**

Printed name of authorized officer or employee **Christina Hickert**

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

Telephone number of authorized officer or employee: ( **785** ) **694** - **2256** , ext.

Study Area Code of Reporting Carrier	<b>411827</b>		Filing Due Date for this form (mm/dd/yyyy)	September 2020	
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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**

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>S. CENTRAL TEL - 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=s. central tel - ks,l=Medicine Lodge KS 67104, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SOUTHERN KANSAS TEL</u>					
Signature of authorized officer or employee <u>William R. McVey</u>				Digitally signed by William R. McVey DN:cn=William R. McVey,email=bill@sktc.net,O=southern kansas tel,l=Clearwater KS 67026-0800, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>William R. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TRI-COUNTY TEL ASSN</u>					
Signature of authorized officer or employee <b>Dale L. Jones</b>				Digitally signed by Dale L. Jones DN:cn=Dale L. Jones,email=djones@tctainc.net,O=tri-county tel assn,l=Council Grove KS 66846-0299, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Dale L. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>UNITED TEL ASSN</u>					
Signature of authorized officer or employee <u>Jennifer Pachner</u>				Digitally signed by Jennifer Pachner DN:cn=Jennifer Pachner,email=jenniferp@unitedtelcom.net,O=united tel assn,l=Dodge City KS 67801, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Jennifer Pachner</u>					
Title or position of authorized officer or employee: <u>Controller</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WHEAT STATE TEL, 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 tel, inc,I=Udall KS 67146, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WILSON TEL CO INC</u>					
Signature of authorized officer or employee <u>Brian Boisvert</u>				Digitally signed by Brian Boisvert DN:cn=Brian Boisvert,email=boisvert@wilsoncom.us,O=wilson tel co inc,l=Wilson KS 67490-0190, Date:3/18/2020 Date: <u>3/18/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BPS Tel. Co.</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 tel. co.,l=Bernie MO 63822-0550, Date:3/26/2020	
Date: <u>3/26/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>IAMO COMM - MO</u>					
Signature of authorized officer or employee <u>Jillinda Thornton</u>				Digitally signed by Jillinda Thornton DN:cn=Jillinda Thornton,email=jthornton@iamo.tel,O=iamo comm - mo,I=Coin IA 51636-0368, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ALMA COMM. CO.</u>					
Signature of authorized officer or employee <u>Adolf L. Heins</u>				Digitally signed by Adolf L. Heins DN:cn=Adolf L. Heins,email=aheins@almanet.net,O=alma comm. co.,l=Alma MO 64001, Date:3/21/2020	
Date: <u>3/21/2020</u>					
Printed name of authorized officer or employee: <u>Adolf L. Heins</u>					
Title or position of authorized officer or employee: <u>General Manager</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 Tel. Co.</u>					
Signature of authorized officer or employee <b>Ramona Rosiere</b>				Digitally signed by Ramona Rosiere DN:cn=Ramona Rosiere,email=ramona@sgobroadband.com,O=ozark tel. co.,l=Seneca MO 64865, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Ramona Rosiere</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>417-776-2247</u>					
Study Area Code of Reporting Carrier	<u>421866</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FARBER TEL CO</u>					
Signature of authorized officer or employee <u>Wendy Ottman</u>				Digitally signed by Wendy Ottman DN:cn=Wendy Ottman,email=wendy@missouricom.co,O=farber tel co,l=Oregon MO 64473, Date:3/16/2020	Date: <u>3/16/2020</u>
Printed name of authorized officer or employee: <u>Wendy Ottman</u>					
Title or position of authorized officer or employee: <u>Vice President of Finance</u>					
Telephone number of authorized officer or employee: <u>573-835-4051</u>					
Study Area Code of Reporting Carrier	<u>421876</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GOODMAN TEL CO</u>					
Signature of authorized officer or employee <b>Ramona Rosiere</b>				Digitally signed by Ramona Rosiere DN:cn=Ramona Rosiere,email=ramona@sgobroadband.com,O=goodman tel co,l=Seneca MO 64865, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Ramona Rosiere</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>417-776-2247</u>					
Study Area Code of Reporting Carrier	<u>421886</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GRANBY TEL CO - MO</u>					
Signature of authorized officer or employee <b>Cheri M. Johnson</b>				Digitally signed by Cheri M. Johnson DN:cn=Cheri M. Johnson,email=cheri@jscomm.net,O=granby tel co - mo,l=Granby MO 64844, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Cheri M. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KINGDOM TELEPHONE CO</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 co,l=Auxvasse MO 65231, Date:3/17/2020	
Date: <u>3/17/2020</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>	<div style="background-color: #cccccc; width: 50px; height: 20px;"></div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	<div style="background-color: #cccccc; width: 50px; height: 20px;"></div>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement FormFCC 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 <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>McDonald County Telephone Company</u>			
Signature of authorized officer or employee 			Date <u>3-25-2020</u>
Printed name of authorized officer or employee <u>Ross M. Babbitt</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>417</u> ) <u>223</u> - <u>4313</u> , ext.			
Study Area Code of Reporting Carrier	<u>421912</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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. 1607

**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 Miller Telephone Company

Signature of authorized officer or employee

*John R Ludenia*

Date

03/25/2020

Printed name of authorized officer or employee

John R Ludenia

Title or position of authorized officer or employee

Vice President

Telephone number of authorized officer or employee: ( 304 ) 983 - 8642 , ext.

Study Area Code of Reporting Carrier

421920

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

3/31/2020

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



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NE MISSOURI RURAL</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=ne missouri rural,l=Green City MO 63545-0098, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Ramona Rosiere</b>				Digitally signed by Ramona Rosiere DN:cn=Ramona Rosiere,email=ramona@sgobroadband.com,O=seneca tel co,l=Seneca MO 64865, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Ramona Rosiere</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>417-776-2247</u>					
Study Area Code of Reporting Carrier	<u>421945</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LAVACA TEL CO-OK</u>					
Signature of authorized officer or employee <b>Keith Gibson</b>				<small>Digitally signed by Keith Gibson DN:cn=Keith Gibson,email=keithg@pinncom.com,O=lavaca tel co-ok,l=Lavaca AR 72941-0230, Date:3/17/2020</small> Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KANOKLA TEL ASSN-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 tel assn-ok,l=Caldwell KS 67022-0111, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Jill Kuehny</u>					
Title or position of authorized officer or employee: <u>Chief Executive 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>S. CENTRAL TEL - 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=s. central tel - ok,l=Medicine Lodge KS 67104, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BEGGS TEL CO</u>					
Signature of authorized officer or employee <b>Kay H. Mount</b>				Digitally signed by Kay H. Mount DN:cn=Kay H. Mount,email=staff@beggstelco.net,O=beggs tel co,l=Beggs OK 74421-0749, Date:3/18/2020 Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Kay H. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BIXBY TEL CO</u>					
Signature of authorized officer or employee <u>Scott Lowry</u>				Digitally signed by Scott Lowry DN:cn=Scott Lowry,email=slowry@olp.net,O=bixby tel co,l=Bixby OK 74008, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Scott Lowry</u>					
Title or position of authorized officer or employee: <u>President &amp; CEO</u>					
Telephone number of authorized officer or employee: <u>918-366-0250</u>					
Study Area Code of Reporting Carrier		<u>431969</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CANADIAN VALLEY TEL</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 tel,1=Crowder OK 74430, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CENTRAL OKLAHOMA TEL</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 tel,l=Davenport OK 74026-0789, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHICKASAW TEL CO</u>					
Signature of authorized officer or employee <u>Larry D. Jones</u>				Digitally signed by Larry D. Jones DN:cn=Larry D. Jones,email=larry@chickasawphone.net,O=chickasaw tel co,l=Sulphur OK 73086-0460, Date:3/23/2020	Date: <u>3/23/2020</u>
Printed name of authorized officer or employee: <u>Larry D. 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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GRAND TEL 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 tel co inc, =Jay OK 74346-0308, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MEDICINE PARK TEL CO</u>					
Signature of authorized officer or employee <u>Dean Pennello</u>				Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=medicine park tel co,l=Lawton OK 73557, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PANHANDLE TEL COOP</u>					
Signature of authorized officer or employee <u>Kelley Wells</u>				Digitally signed by Kelley Wells DN:cn=Kelley Wells,email=kelley.wells@ptci.net,O=panhandle tel coop, =Guymon OK 73942, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PINE TELEPHONE CO</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, =Broken Bow OK 74728, Date:3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Jane Merz</u>					
Title or position of authorized officer or employee: <u>Accounting Supervisor</u>					
Telephone number of authorized officer or employee: <u>580-584-3100</u>					
Study Area Code of Reporting Carrier	<u>432017</u>	<div style="background-color: #cccccc; width: 50px; height: 20px;"></div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	<div style="background-color: #cccccc; width: 50px; height: 20px;"></div>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KANOKLA SHIDLER</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 shidler,I=Caldwell KS 67022-0111, Date:3/23/2020	
				Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Jill Kuehny</u>					
Title or position of authorized officer or employee: <u>Chief Executive 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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TERRAL TEL CO</u>					
Signature of authorized officer or employee <u>Chad Segress</u>				Digitally signed by Chad Segress DN:cn=Chad Segress,email=chad@wavelinx.com,O=terral tel co,l=Oklahoma City OK 73134, Date:3/24/2020	
				Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TOTAH COMMUNICATIONS</u>					
Signature of authorized officer or employee <b>Keith E. Watson</b>				Digitally signed by Keith E. Watson DN:cn=Keith E. Watson,email=kewatson@totelcsi.com,O=totah communications,l=Ochelata OK 74051-0300, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Keith E. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employe <b>Ramona Rosiere</b>				Digitally signed by Ramona Rosiere DN:cn=Ramona Rosiere,email=ramona@sgobroadband.com,O=wyandotte tel co, Seneca MO 64865, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Ramona Rosiere</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>417-776-2247</u>					
Study Area Code of Reporting Carrier	<u>432034</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BLOSSOM TEL CO</u>					
Signature of authorized officer or employee <u>Clint Dorries</u>				Digitally signed by Clint Dorries DN:cn=Clint Dorries,email=clint@blossomtel.net,O=blossom tel co,l=Blossom TX 75416, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Clint Dorries</u>					
Title or position of authorized officer or employee: <u>President</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BIG BEND TEL CO INC</u>					
Signature of authorized officer or employee <b>Lauren Sanders</b>				Digitally signed by Lauren Sanders DN:cn=Lauren Sanders,email=lauren.sanders@bbtco.com,O=big bend tel co inc,l=Alpine TX 79830, Date:3/25/2020	
Date: <u>3/25/2020</u>					
Printed name of authorized officer or employee: <u>Lauren Sanders</u>					
Title or position of authorized officer or employee: <u>VP Commercial</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BRAZORIA TEL CO</u>					
Signature of authorized officer or employee <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:3/18/2020 Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>COMMUNITY TEL CO</u>					
Signature of authorized officer or employee <u>Clifford Humpert</u>				Digitally signed by Clifford Humpert DN:cn=Clifford Humpert,email=cliffhumpert@comcell.net,O=community tel co,l=Windthorst TX 76389, Date:3/20/2020 Date: <u>3/20/2020</u>	
Printed name of authorized officer or employee: <u>Clifford Humpert</u>					
Title or position of authorized officer or employee: <u>President/General Manager</u>					
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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DELL TEL. CO-OP - 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 tel. co-op - tx,l=Dell City TX 79837, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>EASTEX TEL COOP 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 tel coop inc,l=Henderson TX 75653-0150, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ELECTRA TELEPHONE CO</u>					
Signature of authorized officer or employee <u>Dean Pennello</u>				Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=electra telephone co,lc= , Date:3/24/2020	
Date: <u>3/24/2020</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>580-529-5000</u>					
Study Area Code of Reporting Carrier		<u>442069</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BORDER TO BORDER</u>					
Signature of authorized officer or employee <u>Dean Pennello</u>				Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=border to border,lc= , Date:3/24/2020	
Date: <u>3/24/2020</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>580-529-5000</u>					
Study Area Code of Reporting Carrier	<u>442073</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GANADO TEL.</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 tel.,l=Ganado TX 77962, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GUADALUPE VALLEY TEL</u>					
Signature of authorized officer or employee <b>Tim Grosse</b>				Digitally signed by Tim Grosse DN:cn=Tim Grosse,email=Tim.grosse@gvtc.net,O=guadalupe valley tel,l=New Braunfels TX 78132, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Tim Grosse</u>					
Title or position of authorized officer or employee: <u>Manager - Regulatory</u>					
Telephone number of authorized officer or employee: <u>830-885-8256</u>					
Study Area Code of Reporting Carrier	<u>442083</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ALENCO COMMUNICATION</u>					
Signature of authorized officer or employee <b>Mary Jo Moncrief</b>				<small>Digitally signed by Mary Jo Moncrief DN:cn=Mary Jo Moncrief,email=maryjo@usapathway.com,O=alenco communication l=Joshua TX 76058 Date:3/23/2020</small> Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ETS TEL. CO., 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 tel. co., inc.,l=Houston TX 77042, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Devi Sarwal</u>					
Title or position of authorized officer or employee: <u>Chief Strategy Officer</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 WARD TEL EXCHANGE</u>					
Signature of authorized officer or employee <b>Terri Parker</b>				Digitally signed by Terri Parker DN:cn=Terri Parker,email=terri@laward.org,O=la ward tel exchange,l=La Ward TX 77970-0246, Date:3/20/2020 Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LIPAN TEL CO</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 tel co, L=lipan TX 76462, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LIVINGSTON TEL CO</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 tel co,l=Livingston TX 77351, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MUENSTER DBA NORTEX</u>					
Signature of authorized officer or employee <u>Alan Rohmer</u>				Digitally signed by Alan Rohmer DN:cn=Alan Rohmer,email=arohmer@nortex.com,O=muenster dba nortex,l=Muenster TX 76252, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PEOPLES TEL COOP -TX</u>					
Signature of authorized officer or employee <u>Lloyd Steven Steele</u>				Digitally signed by Lloyd Steven Steele DN:cn=Lloyd Steven Steele,email=steven.steele@gopeoples.net,O=people s.tel.coop-tx,l=Quitman,TX 75783-0228 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Lloyd Steven 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SOUTHWEST TEXAS COMM</u>					
Signature of authorized officer or employee <b>Steve Evans</b>				Digitally signed by Steve Evans DN:cn=Steve Evans,email=steve@swtexas.com,O=southwest texas comm,l=Rocksprings TX 78880, Date:3/16/2020	
Date: <u>3/16/2020</u>					
Printed name of authorized officer or employee: <u>Steve Evans</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>830-683-1917</u>					
Study Area Code of Reporting Carrier	<u>442135</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TATUM TEL CO</u>					
Signature of authorized officer or employee <u>Dean Pennello</u>				Digitally signed by Dean Pennello DN:cn=Dean Pennello,email=dean.pennello@hillcom.net,O=tatum tel co,l= , Date:3/24/2020	
Date: <u>3/24/2020</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>580-529-5000</u>					
Study Area Code of Reporting Carrier	<u>442150</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO-OP -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 tel co-op -tx,l=Raymondville TX 78580, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SAN CARLOS APACHE</u>					
Signature of authorized officer or employee <u>Shirley Ortiz</u>				Digitally signed by Shirley Ortiz DN:cn=Shirley Ortiz,email=shirley.ortiz@scatui.com,O=san carlos apache,I=Peridot AZ 85542, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GILA RIVER TELECOM.</u>					
Signature of authorized officer or employee <u>James Meyers</u>				Digitally signed by James Meyers DN:cn=James Meyers,email=jmeyers@gilarivertel.com,O=gila river telecom.,l=Chandler AZ 85226, Date:3/26/2020	Date: <u>3/26/2020</u>
Printed name of authorized officer or employee: <u>James Meyers</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>520-796-8885</u>					
Study Area Code of Reporting Carrier	<u>452179</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FORT MOJAVE TEL, INC</u>					
Signature of authorized officer or employee <u>Michael Scully</u>				Digitally signed by Michael Scully DN:cn=Michael Scully,email=mscully@ftmojave.com,O=fort mojave tel, inc,l=Mohave Valley AZ 86440, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Michael Scully</u>					
Title or position of authorized officer or employee: <u>General Manager</u>					
Telephone number of authorized officer or employee: <u>928-346-2523</u>					
Study Area Code of Reporting Carrier	<u>452200</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

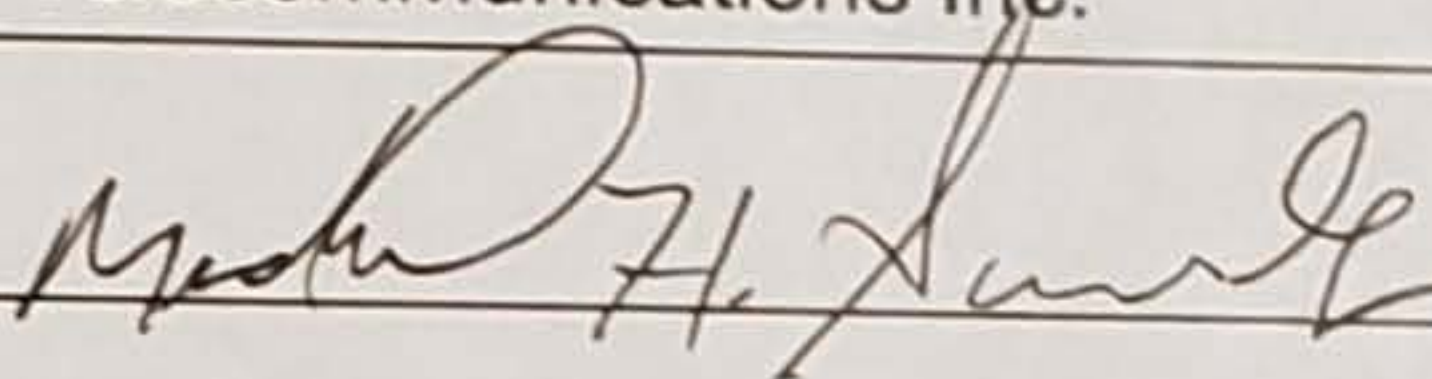


**Certification of Officer or Employee as to the Accuracy of the Broadband-Only Data supplied to NECA**

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 **Fort Mojave Telecommunications Inc.**

Signature of authorized officer or employee



Date

**07/06/2020**

Printed name of authorized officer or employee

**Michael H Scully**

Title or position of authorized officer or employee

**General Manager**

Telephone number of authorized officer or employee: ( 928 ) 346 - 2500 , ext.

Study Area Code of Reporting Carrier

**452200**

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

July 2020

**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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MIDVALE-AZ</u>					
Signature of authorized officer or employee <u>John Stuart</u>				Digitally signed by John Stuart DN:cn=John Stuart,email=john.stuart@mtcom.com,O=midvale-az, =Midvale ID 83645, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BLANCA NETWORKS</u>					
Signature of authorized officer or employee <u>Alan Wehe</u>				Digitally signed by Alan Wehe DN:cn=Alan Wehe,email=alanwehe@gojade.org,O=blanca networks,l=Alamosa CO 81101, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NUNN TEL CO</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 co,l=Nunn CO 80648, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ALBION TEL CO-ATC</u>					
Signature of authorized officer or employe <b>Rich Redman</b>				Digitally signed by Rich Redman DN:cn=Rich Redman,email=rredman@atcomm.com,O=albion tel co-atc,j=Albion ID 83311, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CUSTER TEL COOP</u>					
Signature of authorized officer or employee <b>Dennis Thornock</b>				Digitally signed by Dennis Thornock DN:cn=Dennis Thornock,email=dennis.thornock@custertel.com,O=custer tel coop, =Challis ID 83226, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FILER MUT-ID/TRULEAP</u>					
Signature of authorized officer or employee <b>Bob Kraut</b>				Digitally signed by Bob Kraut DN:cn=Bob Kraut,email=bkraut@truleap.net,O=filer mut-id/truleap,I=Filr ID 83328-0089, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Bob Kraut</u>					
Title or position of authorized officer or employee: <u>General Manager/COO</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>3/31/2020</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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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL</u>					
Signature of authorized officer or employe <b>Daniel E. Greig</b>				<small>Digitally signed by Daniel E. Greig DN:cn=Daniel E. Greig,email=dan@fmtc.com,O=farmers mutual tel,l=Fruitland ID 83619, Date:3/18/2020</small> Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Daniel E. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MIDVALE TEL EXCH INC</u>					
Signature of authorized officer or employee <u>John Stuart</u>				Digitally signed by John Stuart DN:cn=John Stuart,email=john.stuart@mtcom.com,O=midvale tel exch inc, Midvale ID 83645, Date:3/23/2020	Date: <u>3/23/2020</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DIRECT COMM-ROCKLAND</u>					
Signature of authorized officer or employe <b>Bruce Steed</b>				Digitally signed by Bruce Steed DN:cn=Bruce Steed,email=bruce@directcom.com,O=direct comm-rockland,I=Rockland ID 83271, Date:3/24/2020	
Date: <u>3/24/2020</u>					
Printed name of authorized officer or employee: <u>Bruce Steed</u>					
Title or position of authorized officer or employee: <u>Accountant</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>3/31/2020</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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>INTERBEL TEL COOP</u>					
Signature of authorized officer or employee <u>Virginia Henke</u>				Digitally signed by Virginia Henke DN:cn=Virginia Henke,email=jhenke@interbel.com,O=interbel tel coop,l=Eureka MT 59917, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Virginia Henke</u>					
Title or position of authorized officer or employee: <u>Chief Financial Officer</u>					
Telephone number of authorized officer or employee: <u>406-889-1076</u>					
Study Area Code of Reporting Carrier	<u>482242</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>3-RIVERS TEL COOP</u>					
Signature of authorized officer or employe <b>David M. Massey</b>				<small>Digitally signed by David M. Massey DN:cn=David M. Massey,email=david.massey@3rivers.coop,O=3-rivers tel coop,l=Fairfield MT 59436, Date:3/24/2020</small> Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>David M. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TRIANGLE TEL COOP</u>					
Signature of authorized officer or employee				<u>Keri Pike</u> <small>Digitally signed by Keri Pike DN:cn=Keri Pike,email=kpike@itstriangle.net,O=triangle tel coop, Inc., Date:3/25/2020</small>	Date: <u>3/25/2020</u>
Printed name of authorized officer or employee: <u>Keri Pike</u>					
Title or position of authorized officer or employee: <u>Administrative Specialist</u>					
Telephone number of authorized officer or employee: <u>406-394-7807</u>					
Study Area Code of Reporting Carrier	<u>482257</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

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

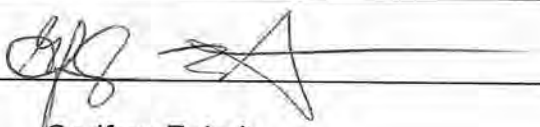
TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TRIANGLE-CMC</u>					
Signature of authorized officer or employee <b>Keri Pike</b>				Digitally signed by Keri Pike DN:cn=Keri Pike,email=kpike@itstriangle.net,O=triangle-cmc,lc= , Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Keri Pike</u>					
Title or position of authorized officer or employee: <u>Administrative Specialist</u>					
Telephone number of authorized officer or employee: <u>406-394-7807</u>					
Study Area Code of Reporting Carrier	<u>483310</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>Mescalero Apache Telecom, Inc.</u>			
Signature of authorized officer or employee 			Date <u>3/19/20</u>
Printed name of authorized officer or employee <u>Godfrey Enjady</u>			
Title or position of authorized officer or employee <u>General Manager</u>			
Telephone number of authorized officer or employee: ( 575 ) 464 - 4039 , ext.			
Study Area Code of Reporting Carrier	491231	Filing Due Date for this form (mm/dd/yyyy)	3/31/2020
<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**

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DELL TEL CO-OP - 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 tel co-op - nm,l=Dell City TX 79837, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BACA VALLEY TEL CO</u>					
Signature of authorized officer or employee <b>Paul J. Briesh</b>				Digitally signed by Paul J. Briesh DN:cn=Paul J. Briesh,email=paulbvt@bacavalley.net,O=baca valley tel co,l=Des Moines NM 88418, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Paul J. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ENMR TEL COOP INC-NM</u>					
Signature of authorized officer or employee <u>Alan Herman</u>				Digitally signed by Alan Herman DN:cn=Alan Herman,email=alanh@plateautel.com,O=enmr tel coop inc-nm,l=Clovis NM 88101, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Alan Herman</u>					
Title or position of authorized officer or employee: <u>Controller</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



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

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

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

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 JICARITA RURAL</u>					
Signature of authorized officer or employee <u>Danny Gray</u>				Digitally signed by Danny Gray DN:cn=Danny Gray,email=dgray@lajicarita.com,O=la jicarita rural,l=Mora NM 87732-0269, Date:3/18/2020 Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>LEACO RURAL TEL COOP</u>					
Signature of authorized officer or employee <b>Steve Mueller</b>				Digitally signed by Steve Mueller DN:cn=Steve Mueller,email=smueller@leaco.org,O=leaco rural tel coop, =Hobbs NM 88240, Date:3/20/2020	
Date: <u>3/20/2020</u>					
Printed name of authorized officer or employee: <u>Steve Mueller</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>575-433-4728</u>					
Study Area Code of Reporting Carrier	<u>492264</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>Tularosa Basin Tel.</u>					
Signature of authorized officer or employe <b>Joshua Beug</b>				Digitally signed by Joshua Beug DN:cn=Joshua Beug,email=jbeug@tbt.net,O=tularosa basin tel.,l=Tularosa NM 88352, Date:3/24/2020 Date: <u>3/24/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PENASCO VALLEY TEL</u>					
Signature of authorized officer or employee <b>Kurt Garrard</b>				Digitally signed by Kurt Garrard DN:cn=Kurt Garrard,email=kgarrard@pvt.com,O=penasco valley tel,l=Artesia NM 88210, Date:3/23/2020	
Date: <u>3/23/2020</u>					
Printed name of authorized officer or employee: <u>Kurt Garrard</u>					
Title or position of authorized officer or employee: <u>CFO</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SACRED WIND</u>					
Signature of authorized officer or employee <u>Terry Clark</u>				Digitally signed by Terry Clark DN:cn=Terry Clark,email=tclark@sacredwindnm.com,O=sacred wind,l=Albuquerque NM 87109, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>DIRECTCOMM-CEDAR VAL</u>					
Signature of authorized officer or employee <b>Bruce Steed</b>				Digitally signed by Bruce Steed DN:cn=Bruce Steed,email=bruce@directcomm.com,O=directcomm-cedar val,l=Rockland ID 83271, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Bruce Steed</u>					
Title or position of authorized officer or employee: <u>Accountant</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>EMRY dba EMRY TELCOM</u>					
Signature of authorized officer or employee <u>Jake Frandsen</u>				Digitally signed by Jake Frandsen DN:cn=Jake Frandsen,email=jfrandsen@emrytelcom.com,O=emry dba emry telcom,l=Orangeville UT 84537, Date:3/16/2020	
Date: <u>3/16/2020</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>435-748-3151</u>					
Study Area Code of Reporting Carrier		<u>502278</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not 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>MANTI TEL CO</u>					
Signature of authorized officer or employee <b>Tami Hansen</b>				Digitally signed by Tami Hansen DN:cn=Tami Hansen,email=tami@mail.manti.com,O=manti tel co,l=Manti UT 84642, Date:3/17/2020 Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 CENTRAL UTAH</u>					
Signature of authorized officer or employe <b>Michael R East</b>				Digitally signed by Michael R East DN:cn=Michael R East,email=michaele@socen.com,O=south central utah,l=Kanab UT 84741, Date:3/24/2020 Date: <u>3/24/2020</u>	
Printed name of authorized officer or employee: <u>Michael R East</u>					
Title or position of authorized officer or employee: <u>President/CEO</u>					
Telephone number of authorized officer or employee: <u>435-826-4211</u>					
Study Area Code of Reporting Carrier	<u>502286</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TRI COUNTY TEL ASSN</u>					
Signature of authorized officer or employee <u>Paula Riley</u>				Digitally signed by Paula Riley DN:cn=Paula Riley,email=paula.riley@tctstaff.com,O=tri county tel assn,l=Basin WY 82410, Date:3/19/2020 Date: <u>3/19/2020</u>	
Printed name of authorized officer or employee: <u>Paula Riley</u>					
Title or position of authorized officer or employee: <u>Controller</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>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SKYLINE TELECOM CO.</u>					
Signature of authorized officer or employe <b>Delinda Kluser</b>				Digitally signed by Delinda Kluser DN:cn=Delinda Kluser,email=deedeek@otcconnections.net,O=skyline telecom co.,l=Mt. Vernon OR 97865-0609, Date:3/16/2020	
Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HAT ISLAND TEL CO</u>					
Signature of authorized officer or employee <u>Lei McManus</u>				Digitally signed by Lei McManus DN:cn=Lei McManus,email=lei.mcmanus@whidbeytel.com,O=hat island tel co,l=Langley WA 98260, Date:3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Lei McManus</u>					
Title or position of authorized officer or employee: <u>Revenue Requirement Coordinator</u>					
Telephone number of authorized officer or employee: <u>360-321-0068</u>					
Study Area Code of Reporting Carrier		<u>522417</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HOOD CANAL TEL CO</u>					
Signature of authorized officer or employe <b>Richard F. Buechel</b>				<small>Digitally signed by Richard F. Buechel  DN: cn=Richard F.  Buechel, email=rbuechel@hcc.net, O=hood canal tel  co, l=Union WA 98592 Date: 3/17/2020</small>	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Richard F. Buechel</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>360-898-2481</u>					
Study Area Code of Reporting Carrier	<u>522419</u>	<div style="background-color: #cccccc; width: 50px; height: 30px;"></div>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	<div style="background-color: #cccccc; width: 50px; height: 30px;"></div>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KALAMA TEL CO</u>					
Signature of authorized officer or employe <u>Rick Vitzthum</u>				Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=kalama tel co,l=Tenino WA 98589, Date:3/16/2020 Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>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:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>ST. JOHN TEL.</u>					
Signature of authorized officer or employe <b>Eric Trump</b>				Digitally signed by Eric Trump DN:cn=Eric Trump,email=eric@stjohncable.com,O=st.john tel.,l=St. John WA 99171, Date:3/20/2020	
Date: <u>3/20/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TENINO TELEPHONE CO</u>					
Signature of authorized officer or employee <u>Rick Vitzthum</u>				Digitally signed by Rick Vitzthum DN:cn=Rick Vitzthum,email=rick@scattercreek.net,O=tenino telephone co, Tenino WA 98589, Date:3/16/2020 Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TOLEDO TELEPHONE CO</u>					
Signature of authorized officer or employe <b>Philip G. Cappalonga</b>				Digitally signed by Philip G. Cappalonga DN: cn=Philip G. Cappalonga, email=phil@toledotel.net, O=toledo telephone.co, l=Toledo WA 98591, Date: 3/18/2020	
Date: <u>3/18/2020</u>					
Printed name of authorized officer or employee: <u>Philip G. 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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WESTERN WAHIAKUM</u>					
Signature of authorized officer or employee <b>Carol Larson</b>				Digitally signed by Carol Larson DN:cn=Carol Larson,email=clarson@wwest.net,O=western wahkiakum,l=Rosburg WA 98643, Date:3/23/2020	
				Date: <u>3/23/2020</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>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>WHIDBEY TEL CO.</u>					
Signature of authorized officer or employee <b>Lei McManus</b>				Digitally signed by Lei McManus DN:cn=Lei McManus,email=lei.mcmanus@whidbeytel.com,O=whidbey tel co.,l=Langley WA 98260, Date:3/18/2020 Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Lei McManus</u>					
Title or position of authorized officer or employee: <u>Revenue Requirement Coordinator</u>					
Telephone number of authorized officer or employee: <u>360-321-0068</u>					
Study Area Code of Reporting Carrier	<u>522452</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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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FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>BEAVER CREEK COOP</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=beaver creek coop,l=Mt. Angel OR 97362, Date:3/23/2020 Date: <u>3/23/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CANBY TEL ASSN</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 tel assn,l=Mt. Angel OR 97362, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United 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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FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CLEAR CREEK MUTUAL</u>					
Signature of authorized officer or employee <u>Jason Henke</u>				Digitally signed by Jason Henke DN:cn=Jason Henke,email=jhenke@clearcreek.coop,O=clear creek mutual,l=Oregon City OR 97045, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>Jason Henke</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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 TEL CO</u>					
Signature of authorized officer or employee <b>Stephanie Sauvageau</b>				Digitally signed by Stephanie Sauvageau DN: cn=Stephanie Sauvageau, email=stephanie@coltontel.com, O=colton tel co, I=Colton OR 97017, Date: 3/26/2020	
Date: <u>3/26/2020</u>					
Printed name of authorized officer or employee: <u>Stephanie Sauvageau</u>					
Title or position of authorized officer or employee: <u>CFO</u>					
Telephone number of authorized officer or employee: <u>503-824-5863</u>					
Study Area Code of Reporting Carrier	<u>532364</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.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 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>EAGLE TEL SYSTEMS</u>					
Signature of authorized officer or employee		<u>Mike Lattin</u> <small>Digitally signed by Mike Lattin DN:cn=Mike Lattin,email=eagle@eagletelephone.com,O=eagle tel systems,j=Richland OR 97870, Date:3/19/2020</small>		Date: <u>3/19/2020</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>3/31/2020</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**

VOLUME 1  
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OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>GERVAIS-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-datavision,I=Gervais OR 97026, Date:3/18/2020	
Date: <u>3/18/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or 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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OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MOLALLA TEL CO.</u>					
Signature of authorized officer or employee <b>Terry Simms</b>				<small>Digitally signed by Terry Simms DN:cn=Terry Simms,email=TSimms@molalla.com,O=molalla tel co.,l=Molalla OR 97038, Date:3/16/2020</small> Date: <u>3/16/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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 Carrier Association, Inc.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>MONITOR COOP TEL</u>					
Signature of authorized officer or employee <u>Geri Fraijo</u>				<small>Digitally signed by Geri Fraijo DN:cn=Geri Fraijo,email=gerif@monitorcoop.net,O=monitor coop tel,l=Woodburn OR 97071, Date:3/17/2020</small> Date: <u>3/17/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 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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VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CANBY-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-mt angel,I=Mt. Angel OR 97362, Date:3/23/2020	
Date: <u>3/23/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>NEHALEM TELECOMM.</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 telecomm, I=Glenns Ferry ID 83623 Date: <u>3/18/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>OREGON-IDAHO UTIL.</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 util.,c=US, Date:3/17/2020	
				Date: <u>3/17/2020</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>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>PEOPLES TEL CO. - OR</u>					
Signature of authorized officer or employee <u>Curt Thornton</u>				Digitally signed by Curt Thornton DN:cn=Curt Thornton,email=curtt@wvi.com,O=peoples tel co. - or,l=Stayton OR 97383, Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					



**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SCIO MUTUAL TEL ASSN</u>					
Signature of authorized officer or employee <b>Deborah Hogan</b>				<small>Digitally signed by Deborah Hogan DN:cn=Deborah Hogan,email=debbie.hogan@smta.coop,O=scio mutual tel assn,l=Scio OR 97374, Date:3/18/2020</small> Date: <u>3/18/2020</u>	
Printed name of authorized officer or employee: <u>Deborah Hogan</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>503-394-3369</u>					
Study Area Code of Reporting Carrier	<u>532397</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>STAYTON COOP TEL CO</u>					
Signature of authorized officer or employee <b>Curt Thornton</b>				<small>Digitally signed by Curt Thornton DN:cn=Curt Thornton,email=curtt@wvi.com,O=stayton coop tel co,l=Stayton OR 97383, Date:3/19/2020</small> Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CALAVERAS TEL CO</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 tel co,l= , Date:3/19/2020 Date: <u>3/19/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>FORESTHILL-SEBASTIAN</u>					
Signature of authorized officer or employee <b>David D. Clark</b>				Digitally signed by David D. Clark DN:cn=David D. Clark,email=dclark@sebastiancorp.com,O=foresthill-sebastian,I=Kerman CA 93630, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>David D. 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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>KERMAN TEL-SEBASTIAN</u>					
Signature of authorized officer or employee <b>David D. Clark</b>				Digitally signed by David D. Clark DN:cn=David D. Clark,email=dclark@sebastiancorp.com,O=kerman tel-sebastian,j=Kerman CA 93630, Date:3/23/2020 Date: <u>3/23/2020</u>	
Printed name of authorized officer or employee: <u>David D. 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>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>THE PONDEROSA TEL CO</u>					
Signature of authorized officer or employee <b>Fred Lofy</b>				Digitally signed by Fred Lofy DN:cn=Fred Lofy,email=fredl@ponderosatel.com,O=the ponderosa tel co,l=O'Neals CA 93645, Date:3/17/2020	
Date: <u>3/17/2020</u>					
Printed name of authorized officer or employee: <u>Fred Lofy</u>					
Title or position of authorized officer or employee: <u>Controller</u>					
Telephone number of authorized officer or employee: <u>559-868-6376</u>					
Study Area Code of Reporting Carrier	<u>542332</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>SIERRA TELEPHONE CO</u>					
Signature of authorized officer or employe <b>Cynthia A. Huber</b>				Digitally signed by Cynthia A. Huber DN:cn=Cynthia A. Huber,email=cindyh@stcg.net,O=sierra telephone co,l=Oakhurst CA 93644, Date:3/25/2020 Date: <u>3/25/2020</u>	
Printed name of authorized officer or employee: <u>Cynthia A. Huber</u>					
Title or position of authorized officer or employee: <u>President</u>					
Telephone number of authorized officer or employee: <u>559-642-0209</u>					
Study Area Code of Reporting Carrier	<u>542338</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**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>Siskiyou Telephone Company</b>				
Signature of authorized officer or employee <i>James T. Lowers</i>			Date <b>03/17/2020</b>	
Printed name of authorized officer or employee <b>James T. Lowers</b>				
Title or position of authorized officer or employee <b>President</b>				
Telephone number of authorized officer or employee: ( 530 ) 467 - 6000 , ext.				
Study Area Code of Reporting Carrier <b>542339</b>		Filing Due Date for this form (mm/dd/yyyy) <b>3/31/2020</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**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>VOLCANO TEL CO</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 tel co,l=Pine Grove CA 95665, Date:3/19/2020	
Date: <u>3/19/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>CHURCHILL-CC COMM.</u>					
Signature of authorized officer or employee <b>Mark Feest</b>				Digitally signed by Mark Feest DN:cn=Mark Feest,email=mark.feest@ccomm.co,O=churchill-cc comm.,l=Fallon NV 89407, Date:3/24/2020	
Date: <u>3/24/2020</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>3/31/2020</u>		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**


VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>HUMBOLDT TEL CO</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=humboldt tel co,l=Nampa ID 83651, Date:3/17/2020	
Date: <u>3/17/2020</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>553304</u>		Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

FCC Form 508  
Connect America Fund Broadband Loop Support  
Mechanism  
Projected Annual Common Line Revenue Requirement FormFCC 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>			
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>Sandwich Isles Communications, Inc.</u>			
Signature of authorized officer or employee 			Date <u>3/24/20</u>
Printed name of authorized officer or employee <u>Breanne Kahalewai</u>			
Title or position of authorized officer or employee <u>President</u>			
Telephone number of authorized officer or employee: ( <u>808</u> ) <u>524</u> - <u>8400</u> , ext. _____			
Study Area Code of Reporting Carrier	<u>623021</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>3/31/2020</u>
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.			

**FCC Form 508**  
**Connect America Fund Broadband Loop Support Mechanism**  
**Projected Annual Common Line Revenue Requirement Form**

VOLUME 1  
FCC Form 508 APPENDIX D  
OMB Control No. 3060-0972 EXHIBIT 4

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING FORM 508 ON THE CARRIER'S BEHALF:

<b>Certification of Officer or Employee to Authorize an Agent to File FCC Form 508, Interstate 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.</u> is authorized to submit the information reported on FCC Form 508 on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring the accuracy of the Connect America Fund-Broadband Loop Support Mechanism projected revenue requirement information provided to the authorized agent; and, to the best of my knowledge, the Connect America Fund-Broadband Loop Support Mechanism projected revenue information provided to the authorized agent is accurate. Further, I certify that the cost data provided is compliant with the Commission's cost allocation rules and does not reflect duplicative assignment of cost to the consumer 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>TELEGUAM HOLDINGS</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, =Tamuning GU 96913, Date:3/25/2020 Date: <u>3/25/2020</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>3/31/2020</u>	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					